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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

- ▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
- ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

2010**Open to Public
Inspection**

A For the 2010 calendar year, or tax year beginning 10/1/2010, and ending 9/30/2011

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization Indiana Farm Bureau Delaware County Farm Bureau Inc.
 Number and street (or P O box, if mail is not delivered to street address) Room/suite
6100 State Road 67 N
 City or town state or country ZIP + 4
Muncie IN 47303-9227

D Employer identification number 35-0789885

E Telephone number (317) 692-7851

F Group Exemption Number ▶ 0963

G Accounting Method ☒ Cash ☐ Accrual Other (specify) ▶ _____

H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ n/a

J Tax-exempt status (check only one) — ☐ 501(c)(3) ☒ 501(c) (5) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 97,882

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)
 Check if the organization used Schedule O to respond to any question in this Part I ☒

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received	1		18	Excess or (deficit) for the year (Subtract line 17 from line 9)
2	Program service revenue including government fees and contracts	2		19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)
3	Membership dues and assessments	3	33,062	20	Other changes in net assets or fund balances (explain in Schedule O)
4	Investment income	4	64,820	21	Net assets or fund balances at end of year Combine lines 18 through 20
5a	Gross amount from sale of assets other than inventory	5a			
5b	Less: cost or other basis and sales expenses	5b			
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0		
6	Gaming and fundraising events				
6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a			
6b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b			
6c	Less: direct expenses from gaming and fundraising events	6c			
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	0		
7a	Gross sales of inventory, less returns and allowances	7a			
7b	Less: cost of goods sold	7b			
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0		
8	Other revenue (describe in Schedule O)	8			
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	97,882		
10	Grants and similar amounts paid (list in Schedule O)	10	7,406		
11	Benefits paid to or for members	11			
12	Salaries, other compensation, and employee benefits	12	3,768		
13	Professional fees and other payments to independent contractors	13	2,542		
14	Occupancy, rent, utilities, and maintenance	14			
15	Printing, publications, postage, and shipping	15	134		
16	Other expenses (describe in Schedule O)	16	95,030		
17	Total expenses. Add lines 10 through 16	17	108,880		

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Part II Balance Sheets. (see the instructions for Part II.)Check if the organization used Schedule O to respond to any question in this Part II ☒

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	179,760	22	178,138
23 Land and buildings	105,017	23	95,874
24 Other assets (describe in Schedule O)	691	24	479
25 Total assets	285,468	25	274,491
26 Total liabilities (describe in Schedule O)		26	21
27 Net assets or fund balances (line 27 of column (B) must agree with line 21).	285,468	27	274,470

Part III Statement of Program Service Accomplishments (see the instructions for Part III.)Check if the organization used Schedule O to respond to any question in this Part III ☒What is the organization's primary exempt purpose? See schedule O attached

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses
 (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 Farmers Feeding Neighbors is a program developed in conjunction is 2nd Harvest Food Bank, using 25 volunteers, to reach out to the agricultural community to donate commodities to feed the hungry. (Grants \$) If this amount includes foreign grants, check here ☐	28a	
29 We implemented an outreach program using educational videos on YouTube to educate students & general public about agriculture. The first video was created with 12+ volunteer hours & received over 3,000 views. (Grants \$) If this amount includes foreign grants, check here ☐	29a	
30 To educate local youth on agriculture, we support the local 4-H members with their projects & host Ag Days. The 5 Ag Day sessions teach elementary children about agriculture production. 11 volunteers helped (Grants \$) If this amount includes foreign grants, check here ☐	30a	
31 Other program services (describe in Schedule O). (Grants \$) If this amount includes foreign grants, check here ☐	31a	
32 Total program service expenses. (add lines 28a through 31a)	32	0

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (see the instructions for Part IV.)Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Kaye Whitehead 6100 State Road 67 North Muncie IN 47303-9227	Title President Hr/WK 5.00	2,390		
Joseph Russell 6100 State Road 67 North Muncie IN 47303-9227	Title Vice President Hr/WK 4.00	740		
Jana Adams 6100 State Road 67 North Muncie IN 47303-9227	Title Secretary Hr/WK 4.00	900		
Vickie Mitchell 6100 State Road 67 North Muncie IN 47303-9227	Title Women's Leader Hr/WK 4.00	485		
Kevin Adams 6100 State Road 67 North Muncie IN 47303-9227	Title Director Hr/WK 1.00	0		
Mike Behrendt 6100 State Road 67 North Muncie IN 47303-9227	Title Director Hr/WK 1.00	0		
Bev Berry 6100 State Road 67 North Muncie IN 47303-9227	Title Director Hr/WK 1.00	0		
Katherine Bothel 6100 State Road 67 North Muncie IN 47303-9227	Title Director Hr/WK 1.00	120		
David Coffman 6100 State Road 67 North Muncie IN 47303-9227	Title Director Hr/WK 1.00	0		
Kyle Crabtree 6100 State Road 67 North Muncie IN 47303-9227	Title Director Hr/WK 1.00	60		
FloraMae Cutforth 6100 State Road 67 North Muncie IN 47303-9227	Title Director Hr/WK 1.00	200		
Loyal Cutforth 6100 State Road 67 North Muncie IN 47303-9227	Title Director Hr/WK 1.00	130		
Donald Harris 6100 State Road 67 North Muncie IN 47303-9227	Title Director Hr/WK 1.00	0		

Part V Other Information (Note the statement requirements in the instructions for Part V.)Check if the organization used Schedule O to respond to any question in this Part V. ☒

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.		X
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions).		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?		X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N.		X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a 2,700		
b Did the organization file Form 1120-POL for this year?	X	
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved. 38b		
39 Section 501(c)(7) organizations Enter:		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 40a , section 4912 40a ; section 4955 40a		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.		
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. 40c		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization. 40d		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. 40e		
41 List the states with which a copy of this return is filed 41		
42 a The organization's books are in care of 42a Indiana Farm Bureau Inc. Telephone no. 42a (317) 692-7851		
Located at 42a 225 S. East Street City Indianapolis ST IN ZIP + 4 42a 46202		
b 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)?		X
If "Yes," enter the name of the foreign country: 42b		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42c		X
If "Yes," enter the name of the foreign country: 42c		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here 43		
and enter the amount of tax-exempt interest received or accrued during the tax year 43		
44 a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44a		X
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44b		X
c Did the organization receive any payments for indoor tanning services during the year? 44c		X
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 44d		

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?

	Yes	No
45		X
45a	n/a	
46	X	

a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ.

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II.

	Yes	No
47	n/a	
48	n/a	
49a	n/a	
49b	n/a	

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Name None	Title			
City ST ZIP	Hr/WK .00			
Name	Title			
City ST ZIP	Hr/WK .00			
Name	Title			
City ST ZIP	Hr/WK .00			
Name	Title			
City ST ZIP	Hr/WK .00			
Name	Title			
City ST ZIP	Hr/WK .00			

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

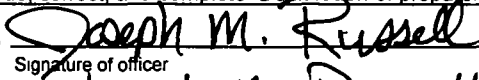
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Name None		
City ST ZIP		
Name		
City ST ZIP		
Name		
City ST ZIP		
Name		
City ST ZIP		
Name		
City ST ZIP		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1)

nonexempt charitable trusts must attach a completed Schedule A. ☐ Yes ☒ No

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 Here  Vice Chairman 3/27/2012
Signature of officer Date
 Type or print name and title

Paid Preparer's Use Only Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
Elaine Rueff Elaine Rueff 3/15/2012 ☐ P01464784
Firm's name Indiana Farm Bureau Inc. Firm's EIN 35-0409100
Firm's address PO Box 1290, Indianapolis, IN 46206 Phone no (317) 692-7851

May the IRS discuss this return with the preparer shown above? See instructions. ☒ Yes ☐ No

Page 1 of 1 of Part IV

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

- ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

OMB No 1545-0047

2010

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If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations. Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization	Employer identification number
Indiana Farm Bureau Delaware County Farm Bureau Inc.	35-0789885

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ 2,700
- 3 Volunteer hours 6

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ 2,700
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ 2,700
- 4 Did the filing organization file Form 1120-POL for this year? ☒ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) Bill Davis for State Representative	210 Williamson Drive Portland IN 47371		1,500	0
(2) Committee to Elect Larry Bledsoe Jr for Delaware	4605 S CR 575 E Selma IN 47383		300	0
(3) Committee to Elect Jeff Arnold for Prosecutor	2412 W Pineview Dr Muncie IN 47303		300	0
(4) Friends of Doug Eckerty	P.O. Box 55 Yorktown IN 47396		300	0
(5) Friends of L Jack Lutz	5070 Stonespring Way Anderson IN 46012		300	0
(6)			0	0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

(HTA)

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ☐ if the filing organization belongs to an affiliated group.
B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		0												
b	Total lobbying expenditures to influence a legislative body (direct lobbying)		0												
c	Total lobbying expenditures (add lines 1a and 1b)	0	0												
d	Other exempt purpose expenditures		0												
e	Total exempt purpose expenditures (add lines 1c and 1d)	0	0												
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	0	0												
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount 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 over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount 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 over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)	0	0												
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0	0												
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0	0												
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount				0	0
b Lobbying ceiling amount (150% of line 2a, column(e))					0
c Total lobbying expenditures				0	0
d Grassroots nontaxable amount				0	0
e Grassroots ceiling amount (150% of line 2d, column (e))					0
f Grassroots lobbying expenditures				0	0

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e 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?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If "Yes," describe in Part IV			
j Total. Add lines 1c through 1i			0
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	0
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 lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	0

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

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SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

Name of the organization

Employer identification number

Indiana Farm Bureau Delaware County Farm Bureau Inc

35-0789885

Form 990-EZ, Part I, Line 10, Grants Paid: Activity, Donation, Grantee: Indiana Agricultural

Law Foundation P.O. Box 1290 Indianapolis IN 46206-1290, Cash Grant: 5,000, Relationship:

Form 990-EZ, Part I, Line 16, Other Expenses: Travel: 4,778

Form 990-EZ, Part I, Line 16, Other Expenses: Meals and entertainment: 62

Form 990-EZ, Part I, Line 16, Other Expenses: Conferences, conventions, and meetings: 6,555

Form 990-EZ, Part I, Line 16, Other Expenses: Depreciation: 212

Form 990-EZ, Part I, Line 16, Other Expenses: Membership services: 33

Form 990-EZ, Part I, Line 16, Other Expenses: Ag Promotion: 11,501

Form 990-EZ, Part I, Line 16, Other Expenses: District Dues: 708

Form 990-EZ, Part I, Line 16, Other Expenses: Miscellaneous Expense: 524

Form 990-EZ, Part I, Line 16, Other Expenses: Building Expense for leased space: 67,957

Form 990-EZ, Part I, Line 16, Other Expenses: Political Contributions: 2,700

Form 990-EZ, Part II, Line 24, Other Assets: Equipment, net of accumulated depreciation:

Beginning of year: 691, End of year: 479

Form 990-EZ, Part II, Line 26, Liabilities: Accounts Payable: Beginning of year: 0, End of

year: 21

Form 990-EZ Part III Organization's primary exempt purpose: Represent the farmer's voice on

issues related to agriculture, educate the consumer and promote farm products, keep members

abreast of policies and new developments.

Form 990-EZ Part V Line 35A Program Service income is related to exempt organizations purpose.

It promotes agriculture in the community.

ASSET DEPRECIATION SHORT REPORT

DELAWARE COUNTY FARM BUREAU Sep. 15, 2012

Sorted ASSET A/C#

Method 1-FEDERAL-Std Conv Applied

Range 1600-00 - 1610-00

Include All assets

Date Acq	Description	Meth/Life	Cost	Section 179	Depr Basis	Includes Section 179		
						Beg A/Depr	Curr Depr	End A/Depr
ASSET A/C#: 1600-00 - BUILDING								
09/10/73	Building	ASL/50 00	284,965 53	0 00	284,965 53	210,860.53	5,699 00	216,559 53
10/20/86	HVAC system	MACRS/31 50	10,210 00	0 00	10,210 00	7,776 00	324 00	8,100 00
05/31/88	Roof, Valleys Bay Door	MSL/31 50	3,953 00	0 00	3,953 00	2,427 00	125 00	2,552 00
09/27/89	Roof, new	MSL/20 00	6,539 43	0 00	6,539 43	6,539 43	0 00	6,539 43
09/27/89	Flashing & gutters	MSL/15 00	2,100 00	0 00	2,100 00	2,100 00	0 00	2,100 00
11/15/90	HVAC in NE section	ASL/50 00	7,079 00	0 00	7,079 00	2,970 00	142 00	3,112 00
10/10/91	Brck work in rear	MSL/20 00	2,444 00	0 00	2,444 00	2,444 00	0 00	2,444 00
11/22/91	Gutter and Repair (for ice damage)	MSL/20 00	27,939 00	0 00	27,939 00	27,707 00	232 00	27,939 00
02/20/92	Hall & Boardroom Ceiling	MSL/10 00	7,389 00	0 00	7,389 00	7,389 00	0 00	7,389 00
11/30/95	Well Pump	MSL/15 00	726 05	0 00	726 05	726 05	0 00	726 05
04/09/96	Carpet front office	MSL/10 00	4,669 94	0 00	4,669 94	4,669 94	0 00	4,669 94
11/19/97	Emergency lighting	MSL/15 00	1,330 00	0 00	1,330 00	1,246 00	84 00	1,330 00
03/05/98	Kitchen remodel	MSL/15 00	3,810 32	0 00	3,810 32	3,429 32	254 00	3,683 32
05/21/98	Parking lot, repaved	MSL/10 00	20,200 00	0 00	20,200 00	20,200 00	0 00	20,200 00
05/04/99	Front Doors	MSL/15 00	3,119 50	0 00	3,119 50	2,565 50	208 00	2,773 50
05/04/99	Roof repairs	MSL/20 00	12,337 30	0 00	12,337 30	7,712 30	617 00	8,329 30
09/30/00	Roof repairs	MSL/20 00	5,488 00	0 00	5,488 00	3,014 00	274 00	3,288 00
Grand totals	1600-00 - BUILDING (17 assets)		404,300 07	0 00	404,300 07	313,776 07	7,959 00	321,735 07

ASSET A/C#: 1610-00 - FURNITURE & EQUIPMENT

09/16/66	Chairs	MA200/ 7 00	84 00	0 00	84 00	84 00	0 00	84 00
04/01/73	Garment Racks & Hangers	MA200/ 7 00	230 43	0 00	230 43	230 43	0 00	230 43
09/01/73	Chairs, stack (25 ea)	MA200/ 7 00	110 00	0 00	110 00	110 00	0 00	110 00
09/01/73	Chair caddy	MA200/ 7 00	36 70	0 00	36 70	36 70	0 00	36 70
09/01/73	Table caddy	MA200/ 7 00	38 00	0 00	38 00	38 00	0 00	38 00
11/01/74	Chairs, Krueger (40 ea)	MA200/ 7 00	259 00	0 00	259 00	259 00	0 00	259 00
05/01/76	P A System	MA200/ 7 00	200 00	0 00	200 00	200 00	0 00	200 00
06/01/77	Tables (8 ea)	MA200/ 7 00	399 60	0 00	399 60	399 60	0 00	399 60
03/01/79 D	Tables (60)	MA200/ 7 00	329 97	0 00	329 97	329 97	0 00	329 97
04/01/79	Chairs, Krueger (48 ea)	MA200/ 7 00	328 47	0 00	328 47	328 47	0 00	328 47
11/01/86	Television, Sharp 25"	MA200/ 7 00	219 46	0 00	219 46	219 46	0 00	219 46
02/01/97	Crate Sound System	MSL/10 00	799 90	0 00	799 90	799 90	0 00	799 90
03/27/06	Sound System	M*200/ 7 00	594 00	0 00	594 00	514 00	53 00	567 00
04/10/07	LCD Projector	M*200/ 7 00	709 97	0 00	709 97	551 00	64 00	615 00
07/24/08	10 Long Tables	MA200/ 7 00	770 08	0 00	770 08	530 00	69 00	599 00
Grand totals 1610-00 - FURNITURE & EQUIPMENT (15 assets)			5,109 58	0 00	5,109 58	4,630 53	186 00	4,816 53
Less 1 Disposed assets (Current Depreciation \$0 00)			329 97	0 00	329 97	329 97		329 97
Net totals 1610-00 - FURNITURE & EQUIPMENT (14 assets)			4,779 61	0 00	4,779 61	4,300 56	186 00	4,486 56
Grand totals for all accounts: (32 assets)			409,409 65	0 00	409,409 65	318,406 60	8,145 00	326,551 60
Less: 1 Disposed assets (Current Depreciation: \$0.00)			329 97	0 00	329 97	329 97		329 97
Net totals for all accounts: (31 assets)			409,079 68	0 00	409,079 68	318,076 63	8,145 00	326,221 63

Codes that may appear next to the date acquired include: A - Addition, D - Disposal, T - Traded, MQ - Mid Quarter Applied

Additional Summary Statistics:	Cost	Curr Yr 179	Prior Yr 179	Depr Basis	Beg A/Depr	Curr Depr	Ending A/Depr	Net Book Val
Grand Totals for All Assets	409,409 65	0 00	0 00	409,409 65	318,406 60	8,145 00	326,551 60	82,858 05
Less Inactive Assets	0 00	0 00	0 00	0 00	0 00	0 00	0 00	0 00
Disposed Assets	329 97	0 00	0 00	329 97	329 97	0 00	329 97	0 00
Traded Assets	0 00	0 00	0 00	0 00	0 00	0 00	0 00	0 00
Net Totals (Active Assets)	409,079 68	0 00	0 00	409,079 68	318,076 63	8,145 00	326,221 63	82,858 05
Total Bonus Depreciation Taken at 30% Rate:				0.00				
Total Bonus Depreciation Taken at 50% Rate:				0.00				
Total Bonus Depreciation Taken at 100% Rate:				0.00				
Total Bonus Depreciation Taken:				0.00				