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# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

20 11 2010, and ending For the 2010 calendar year, or tax year beginning 9-1 D Employer identification number C Name of organization Tulsa County Farm Bureau Check if applicable: 73-0669786 Doing Business As Address change Room/suite E Telephone number Number and street (or P.O box if mail is not delivered to street address) Name change 918.369.9990 10777 S. Memorial Dr. **7** Initial return City or town, state or country, and ZIP + 4 Terminated G Gross receipts \$ 707.585.85 Tulsa, OK 74133 Amended return F Name and address of principal officer: Wayne Herriman H(a) is this a group return for affiliates? Yes No Application pending P.O. Box 27, Collinsville, OK 74021 If "No," attach a list. (see instructions) 501(c) ( 5 ) ◀ (insert no.) ☐ 4947(a)(1) or 501(c)(3) Tex-exempt status. H(c) Group exemption number ▶ Website: > M State of legal domicile: Form of organization: 🗸 Corporation 🗌 Trust Association ☐ Other ► L Year of formation: Summary Briefly describe the organization's mission or most significant activities: Agricultural Membership Organization Governance Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . 6 Activities & Number of independent voting members of the governing body (Part VI, line 1b) 4 6 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 Ф. 5 6 6 Total number of volunteers (estimate if necessary) . . . . . . . . . Total unrelated business revenue from Part VIII, column (C). line 12 7a 338.794.58 Net unrelated business taxable income from Form 990-T, line 34 68,678.70 Current Year Contributions and grants (Part VIII, line 1h) 134,895.00 105,236.00 R Revenue Program service revenue (Part VIII, line 28) 9 Investment income (Part VIII, column (A), lines 3,4, and 7d), 10 10.772.38 6,636.10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 336,380.16 331,844.08 Total revenue - add lines 8 through 11 (must-equal Part VIII, column (A) (lihe 12) 482,047.54 443,716.18 12 Grants and similar amounts paid (Partix, column (A) lines 1-3 13 Benefits paid to or for members (Part IX, column (A), line 4) 60,813.49 60,300.81 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 227,995.00 231,359.31 15 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ TO MENANTAL AND A STATE OF THE 激起风险作品 160,362.69 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 135,704.35 17 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 424,000.16 18 452,535.49 19 Revenue less expenses. Subtract line 18 from line 12 19,716.02 29,512.05 End of Year **Beginning of Current Year** 8 3,206,006.42 20 Total assets (Part X, line 16) 3,262,834,74 21 Total liabilities (Part X, line 26) . 2,456,335.94 2,379,791.60 Net assets or fund balances. Subtract line 21 from line 20 826,214.82 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer 1-5-12 Here Type or print name and title Print/Type preparer's name Preparer's si Date Check [] if self-employed Paid UARN Preparer Oklahoma Farm Bureau 73-0382001 Firm's EIN ▶ **Use Only** Firm's address ▶ 2501 N. Stiles, Oklahoma City, OK 73105 405.523.2300 Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) ✓ Yes 
☐ No. For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2010)

Cat. No. 11282Y

Form 99	0 (2010)	Page 2
Part	Statement of Program Service Accomplishments Check if School to Constains a representation in this Port III	
1	Check if Schedule O contains a response to any question in this Part III	<u>· Ц</u>
•	Agricultural membership Organization	
		- <b>-</b>
		**
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	✓ No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	✓ No
4	If "Yes," describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. S	
•	501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocation others, the total expenses, and revenue, if any, for each program service reported.	ons to
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$	<del></del>
-10	/ (Codd)/ (Codd) \$\psi	,
	***************************************	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$	1
~~	(Codo) (Expended #) Indicating grants of #	,
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$	<u> </u>
		,
4d	Other program services. (Describe in Schedule O.)	
<b>++</b> Cl	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ▶	

Part	Checklist of Required Schedules			T
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	[	Yes	No
•	complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi- endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	1975 - 1974	C to 12 200 .	
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		K 1862 W 122 JULY
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	128		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a	-	1
 b	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		1
p	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		1

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<b>*</b>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond Issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<b>✓</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			•
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>\</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<u>√</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u>√</u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		1
а	Did the organization receive any payment from or engage in any transaction with a	<u>~</u>		
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,  Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	37		<u> </u>
			n <b>990</b>	(2010)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			Page
	Check if Schedule O contains a response to any question in this Part V			. [
			Yes	No
18	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a -0		13.4	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	•	NO.	123
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
٥	reportable gaming (gambling) winnings to prize winners?	1c	100 to 10	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		13/2	
	Statements, filed for the calendar year ending with or within the year covered by this return  2a		£	20
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	8 4° 2 193	t a besieve
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a _	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<b>√</b>	-
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	1	₩
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4-		1
b	If "Yes," enter the name of the foreign country: ▶	4a	e e e e e e e e e e e e e e e e e e e	(1,2250.)
	See Instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		19253
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		┯
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-		$\vdash$
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			Ť
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	MEA.	1234 3	193
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		建省	1
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		ĺ	
	required to file Form 8282?	7c		
ď	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<u>7</u> e		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	-
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b></b>
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h	HER. IL	The said
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	147	
9	Sponsoring organizations maintaining donor advised funds.	<b>8</b> 37	1 2	1722
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<del>                                     </del>
10	Section 501(c)(7) organizations. Enter:		111	(gr)
а	Initiation fees and capital contributions included on Part VIII, line 12	The state of	19.7 (g)	ر لفرد
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		200	
11	Section 501(c)(12) organizations. Enter:			¥ .
а	Gross income from members or shareholders		38.7	in i
b	Gross income from other sources (Do not net amounts due or paid to other sources		1. 4	
	against amounts due or received from them.)		12/	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1.25.	. K	, ,
13	Section 501(c)(29) qualified nonprofit health Insurance issuers.	100	, ê	1.75
9	Is the organization licensed to issue qualified health plans in more than one state?	149-	1	1

Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Did the organization receive any payments for indoor tanning services during the tax year? .

the organization is licensed to issue qualified health plans

14a

13b

13c

Commo	- CEU-107			ago o
Part '	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang O. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI		<u>.</u>	
Section	on A. Governing Body and Management			
		D	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>/</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>✓</b>
6	Does the organization have members or stockholders?	6	✓	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		,	
_	of the governing body?	7a	<b>V</b>	
ь 8	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during	7b	774 Y	Hatter Card
٥	the year by the following:			
	The governing body?	8a		A 12 - A
a b	Each committee with authority to act on behalf of the governing body?	8b	7	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	0.0	_	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		<b>✓</b>
b	If "Yes," does the organization have written policies and procedures governing the activities of such			
	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? .	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<b>✓</b>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		✓
14	Does the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1	
а	The organization's CEO, Executive Director, or top management official	15a		✓_
þ	Other officers or key employees of the organization	15b	Markey / Staffer	p-na (Mar I
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		* 1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed    Oklahoma  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 for public inspection. Indicate how you make these available. Check all that apply.	)s ont	y) ava	ilable
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of and financial statements available to the public.	of inte	rest p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Oklahoma Farm Bureau, 2501 N. Stiles, Oklahoma City, OK 73105 405.523.2300	of the	)	

	7
PAGA	

Form		

		-6-
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	
	and Independent Contractors	
	Check if Schedule O contains a response to any question in this Part VII	

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - · List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization no (A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	` ' '					ply)	Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	Individual tr or director	,		Key employee	Highest compensated employee	Former		compensation from related organizations (W-2/1099-MISC)	
(1) Schedule Attached										
(2)	-	-								
(3)	-									
_(4)										
(5)	-									
(6)	-							-		_
(7)	<del>                                     </del>		-							
(8)	-									
(9)	_									
(10)			-						,	·
(11)										
(12)	_									
(13)										
(14)	-		<u> </u>				-			
(15)										
(16)		-	-							

	(A) Name and title	(B) (C) Average Position (check all that appl						nlv)	(D) Reportable	(E) Reportat	ole	(F) Estimated
		hours per week (describe hours for related organizations in Schedule O)	Individual tr	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation related organizati (W-2/1099-I	n from I ions	amount of other compensation from the organization and related organizations
(17)												
(18)												
(19)												
(20)							_			<u> </u>		
(21)												
(22)					ľ							
(23)							_				_	
(24)											-	
(25)											+	
(26)											+	
(27)								-			-	
(28)					-		_	_			-	
	Sub-total	<u> </u>	<u> </u>	<u> </u>	<u>.                                    </u>	L	<u> </u>	<u> </u>				
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)							<b>▶</b>				
2	Total number of individuals (including but reportable compensation from the organi	not limited					above	e) w	no received me	ore than \$1	00,000	in
3	Did the organization list any former of employee on line 1a? If "Yes," complete:	fficer, direc						mp	loyee, or high	est compe	ensated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual											
5	Did any person listed on line 1a receive of for services rendered to the organization									ration or in	dividual	5
Secti	on B. Independent Contractors											<del></del>
1	Complete this table for your five highest compensation from the organization.	compensat	ed ind	dep	end	ent	contr	acto	ors that receive	ed more tha	an \$100,	,000 of
	(A) Name and business add	ress							(B) Description of s	ervices	C	(C) Compensation
								_				
2	Total number of independent contractor received more than \$100,000 in compens							th	nose listed ab	ove) who		

Parl	VIII	Statement of Rev	enue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ffs, grants r amounts	1a b c d	Federated campaigns Membership dues . Fundraising events . Related organizations	[	1a				
Contributions, gifts, grants and other similar amounts	e	Government grants (contact All other contributions, gi and similar amounts not inc	tributions) fts, grants, luded above	1e				
	g h	Noncash contributions includ Total. Add lines 1a-11		>	105,236.00			
Program Service Revenue	2a b c			Business Code				
Program S	e f g	All other program serv Total. Add lines 2a-2i Investment income	i					
	4 5	and other similar amo Income from investment	unts)	▶ pt bond proceeds ▶	6,636.10			6,636.10
	6a b	Gross Rents Less: rental expenses	(i) Real 332,21 263,86	9.67				
	c d 7a	Rental income or (loss)  Net rental income or ( Gross amount from sales of assets other than inventory	68,34 loss) (i) Securitie		68,343.03	(6,950.50)	75,293.53	
	ь	Less: cost or other basis and sales expenses .						
•	d	Gain or (loss)						
Other Revenue	8a	Gross income from fu events (not including \$ of contributions reporte See Part IV, line 18		j. a				
	b c 9a	Less: direct expenses Net income or (loss) fi Gross income from ga See Part IV, line 19	rom fundrai					
	6 C 10a	Less: direct expenses Net income or (loss) for Gross sales of in returns and allowance	rom gaming ventory, le					
	b c	Less: cost of goods s Net income or (loss) fi Miscellaneous R	rom sales o	Business Code			and the same of th	
	11a b c	Office Commissions Office Commissions Salary Reimbursemen All other revenue	t	524113 524126 524126	6,302.34 228,312.82 28,885.89		6,302.34 228,312.82 28,885.89	
	d e 12	Total. Add lines 11a- Total revenue. See in			263,501.05 443,716,18	·	338.794.58	6.636.10

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	60,300.81			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	210,995.29			
9	Other employee benefits	10 000 74			
10 11	Payroli taxes	16,999.71			
a	Management				:
b	Legal				
c	Accounting	560.00			
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17		No. Of the Control of	3. 25 P. M. L. O. M.	
f	Investment management fees				
9 12	Other	5,389.86			
13	Office expenses	11,364.13			
14	Information technology	11,004.10		<u> </u>	
15	Royalties		-	-	· · · · · · · · · · · · · · · · · · ·
16	Occupancy	46,520.93			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	20,177.76			
21	Payments to affiliates	20.010.05			
22 23	Depreciation, depletion, and amortization . Insurance	20,619.65			
24	Other expenses, Itemize expenses not covered	14,056.88	Lating the second		SPERIOR LOCK AR 2011 G
24	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column	NEW YORK	JS 1900 AND 1		
	(A) amount, list line 24f expenses on Schedule O.)				
а	Federal Income Taxes	9,450.80			A CONTRACT OF THE CONTRACT OF
þ	State Income Taxes	3,791.05			
C	Postage	3,733.29			
d	Employee Benefits	40.00		<u> </u>	
e	All other expenses	<u> </u>			<u> </u>
25	All other expenses	424 000 40	<del></del>	ļ	
26	Joint costs. Check here ▶☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	424,000.16			

	art X	Balance Sheet	(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	86,339.42	1	120,028.51
	2	Savings and temporary cash investments	357,575.22	2	364,192.78
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	2,844.69	4	3,786.20
ø	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
\$	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	23,000.00	9	13,549.20
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 3,485,460.32			
	ь	Less: accumulated depreciation 10b 781,010.59	2,793,075.41	10c	2,704,449.73
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,262,834.74	16	3,206,006.42
	17	Accounts payable and accrued expenses	758.50	17	906.50
	18	Grants payable		18	
	19 20	Deferred revenue		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.  Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	2,455,577.44	24	2,378,885.10
	25	Other liabilities. Complete Part X of Schedule D	2,100,07711	25	2,0,0,000.10
	26	Total liabilities. Add lines 17 through 25	2,456,335.94	-=-	2,379,791.60
	<del></del>	Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
aŭ	27	Unrestricted net assets		27	1 Page 100 100 100 100 100 100 100 100 100 10
38	28	Temporarily restricted net assets		28	
Þ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 30 through 34.			
ŝ	30	Capital stock or trust principal, or current funds		30	
28	31	Pald-in or capital surplus, or land, building, or equipment fund		31	
ã	32	Retained earnings, endowment, accumulated income, or other funds .	806,498.80		826,214.82
-		Total net assets or fund balances	806,498.80	33	826,214.82
¥ E	33 34	Total liabilities and net assets/fund balances	3,262,834.74		3,206,006.42

		•
Pana	7	12

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Form 9	90 (2010)			Pa	ge 12
Pari	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	11		443,7°	16 18
2	Total expenses (must equal Part IX, column (A), line 25)	2		424,0	
3	Revenue less expenses. Subtract line 2 from line 1	3			16.02
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		806.4	
5	Other changes in net assets or fund balances (explain in Schedule O)	5		000,4	30.00
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	<del></del>			
	column (B))	6		826,2°	14.82
Part					
	Check if Schedule O contains a response to any question in this Part XII				П
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	ELIZERIS/ET.	- I
b	Were the organization's financial statements audited by an independent accountant?		2b		1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account	_	2c		<del></del> -
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain in	1.5		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the ye issued on a separate basis, consolldated basis, or both:	ar were	48		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			18	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth in	3a		asi ::1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		<u> </u>
				n <b>990</b>	(201M
					~~.0)

#### SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

and section 527

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

OMB No. 1545-0047

If the organiza	tion enswered "Yes	s," to Form 990, Part IV, line 3, or For	m 990-EZ, Part V, I	line 46 (Politic	cal Campaign	Activities), then
_		: Complete Parts I-A and B. Do not con		•		
Section 50	11(c) (other than secti	ion 501(c)(3)) organizations: Complete F	Parts I-A and C belo	w. Do not cor	mplete Part I-B.	
	7 organizations: Con				•	
	•	s," to Form 990, Part IV, line 4, or Fon	m 990-EZ, Pert VI,	line 47 (Lobb	ving Activities	), then
		that have filed Form 5768 (election und				• •
		that have NOT filed Form 5768 (election	,,,			
		s," to Form 990, Part IV, line 5 (Proxy				•
=		anizations: Complete Part III.	,,	, ,		·····//
Name of organ	<del> </del>		•	1	Employer idea	ntification number
<b>Tulsa County</b>	Farm Bureau					73-0669786
Part I-A	Complete if th	e organization is exempt und	er section 501(	c) or is a s	ection 527	organization.
		the organization's direct and indire				
	•		•	•	_	<b>6</b>
3 Volunt	eer hours					
Part I-B	Complete if th	e organization is exempt und	er section 501(	c)(3).		
1 Enter	the amount of any	excise tax incurred by the organiza	ation under sectio	n 4955 .	> \$	3
2 Enter	the amount of any	excise tax incurred by organization	n managers under	r section 495	55 ▶ \$	}
3 If the c	organization incurr	ed a section 4955 tax, did it file Fo	rm 4720 for this y	ear?		Yes No
4a Wasa	correction made?					Yes No
b If "Yes	," describe in Part	IV.				
Part I-C	Complete if th	e organization is exempt und	er section 501(	c), except	section 501	(c)(3).
1 Enter th	ne amount directly	expended by the filing organization	ation for section	527 exemp	t function	
activitie	<b>s</b>				<b>&gt;</b> \$	i
2 Enter th	e amount of the	filing organization's funds contrib	uted to other org	ganizations f	or section	
	mpt function activi					<b>;</b>
3 Total ex	kempt function ex	xpenditures. Add lines 1 and 2.	Enter here and	on Form 1	1120-POL,	**
line 17b	·				🕨 \$	•
4 Did the	filing organization	file Form 1120-POL for this year?				Yes 🗸 No
5 Enter th	e names, addresse	es and employer identification num	ber (EIN) of all se	ection 527 p	olitical organi	zations to which the filing
organiza	ition made paymei	nts. For each organization listed, e	nter the amount	paid from the	e filing organi	ization's funds. Also ente
		ntributions received that were pron				
as a sep	arate segregated	fund or a political action committee	(PAC). If addition	nal space is i	needed, provi	de information in Part IV.
(1	a) Name	(b) Address	(c) EIN	filing on	int paid from ganization's one, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0
(1)						
(2)	-					
(3)						
(4)					·	
(5)					*** ***	
				-		<del> </del>
(6)			1	1		

Pα	n	A	2

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SÇN	IBOURE C (FORM SOU OF SOUTEZ) 20 IU					Page ∠
Pa	crt II-A Complete if the organization 501(h)).	on is exempt ı	ınder section 50	)1(c)(3) and file	d Form 5768 (ele	ection under
	Check ▶ ☐ if the filing organization b					
B_	Check ► ☐ if the filing organization c			rol" provisions a	ipply.	
		bying Expendit			(a) Filing	(b) Affiliated
	(The term "expenditures" n	neans amounts	paid or incurred.	)	organization's totals	group totals
1	1a Total lobbying expenditures to influence	e public opinion	(grass roots lobby	ing)		
	b Total lobbying expenditures to influence	e a legislative bo	ody (direct lobbying	3)		
	c Total lobbying expenditures (add lines	1a and 1b) .				
	${f d}$ Other exempt purpose expenditures .					
	e Total exempt purpose expenditures (ac	dd lines 1c and 1	d)			
	f Lobbying nontaxable amount. Enter columns.	the amount fr	om the following	table in both		
	If the amount on line 1e, column (a) or (b) i	s: The lobbying	nontaxable amount	is:		AND MENT IN
	Not over \$500,000	20% of the an	nount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
	g Grassroots nontaxable amount (enter 2					· <del>-</del> ·
	h Subtract line 1g from line 1a. If zero or					
	I Subtract line 1f from line 1c. If zero or I					
	j If there is an amount other than zero					☐ Yes ☐ No
	reporting section 4911 tax for this year	<u> </u>			• • • • •	☐ 163 ☐ 140
	(Some organizations that m	ade a section 5 . See the instru	ctions for lines 2a	not have to com through 2f on p		9
	Lobbyin	g Expenditures	During 4-Year Av	reraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	( <b>d)</b> 2010	(e) Total
2	2a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))	- 100 P				
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

	(election under section 501(h)).	li li	a)	<del></del>	(b)	
		Yes	No	A	moun	rt
1	During the year, did the filing organization attempt to influence foreign, national, state or local	NEE CO	Big S	\$1955 A	11. 11. 11. 11. 11. 11. 11. 11. 11. 11.	
•	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of:					
а	Volunteers?	EXCEPTE	*7.4-E			E.Y.
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		ļ —	THE STATE OF		17
C	Media advertisements?			ickie in 1 1 13	i e real i	********
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?				•	
f	Grants to other organizations for lobbying purposes?				•	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u> </u>				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
i	Total. Add lines 1c through 1i		, way			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	and the	a-386-225	17. TA		
b	If "Yes," enter the amount of any tax incurred under section 4912	334	3142C	Marie Car	- H	- Wallie
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
ď	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	A.78.78.09		C. 36		
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	)(5), <b>(</b>	or se	ction	SCH FORCLA VI	4-9247-X-2
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	✓	<u>L</u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year? .			3		<b>V</b>
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, I "Yes."				ed	
1	Dues, assessments and similar amounts from members		1	l		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts	s of	1			
	political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
c	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	the				
•	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?		4	1		
5	Taxable amount of lobbying and political expenditures (see instructions)		5			-0
Part				<del></del>		
	elete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5;	and P	art II-	B. line	1i. Al	so.
	lete this part for any additional information.			_,		,

Schedule C (For	chedule C (Form 990 or 990-EZ) 2010 Page <b>4</b>						
Part IV	Supplemental Information (continued)						
		***************************************					
	**************************************	***************************************					
	***************************************						
~~~~~							
	**************************************						
	······································						
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	**************************************						
	<u>.                                    </u>						
·	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>						

#### SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Inspection

Employer identification number

**Tulsa County Farm Bureau** 73-0669786 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . Aggregate contributions to (during year) . Aggregate grants from (during year) . . Aggregate value at end of year . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . . 2a Total acreage restricted by conservation easements . . . . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c C Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 . . . . . . . . If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: b Assets included in Form 990, Part X .

Par	Organizations Maintaining	Collections of	Art, His	torica	I Treasures	<u>, or Ol</u>	ther Similar A	issets (d	conti	nued)
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	rds, ch	eck any of th	e follov	wing that are a	significa	nt us	e of its
•	Public exhibition			п.	oon or oveba					
a _			đ		oan or excha	nge pro	ograms			
b	Scholarly research		8	\	Other					
C	Preservation for future generation			-1	سم طاهان که درما ها در	Ab				to Dod
4	Provide a description of the organiza XIV.	tion's collections	and expi	ain nov	v tney lurtner	tne org	janization's exe	empt pur	pose	in Part
5	During the year, did the organization assets to be sold to raise funds rather								٠	<b>—</b>
Dori	IV Escrow and Custodial Arra			-	_					□ No
rail	line 9, or reported an amour					answe	THU THE TOP	om 99	J, Pa	art iv,
18	Is the organization an agent, trustee									
<b>.</b>	included on Form 990, Part X? If "Yes," explain the arrangement in P							. 🗆,	Yes	☐ No
b	ir res, explain the arrangement in P	an Aiv and compi	ere rue u	oliowinį	g table:		1	Amount		
c	Beginning balance					10				
ď	Additions during the year					1d				
e	Distributions during the year					1e	<del></del>			
f	Ending balance					11				
2a	Did the organization include an amou			217			<u> </u>		/ <u>a</u> g	☐ No
	If "Yes," explain the arrangement in P		<b></b>			• •		• 🗀	103	
Pari			zation a	nswere	ed "Yes" to F	orm 9	90. Part IV. lin	e 10		
		(a) Current year	<del>•</del>	or year			(d) Three years ba		ur yea	rs back
1a	Beginning of year balance		1							
b	Contributions							- 0 K 1965		152 SA
c	Net investment earnings, gains, and						14 30 M		100	Carrier Co.
_	losses									
d	Grants or scholarships							1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0	CONTRACTOR	THE SE
8	Other expenditures for facilities and		· · · · · · · · · · · · · · · · · · ·				W. I. v. and a	ener er samme.	WAS T	75 27 39
_	programs					ļ				
f	Administrative expenses							200 81 134 10 C. 1 St. 15 ()	Services Services	<u>2010/146</u> 2010/161
g	End of year balance		·	-	<del></del>				1880 C	<u> </u>
2	Provide the estimated percentage of t	he vear end halar	rce held		<del>-                                    </del>		K HALLEY Y, SERVERSOR	@23 B4	B.W.F	TODE SEAL
-а	Board designated or quasi-endowmer	-	%							
b	Permanent endowment	%	′							
c	Term endowment ▶ %									
3a	Are there endowment funds not in the		he organi	zation	that are held	and ad	ministered for t	he		
	organization by:		4.9						Ye	s No
	(i) unrelated organizations							300		5 140
	(ii) related organizations			. , ,		• •		.  3a(i .  3a(i		+
b	If "Yes" to 3a(ii), are the related organ	izations listed as r	required (	on Sch	edule R2	• •	• • • •	3b	_	+
4	Describe in Part XIV the intended use					• •	• • • • •		—	
Part							····			
	Description of Investment	(a) Cost or o	ther basis	<del></del>	st or other basis		Accumulated	(d) Bo	ook val	lue
	Lond	(investrr	nent)	ļ	(other)		epreciation	-		
1a	Land	•		<del> </del>	670,222.66	. 1. tur	E CALL IS AND	<del></del>		,222.66
b	Buildings	•		<del> </del>	2,640,822.54		611,401.38		2,029	,421.16
C	Leasehold improvements	·		<del> </del>	474 447 55		400 000 00			
d	Equipment	•		<del> </del>	174,415.12		169,609.21		4,	,805.91
Total		nunt aqual 5a== 0	000 0	, , , , , , , , , , , , , , , , , , ,	man (D) !!== #	2611				
TOTAL.	Add lines 1a through 1e. (Column (d) r	riust equal romi 9	isu, Part	A, COIU	mn ( <b>s), line</b> 10	/(C).)			2,704	,449.73

Part VII	Investments-Other Securities	See Form 990, Part X,	line 12.	
	) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year n	
(1) Financia	derivatives			
(2) Closely-I	held equity interests			
(3) Other				<u></u>
(A)				
(B)				
(C)				
(D)				
(E) (F)				
(G)				
(H)				
(I)				
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 12.)		<b>国建设企业等的企业</b> 证明。	70/20 Text (Fig. 1)
Part VIII	Investments-Program Related	J. See Form 990, Part X,	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of ve Cost or end-of-year r	
(1)				
(2)				
(3)				
(4)		<u> </u>		
(5)				
(6)				<u>.                                    </u>
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶		ELANT TOTAL LANGE	
Part IX	Other Assets. See Form 990, Pa			T
	(	a) Description		(b) Book value
(1)				
(2)				
(3)				
<u>(4)</u> <u>(5)</u>		······································		
(6)		- 1111		-
(7)				
(8)				
(9)				
(10)				
	umn (b) must equal Form 990, Part X, c		<u> ▶</u>	
Part X	Other Liabilities. See Form 990		NAMES AND ASSESSMENT OF THE PROPERTY OF THE	AND THE PARTY OF T
1. (1) Fodom	(a) Description of liability I income taxes	(b) Amount		<b>"阿斯里</b> "(在海)
(2)	I filcome taxes			(4) 各國語《所法》
(3)				
(4)				
(5)				
(6)				
(7)		,		
(8)			] "阿拉克"的 "阿拉克" "阿拉" "阿拉克" "阿拉" "阿拉克" "阿拉" "阿拉" "阿拉" "阿拉" "阿拉" "阿拉" "阿拉" "阿拉	的 一种 医多种 医多种
(9)			The state of the s	· 中華 · · · · · · · · · · · · · · · · · ·
(10)				
(11)			I A THE BUILDING THE	· · · · · · · · · · · · · · · · · · ·
	(b) must equal Form 990, Part X, col. (B) line 25.)			
2. FIN 48 (	ASC 740) Footnote. In Part XIV, provide	e the text of the footnote to	the organization's financial state	ements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Schedu	e D (Form 990) 2010		Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	<b>Audited Financial Statem</b>	ents
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1
2	Total expenses (Form 990, Part IX, column (A), line 25)	[	2
3	Excess or (deficit) for the year. Subtract line 2 from line 1	[	3
4	Net unrealized gains (losses) on investments	[	4
5	Donated services and use of facilities	<b>-</b>	5
6	Investment expenses		6
7	Prior period adjustments		7
8	Other (Describe in Part XIV.)		8
9	Total adjustments (net). Add lines 4 through 8		9
10	Excess or (deficit) for the year per audited financial statements. Combine	e lines 3 and 9	10
Part	XII Reconciliation of Revenue per Audited Financial Statem	nents With Revenue per	Return
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
C	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)		
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)		
C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	9 12.)	5
Part	XIII Reconciliation of Expenses per Audited Financial States	ments With Expenses p	er Return
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
C	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		<b>3</b>
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
C	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)	5
Part	XIV Supplemental Information		
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XII ditional information.	d 9; Part III, lines 1a and 4; I II, lines 2d and 4b. Also com	Part IV, lines 1b and 2b; aplete this part to provide
			<del></del>
			-

Schedule D (Form 990) 2010 Page 5						
Part XIV	Supplemental Information (continued)					
		***************************************				
~		-				
#=====================================						
	4-2					
		-				

NAME: TAX NO. TAX YEAR ENDING Tulsa County Farm Bureau 73-0669786 8/31/2011

#### LIST OF OFFICERS, DIRECTORS AND TRUSTEES

(A) NAME AND ADDRESS	(B)	(C)	(D)	(E)
Wayne Herriman	PRESIDENT	NONE	NONE	NONE
P.O. Box 27 Collinsville 74021	4 HRS A MONTH			
Chuck Selman	VICE-PRESIDENT	NONE	NONE	NONE
501 E. 156th St S, Broken Arrow 74014	4 HRS A MONTH		_	
Robert Kirk	SECRETARY	NONE	NONE	NONE
20100 S. peoria Ave Mounds 74047	4 HRS A MONTH			
Melvin Keller	TREASURER	NONE	NONE	NONE
19701 E. 114th St S. Broken Arrow 74014	4 HRS A MONTH			
Mike Spradling	DIRECTOR	NONE	NONE	NONE
P.O. Box 434 Sand Springs 74063	4 HRS A MONTH			
Bret Mock	DIRECTOR	NONE	NONE	NONE
17441 W. 9th St, Sand Springs 74063	4 HRS A MONTH			