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# SCANNED OCT 05 2021

Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

Α	For the	2010 calendar year, or tax year beginning $NOV = 1$ , $2010$ and er	nding O	CT 31, 2011				
В	Check if applicable	C Name of organization		D Employer identific	cation number			
	Addres	Craighead County Farm Bureau						
Name change Doing Business As 71-0257512								
Tertum Number and street (or P 0 box if mail is not delivered to street address) Room/suite   E Telephone number   870-935-5533								
Amended return City or town, state or country, and ZIP + 4 G Gross receipts \$ 325,								
	Applic	0011C3D010, AK 72402		H(a) Is this a group re	eturn			
	pendir	F Name and address of principal officer: Dan HOSMan		for affiliates?	Yes X No			
		same as C above		H(b) Are all affiliates inc	luded? Yes No			
		empt status: 501(c)(3) X 501(c) ( 5 ) ( (insert no ) 4947(a)(1) or	527	If "No," attach a	list. (see instructions)			
		e:▶ www.arfb.com/craighead		H(c) Group exemption				
		organization X Corporation	L Year	of formation 1936 N	State of legal domicile AR			
P	art I	Summary						
ø	1	Briefly describe the organization's mission or most significant activities: ${ t Agric}$	<u>ultur</u>	al Promotio	n			
Activities & Governance								
Ē	2	Check this box 🕨 📖 if the organization discontinued its operations or dispose	ed of more	than 25% of its net as				
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	31			
৵	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	31			
es	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	8			
Σ̈́	6	Total number of volunteers (estimate if necessary)		6	55			
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	239,647.			
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
			<u> </u>	Prior Year	Current Year			
e	8	Contributions and grants (Part VIII, line 1h)	_	0.	0.			
Revenue		Program service revenue (Part VIII, line 2g)		83,784.	81,069.			
ě	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d) $$		727.	143.			
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		ပ <u>္</u> 232,673.	244,195.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, & line (A), line 12)		317,184.	325,407.			
	1	Cranto and similar amounts paid (r art 17), colorini (4), intes 1 0/111	2012	·	0.			
		Benefits paid to or for members (Part IX, column (A), line 4)			0.			
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A) [nes 5:10])	<u>. UII.</u>	193,958.	195,944.			
ë	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0.	0.			
Expenses	b		<u>0.</u>	114 021	120 660			
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<u> </u>	114,931.	120,668.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	308,889.	316,612.			
	19	Revenue less expenses. Subtract line 18 from line 12	<del></del>	8,295.	8,795.			
Net Assets or Euch Balances	00	T. I	RE	ginning of Current Year 250,668.	End of Year 258, 174.			
ASSE	20	Total assets (Part X, line 16)	-	36,461.	35,172.			
let /	21	Total liabilities (Part X, line 26)	<b>⊢</b>	214,207.	223,002.			
	22 art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		214,201	223,002.			
	•••••	Ities of perjury, I declare that I have examined this return, including accompanying schedules a	and statem	ante and to the heet of m	v knowledge and belief it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of whic			y kilowiedge allu beller, it is			
Huc	, conec	t, and complete becausion of preparer (other than onicer) is based on an information of which	on preparer	9/11/12				
Sic		Signature of officer		Date	<u> </u>			
	Here Dan Hosman, President							
116		Type or print name and title						
		Print/Type preparer's name Maria K. Bean  Figure 2 Thomas & Thomas LLP		Date Check	PTIN			
Pai	d	Maria K. Bean Maria Kban C	PA	9/4/12 if self-employed	 d			
		Firm's name Thomas & Thomas LLP	1.[.]	Firm's EIN	<u> </u>			
Preparer Firm's name ► Thomas & Thomas LLP Firm's EIN ►  Use Only Firm's address ► 201 E. Markham, Suite 500								
	,	Little Rock, AR 72201		Phone no (	501) 375-2025			
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)		1. none no1	X Yes No			
	) 001 02-2	=	 15.		Form <b>990</b> (2010)			
JJ21	02-2	2 2 a apartion reduction not frequency and the departer mathematics			16)			

orm	990 (2010) Craighead (	County Farm Bureau	71-0257512 Page <b>2</b>
	t III Statement of Program Service		
	Check if Schedule O contains a response		
1	Briefly describe the organization's mission:	to any quotion in the rare in	
	Agricultural Promotion		
2	Did the organization undertake any significant r	rogram services during the year which were not listed	
_	the prior Form 990 or 990-EZ?	rogram services during the year which were not listed	Yes X No
	If "Yes," describe these new services on Sched	ula O	TesTNO
2	•		services? Yes X No
3	-	significant changes in how it conducts, any program	services?
	If "Yes," describe these changes on Schedule (		
4		each of the organization's three largest program serv	
		d section 4947(a)(1) trusts are required to report the	amount of grants and
_		venue, if any, for each program service reported.	<del></del>
4a	(Code:) (Expenses \$	including grants of \$	) (Revenue \$)
		is general in nature, help	
		covements, economic opportu	nity, and social
	advancement.		
	-		
4b	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$
-	/(L. p. 100 )		,
		<del></del>	
	-		
		CALLED ACTION AND ADDRESS OF THE PARTY OF TH	
		100 to 10	
4c	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$)
	-		
		# <del>****</del>	
4d	Other program services. (Describe in Schedule	O.)	
		grants of \$ ) (Revenue \$	
40	Total program service expenses		

· · · ·			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			1
·	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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		Х
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		
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	X	
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	İ		1
	Part VI	11a	Х	
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		Х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
Ĭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Х
ь	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		X
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		X
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	17		X
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		X
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		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
	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		
		Form	990	2010

			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		<u>X</u>
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		X
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			v
	Schedule J	23		<u> </u>
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04		Х
	Schedule K. If "No", go to line 25	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
	any tax-exempt bonds?	24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24U		<del></del>
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
•	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		
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		Х
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		X
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Λ_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		Х
24	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
02	Schedule N, Part II	32		Х
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		Х
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		Х
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	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," 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_	ļ	ļ
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	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	2042
		rorm	<b>990</b> (	2010)

<del> ,</del>	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	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	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	
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)?	4a		<u>X</u>
b	If "Yes," enter the name of the foreign country: ▶			
	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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
ва	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			Х
L	any contributions that were not tax deductible?	6а_		
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	, , , , , , , , , , , , , , , , , , ,		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	14 Mar 2011 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7b		
С				
	to file Form 8282?	7с		
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e_		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9		7g		-
h		7h		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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		
9	Sponsoring organizations maintaining donor advised funds.	9a		ĺ
a	Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?	9b	_	-
10	Section 501(c)(7) organizations. Enter:			
	10.			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<del> </del>
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_	- I			
	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	in 1991 the Killing a Lottle Le to Teport those payments in 1991 provide an explanation in confession of		990	(2010)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

						X
	Check if Schedule O contains a response to any question in this Part VI					
Sec	tion A. Governing Body and Management					
		1 .	1 21	<del></del>	Yes	No
	Enter the number of voting members of the governing body at the end of the tax year	1a	31	-		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	<del></del>	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with	any other		1,	
	officer, director, trustee, or key employee?			2	X	
3	Did the organization delegate control over management duties customarily performed by or under the	ie dire	ct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X
6	Does the organization have members or stockholders?			_6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members.	ember	s of the			
	governing body?			7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pe	rsons'	<b>)</b>	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durin	g the year			
	by the following:		-			
а	The governing body?			8a	Х	
	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the			_
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	acrica	at the	9		Х
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal F	20von	e Code I		<del></del>	
<u>oec</u>	tion B. Foncies (This Section B requests information about policies not required by the internal r	16VEI IL			Yes	No_
40-	Describe eventual base level abortons broughts or offiliates?			10a	163	X
	Does the organization have local chapters, branches, or affiliates?		ore effiliates	IVa		
D	If "Yes," does the organization have written policies and procedures governing the activities of such	спар	ers, aniliates,	406	ļ	
	and branches to ensure their operations are consistent with those of the organization?			10b	Х	
	Has the organization provided a copy of this Form 990 to all members of its governing body before to	riling tr	ie form?	11a	Α.	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				Х	
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		<u> </u>
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld giv	re rise		v	
	to conflicts?			12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,	describe		١,,	
	ın Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			13		X
14	Does the organization have a written document retention and destruction policy?			14	ļ	Х
15	Did the process for determining compensation of the following persons include a review and approve	al by ı	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	?				
а	The organization's CEO, Executive Director, or top management official			15a	L	X
b	Other officers or key employees of the organization			15b	<u> </u>	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a			
	taxable entity during the year?			16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evi-	aluate	its participation	["		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	ganızat	ion's			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure	•				
17	List the states with which a copy of this Form 990 is required to be filed ► None					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501	(c)(3)s onlv) available	for		
. •	public inspection. Indicate how you make these available. Check all that apply	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,,-, , ,			
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	conflic	t of interest policy a	nd fins	ncial	
13	statements available to the public	JU111110	. or interest policy, a		.,	
20	State the name, physical address, and telephone number of the person who possesses the books a	and re-	orde of the organiza	tion:	•	
20	The Organization - 870-935-5533	A110 100	ords or the organiza	ation.		
	P.O. Box 2397, Jonesboro, AR 72402		<del> </del>			
	1.0. DOX 2371 UOHESDOLO, AN 12402			,,-		

# 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.

X Check this box if neither the organization	nor any related	orga	anıza	ation	COI	npe	nsat	ed any current officer, o	director, or trustee.	<del></del>
(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average		Position			Reportable	Reportable	Estimated		
	hours per	(c	(check all that apply)		compensation	compensation	amount of			
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Dan Hosman								-		
President	0.50	X		X	<u> </u>			0.	0.	0.
Scott Gibson		Ţ								
1st Vice President	0.50	X		X				0.	0.	0.
Joshua Cureton					l		}			
2nd Vice President	0.50	X		X				0.	0.	0.
Kenny Qualls					1	l		_	_	
Secretary	0.50	X	ļ	X		lacksquare		0.	0.	0.
Mark Bowers									_	
Member	0.50	X	_					0.	0.	0.
Jerome Boyd					İ					
Member	0.50	X	ļ	ļ	ļ		ļ	0.	0.	0.
Tony Bradley Member	0.50	X						0.	0.	0.
Eddie Burris	0.50		-	<del>                                     </del>	t			·		
Member	0.50	X						0.	0.	0.
Joe Christian										
Member	0.50	X						0.	0.	0.
Richard Coy			1	ŀ					_	
Member	0.50	X		<u> </u>	<u> </u>	ļ	_	0.	0.	0.
Michael Cureton		]					j			
Member	0.50	X	<u> </u>	<u> </u>	L		<u> </u>	0.	0.	0.
Barry Fielder										
Member	0.50	X		<u> </u>	<u> </u>	_	<u> </u>	0.	0.	0.
David Gairhan	0.55								_	_
Member	0.50	X	<u> </u>	<u> </u>	-	┢	<u> </u>	0.	0.	0.
Thomas Gairhan	0.50				ĺ		ĺ		_	^
Member	0.50	X	┼	$\vdash$	├			0.	0.	0.
Joe Gammill	0.50	U						0.	0.	0.
Member	0.50	<u>^</u>	$\vdash$	$\vdash$	<del> </del>	-	-	· · · · · · · · · · · · · · · · · · ·		- 0.
Bob Griffin	0.50	x						0.	0.	0.
Member Terry Hall	0.30	╀≏	+	$\vdash$	1	+-	$\vdash$	- 0.	<u>.</u>	
Member	0.50	Y						0.	0.	0.
Mennet	0.50	IV	1	Ь		1	<u> </u>			

Part VII Section A. Officers, Directors, Tr (A)	(B)	ĺ		(	C)			(D)	(E)	İ	(F)
Name and title	Average hours per week	(0	Position (check all that apply)				ly)	Reportable compensation	Reportable compensation		stimated mount of
	(describe hours for related lorganizations in Schedule O)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	org an	other npensation rom the ganization id related anizations
David Hodges Member	0.50	х						0.	0		0.
Lennie Hogan Member	0.50	х						0.	0		0.
Kevin Hoke Member	0.50	х						0.	0		0 .
Bill Humphrey	0.50	х						0.	0		0.
David Hydrick Member	0.50	X						0.	0		0.
James Peachey Member	0.50	X			-			0.	0	1	0 .
James Pierce Member	0.50	X						0.	0		0.
Max Render Member	0.50	x						0.	0	1	0 .
Bill Shannon Member	0.50	х						0.	0		0 .
1b Sub-total c Total from continuation sheets to Part V		1 **	J		<u> </u>	<b>▶</b>	I	0.	0	•	0.
d Total (add lines 1b and 1c)  Total number of individuals (including but		nose	liste	ed a	abov	e) w	no re	0. eceived more than \$100	0,000 in reportable	•	0 .
compensation from the organization	<u>-</u> -										Yes No
<ul> <li>Did the organization list any former officer line 1a? If "Yes," complete Schedule J for</li> <li>For any individual listed on line 1a, is the s</li> </ul>	such individual									3	Х
<ul><li>and related organizations greater than \$15</li><li>Did any person listed on line 1a receive or</li></ul>	0,000? If "Yes,	" cc	mpl	ete	Sch	edul	e J f	for such individual	-	4	X
rendered to the organization? If "Yes," cor Section B. Independent Contractors	nplete Schedui	e J	for <u>s</u>	uch	per	son		<del></del>	<del></del>	5	<u> </u>
Complete this table for your five highest of the organization.     NONE	ompensated in	dep	ende	ent o	cont	racto	ors t	hat received more than	\$100,000 of comper	sation	from
(A) Name and busines:	s address							(B) Description of s	services		C) ensation
Total number of independent contractors	Including but r	not li	mite	ed to	the	se l	stec	above) who received n	nore than		<del></del>
\$100,000 in compensation from the organ See Part VII, Sectio	zation 🕨					0				Form	<b>990</b> (2010

Pa	rt VII	Statement of Rever	nue					
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1 a	Federated campaigns	1a		-			
P P	ь	Membership dues	1b					
s, g	c	Fundraising events	1c					
gift	d	Related organizations	1d					
S.i.	е	Government grants (contribut	ions) 1e					
rtio er s	f	All other contributions, gifts, gran	ts, and					
들		similar amounts not included abo	ve 1f					
Contributions, gifts, grants and other similar amounts	9	Noncash contributions included in lines	: 1a-1f \$					
3 B	<u>h</u>	Total. Add lines 1a-1f		<b>&gt;</b>				
		Mambasahia Buas	_	Business Code	01 060	01 060		
is	2 a	<del></del>		110000	81,069.	81,069.	<del></del>	
že l	b		<del></del>	-			- "	
εe	c							
Program Service Revenue	d							
P 2	e •	All other program service reve	2016			-		
	g		silde	<b>•</b>	81,069.			
	3	Investment income (including	dividends, inter					
	_	other similar amounts)		<b>&gt;</b>	143.			143.
:	4	Income from investment of ta	x-exempt bond	proceeds ►				
	5	Royalties	•	` ▶	1,538.			1,538.
			(i) Real	(II) Personal	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	6 a	Gross Rents	2,400	•				
	b	Less: rental expenses						
	C	Rental income or (loss)	2,400					2 400
	d			<b>•</b>	2,400.			2,400.
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less: cost or other basis		1				
		and sales expenses		<u>-   </u>				
		Gain or (loss)	L	<u> </u>				
		Net gain or (loss)						
ue	ва	Gross income from fundraisin including \$	_					
Other Revenue		including \$ contributions reported on line						
r Re		Part IV, line 18	; 10). See •					
the	b	Less: direct expenses		5				
δ		: Net income or (loss) from fund		<b></b>				
		Gross income from gaming a	-					
		Part IV, line 19		al				
	b	Less: direct expenses	t					
	С	Net income or (loss) from gan	ning activities					<del></del>
	10 a	Gross sales of inventory, less	returns					
		and allowances	ć	a				
	b	Less: cost of goods sold	t	b				
	С	Net income or (loss) from sale		<u> </u>				
		Miscellaneous Revenu		Business Code	220 647		220 647	
	11 a		ce rees	524298	239,647.		239,647.	610
	b	Miscellaneous		900099	610.			610.
	C							
	d	All other revenue			240,257.			,
	12	Total. Add lines 11a-11d Total revenue. See instructions			325,407.		239,647.	4,691.
0320 12-21		. Star revenue. Occ motitudions					<u> </u>	Form <b>990</b> (2010)
								- , ,

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (B) (A) (C) Do not include amounts reported on lines 6b. Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and 1 organizations in the U.S. See Part IV. line 21 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 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 178,400. 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 2,498. Other employee benefits 15,046. 10 Payroll taxes 11 Fees for services (non-employees). a Management **b** Legal 600. c Accounting d Lobbying Professional fundraising services See Part IV, line 17 f Investment management fees Other g 7,574. Advertising and promotion 12 32,161. 13 Office expenses Information technology 14 Royalties 15 36,769. 16 Occupancy 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 25,544. 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 10,313. 22 Depreciation, depletion, and amortization 23 Insurance Other expenses Itemize expenses not covered 24 above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0) Micellaneous 3,586. 3,375. Youth and Safety Membership Drive 746. C d f All other expenses 316,612. Total functional expenses. Add lines 1 through 24f 25 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

Part X **Balance Sheet** (A) End of year Beginning of year 267. 267. 1 1 Cash - non-interest-bearing 133,008. 144,974. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4,191. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L 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 6 employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 10a 506,600. basis. Complete Part VI of Schedule D 117,393. 108,742. 397,858. 10c 10b Less: accumulated depreciation 11 Investments - publicly traded securities 11 12 12 Investments · other securities. See Part IV, line 11 13 Investments · program-related. See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 250,668. 258,174. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,460. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 31,461. 33,001. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 iabilities. Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 25 Other liabilities, Complete Part X of Schedule D 36,461. 35,172. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 

X
and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 0. 31 31 Paid-in or capital surplus, or land, building, or equipment fund 214,207. 223,002. 32 Retained earnings, endowment, accumulated income, or other funds 32 223,002. 214,207. 33 33 Total net assets or fund balances

250,668.

34

Total liabilities and net assets/fund balances

Form	990 (2010) Craighead County Farm Bureau	<u> 71-025</u>	<u>7512</u>	Pag	ge 12
Pa	t XI 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)	1			<u>07.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			12.
3	Revenue less expenses. Subtract line 2 from line 1	3			95.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	214	<del>1,2</del>	07.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	22:	3,0	02.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u>-</u>			<u></u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	1		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b_		
			Form 9	990 (	2010)

### 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

2010

Open to Public Inspection

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

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.

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

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

Name of organization			Em <sub>l</sub>	oloyer identification number
Craighe	ad County Farm B	Bureau		71-0257512
Part I-A Complete if the org	anization is exempt und	der section 501(c)	or is a section 527	
<ul><li>1 Provide a description of the organization</li><li>2 Political expenditures</li><li>3 Volunteer hours</li></ul>	ation's direct and indirect politic	cal campaign activities	ın Part IV. ▶	\$
Part I-B Complete if the org	anization is exempt und	der section 501(c)		· · · · · · · · · · · · · · · · · · ·
<ol> <li>Enter the amount of any excise tax in the amount of any excise tax in the organization incurred a section that was a correction made?</li> <li>If "Yes," describe in Part IV.</li> </ol>	ncurred by organization manag	ers under section 495	5	\$ Yes
	anization is exempt und	der section 501(c)	except section 501	(c)(3).
<ol> <li>Enter the amount directly expended</li> <li>Enter the amount of the filing organic exempt function activities</li> <li>Total exempt function expenditures line 17b</li> <li>Did the filing organization file Form</li> <li>Enter the names, addresses and emmade payments. For each organization tributions received that were propolitical action committee (PAC). If a</li> </ol>	zation's funds contributed to o . Add lines 1 and 2. Enter here a 1120-POL for this year? aployer identification number (E tion listed, enter the amount pa comptly and directly delivered to	ther organizations for s and on Form 1120-POI IN) of all section 527 p id from the filing organ a separate political org	section 527  L,  colitical organizations to whization's funds Also enter ganization, such as a sepa	\$ Yes No ich the filing organization the amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

Schedule C (Form 990 or 990-EZ) 2010	Craighead	County Farm	Bureau		0257512 Page 2
Part II-A Complete if the org	anization is exer	npt under sectio	n 501(c)(3) and file	d Form 5768	
(election under sec	tion 501(h)).			<del></del>	_ <del></del>
	tion belongs to an affil				
3 Check Lifthe filing organizat	tion checked box A an	d "limited control" pro	ovisions apply.		
	s on Lobbying Exper litures" means amou		)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience public opinion (g	grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influ	ience a legislative bod	ly (direct lobbying)			
c Total lobbying expenditures (add lii	nes 1a and 1b)		1		
d Other exempt purpose expenditure	es			<u> </u>	
e Total exempt purpose expenditure	s (add lines 1c and 1d	)			
f Lobbying nontaxable amount Ente	er the amount from the	following table in bot	h columns.		
If the amount on line 1e, column (a) o	r (b) is: The lobi	bying nontaxable am	ount is:		
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000	0,000 \$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exc			
Over \$1,500,000 but not over \$17,		0 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.			
					<del>                                     </del>
g Grassroots nontaxable amount (en	•		Į.	<del></del>	
h Subtract line 1g from line 1a. If zero			-		
i Subtract line 1f from line 1c. If zero	•			·	
j If there is an amount other than ze		line 11, did the organiz	ation file Form 4/20		
reporting section 4911 tax for this		Daviad Hadar	Section 501/h)		Yes No
, ,	ations that made a s		n do not have to comp		
co			es 2a through 2f on pages	ge 4.)	
	Lobbying Exper	ditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	( <b>d</b> ) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))	· · · · · · · · · · · · · · · · · · ·				
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots celling amount			<del></del>		
(150% of line 2d, column (e))					
(10070 0 20, 00.0 (0))					
f Grassroots lobbying expenditures					-

# Schedule C (Form 990 or 990-EZ) 2010 Craighead County Farm Bureau 71-0257512 Page 3 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)).

	Y	es	No	Amo	ount
1 During the year, did the filing organization attempt to influence foreign, national, state	e or				71-111
local legislation, including any attempt to influence public opinion on a legislative ma	itter				
or referendum, through the use of:	F				
a Volunteers?					
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c to	hrough 1i)?				
c Media advertisements?	<u></u>			<del></del> .	
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 n	leans?			<u> </u>	
i Other activities? If "Yes," describe in Part IV	<u> </u>				
j Total Add lines 1c through 1i					
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 sect				<del></del>	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year till-A Complete if the organization is exempt under section 50		01(0)(5)	07.00	otion	
	1(c)(4), section 5	υ ι (C)(S),	or se	Cuon	
					Ň
501(c)(6).				Yes	, ,
501(c)(6).			1	X	
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?			1 2		
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the lart III-B  Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "	1(c)(4), section 5		3 or se	X X ction	7
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the lart III-B  Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."	1(c)(4), section 5		3 or se	X X ction	
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the lart III-B Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."  Dues, assessments and similar amounts from members	1(c)(4), section 5 No" OR if Part III		or se 3 is an	X X ction	
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the lart III-B Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."  Dues, assessments and similar amounts from members	1(c)(4), section 5 No" OR if Part III		or se 3 is an	X X ction	
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the art III-B Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include a	1(c)(4), section 5 No" OR if Part III		or se 3 is an	X X ction	
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the art III-B Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include a expenses for which the section 527(f) tax was paid).  a Current year	1(c)(4), section 5 No" OR if Part III		or se 3 is an	X X ction	
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the lart III-B Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include a expenses for which the section 527(f) tax was paid).	1(c)(4), section 5 No" OR if Part III		3 or se 3 is an	X X ction	
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the last III-B Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include a expenses for which the section 527(f) tax was paid).  Current year Carryover from last year Total	1(c)(4), section 5 No" OR if Part III mounts of political		3 or se 3 is ar	X X ction	
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the last III-B Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include a expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year	1(c)(4), section 5 No" OR if Part III mounts of political		3 or se 3 is an 1 2a 2b 2c	X X ction	7
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the rat III-B Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include a expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section	1(c)(4), section 5 No" OR if Part III mounts of political n 162(e) dues portion of the excess	-A, line	3 or se 3 is an 1 2a 2b 2c	X X ction	
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the rat III-B Complete if the organization is exempt under section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include a expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section if notices were sent and the amount on line 2c exceeds the amount on line 3, what	1(c)(4), section 5 No" OR if Part III mounts of political n 162(e) dues portion of the excess	-A, line	3 or se 3 is an 1 2a 2b 2c	X X ction	7

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements ► 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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Craighead County Farm Bureau

Employer identification number 71-0257512

Par	T   Organizations Maintaining Donor Advisor	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor		used only
	for charitable purposes and not for the benefit of the donor		•
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the or	rganization answered "Yes" to Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or		torically important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	Ified conservation contribution in the form of	of a conservation easement on the last
	day of the tax year		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c
	Number of conservation easements included in (c) acquired	• •	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements du	uring the year
7	Amount of expenses incurred in monitoring, inspecting, and	denforcing conservation easements during	the year ▶ \$
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170(	h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conserva	tion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes t	he organization's accounting for
	conservation easements		
Par	t III Organizations Maintaining Collections		ther Similar Assets.
	Complete if the organization answered "Yes" to Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	khibition, education, or research in furtheran	nce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that described	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	•	
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pub	olic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tro	easures, or other similar assets for financial	
	the following amounts required to be reported under SFAS:	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990. Part X		▶ \$

Sche	dule D (Form 990) 2010	ad County	Farm	Burea	u		7	1-02	57512	Page 2
Par	t III Organizations Maintaining C					or Other	Similar	Asse	<b>ts</b> (contin	ued)
3	Using the organization's acquisition, accessi									
	(check all that apply):									
а	Public exhibition	d	ı 🔲 1	Loan or excl	hange progra	ams				
b	Scholarly research	e		Other						
С	Preservation for future generations						-			
4	Provide a description of the organization's co	ollections and explai	n how th	ev further th	ne organizatio	on's exem	ot purpos	e in Parl	XIV.	
5	During the year, did the organization solicit o									
•	to be sold to raise funds rather than to be ma								Yes	☐ No
Par	t IV Escrow and Custodial Arran					"Yes" to Fo	orm 990. F	Part IV.	ıne 9, or	
	reported an amount on Form 990, Par			- J				·		
1a	Is the organization an agent, trustee, custodi		diary for	contribution	s or other as	sets not in	cluded			
	on Form 990, Part X?								Yes	No No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing 1	table						
	The rest explain the direngement in real rate	and complete the re	,ow.iig						Amount	
_	Beginning balance						1c		7	
	Additions during the year						1d			
							1e			
_	Distributions during the year						1f			
1	Ending balance	000 Dady has	040				111		Yes	No
	Did the organization include an amount on Fo		1217						_ res	140
	If "Yes," explain the arrangement in Part XIV.			"Voo" to Fo	000 Bort	IV Inc 10				
Par	t V Endowment Funds. Complete i				I		f) Three yea	re back	(a) Four	years back
	<b>B f h</b> . <b>h</b>	(a) Current year	(8) P	rior year	(c) Two year	IS DACK (C	n illiee yea	ITS DACK	(e) roui	reals back
1a	Beginning of year balance							· · · · · · · · · · · · · · · · · · ·		
b	Contributions				-			<del></del>		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
С	Net investment earnings, gains, and losses							17111		
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs								<b></b>	
f	Administrative expenses	<u> </u>	_				<del></del>	.,,,,	<u> </u>	<del>**** *** ***</del>
9	End of year balance		<u></u>		<u> </u>				<u> </u>	·····
2	Provide the estimated percentage of the year	r end balance held a	as:							
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment ▶	%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ind administe	ered for the	e organiza	tion	_	
	by:									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sched	dule R?					3ь	
4	Describe in Part XIV the intended uses of the	e organization's end	owment	funds.					_	
Pa	t VI Land, Buildings, and Equipm									
	Description of investment	(a) Cost or o			or other	(c) Acc	cumulated		(d) Book	value
	•	basis (investi	ment)	basis	(other)		eciation			
1a	Land				8,200.					3,200.
-	Buildings			28	4,729.	2	00,06	0.		,669.
c	Leasehold improvements									
d	Equipment			20	8,197.	1	92,86	0.	15	5,337.
	Other	-			5,474.		4,93			536.
	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Pan	t X. colur	mn (B), line 1		·····		<b></b>	108	3,742.

(7) (8) (9) (10)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )

FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 2. FIN 48 (ASC 740)

	dule D (Form 990) 2010 Craighead County Farm Burea							2575]	. 2 Pa	ıge <b>4</b>
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	<u>Audit</u>	ted	Financ	ial S	taten	nents	3		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			L	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				5		_			
6	Investment expenses				6		_			
7	Prior period adjustments			L	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 lines 3 and				10					
Pa	t XII Reconciliation of Revenue per Audited Financial Statemen	nts W	/ith	Reven	ue p	er Re	turn			
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:						1			
а	Net unrealized gains on investments	2a					1			
b	Donated services and use of facilities	2b	<u> </u>							
С	Recoveries of prior year grants	2c	ļ							
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 VIII, line 12, but not on line 1:	1								
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<u> </u>							
b	Other (Describe in Part XIV.)	4b	<u> </u>							
С	Add lines 4a and 4b					-	4c			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	A - N	A /:	<u></u>			5			
	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents v	with	Expe	nses	per r		<u>n</u>		
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:	م ا	ı							
а	Donated services and use of facilities	2a	-							
b	Prior year adjustments	2b	-							
C	Other losses	2c	<b>├</b>							
d	,	2d	ــــــــــــــــــــــــــــــــــــــ							
e						⊢	2e			
3	Subtract line 2e from line 1					-	3			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	١.	1			1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-							
b	Other (Describe in Part XIV)	4b					4-			
	Add lines 4a and 4b					-	4c			
5 Da	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)						5		·	
	rt XIV Supplemental Information	Lless	10.00	nd 4+ D=	rt 1\/ 1-	inec 1h	and o	b: Part V	line 4 · C	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III									ant
^, III	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	nete trii	is pai	it to prov	vide a	ily addi	illona	mornade	"1.	
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### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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.

2010
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Craighead County Farm Bureau

Employer identification number 71-0257512

Form 990, Part VI, Section A, line 2: Joshua Cureton and Michael Cureton
- family relationship
David Gairhan and Thomas Gairhan - family relationship
Mark Bowers and Joe Christian - family relationship
Scott Gibson and David Hodges - family relationship
Form 990, Part VI, Section A, line 6: The Organization is a mutual
benefit organization with members.
Form 990, Part VI, Section A, line 7a: The board is elected annually by
the general membership. Officers are elected by the board.
Form 990, Part VI, Section A, line 7b: Policy resolutions are subject to
member approval.
Form 990, Part VI, Section B, line 11: The 990 is presented to all
attending members during the board meeting.
Form 990, Part VI, Section B, Line 12c: Everyone signs new conflict of
interest forms each year. Any board member refusing to sign will be
removed from the board.
The Organization does not have
compensated officers or management officials.

chedule O (Form 990 or 990-EZ) (2010) ame of the organization	Fage 2
Craighead County Farm Bureau	Employer identification number 71-0257512
o the public.	
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Part VII Section A. Officers, Directors, (A)	(B)	mpic	yee	s, a "	<u>na r</u> C)	ugn	est	(D)	(E)	(F)
Name and title	Average hours per week			Pos	ition that	арр	ly)	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
ohn Sloan	0.50	,,						0	0	0
lember	0.50	X						0.	0.	
im Tubbs Lember	0.50	x						0.	0.	(
ustin Welch										
(ember	0.50	X						0.	0.	C
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