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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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

<u>A</u>	For th	e 2011 cale	ndar year, or tax year beginning 9-1 , 2011, and ending	8-31	, 20 12
В	Check	if applicable:	C Name of organization Custer County Farm Bureau	D Employer	dentification number
	Addres	s change	Doing Business As		73-0581050
	Name o	hange	Number and street (or P O. box if mail is not delivered to street address) Room/suite	E Telephone	number
7	Initial re	etum	2700 W. Modelle		580.323.1270
	Termina		City or town, state or country, and ZIP + 4		
$\overline{\Box}$	· Y	ed return	Clinton, OK 73601	G Gross rec	eipts \$ 235,568.46
$\overline{\Box}$		tion pending	F Name and address of principal officer: Bill Sawatzky His	i) is this a group return fo	r affiliates? Yes V No
		p g			luded? Yes No
	Tax-ex	empt status:	☐ 501(c)(3)	•	ist. (see instructions)
÷	Websit			c) Group exemption :	number ▶ 1480
ĸ			Corporation ☐ Trust ☐ Association ☐ Other ▶ L. Year of formation:	 	f legal domicile. OK
	Part I	Summ			
	1		escribe the organization's mission or most significant activities: Agricultural	Membership Ora	anization
	'	Ditionly C			
Š	3				
Activities & Assumence]				
Ì	2	Check th	is box ▶☐ if the organization discontinued its operations or disposed of more	e than 25% of it	s net assets.
٤	3		of voting members of the governing body (Part VI, line 1a)	1 - 1	9
9	4		of independent voting members of the governing body (Part VI, line 1b)		9
ğ	5		mber of individuals employed in calendar year 2011 (Part V, line 2a)	5	-0-
3	6		mber of volunteers (estimate if necessary)	6	
à	7a		related business revenue from Part VIII, column (C), line 12	7a	185,641.16
	b		lated business taxable income from Form 990-T, line 34	7b	59,712.66
_	 	1101 01110		Prior Year	Current Year
	. 8	Contribu	itions and grants (Part VIII, line 1h)	37,632.50	34,730.00
9	9		service revenue (Part VIII, line 2g)	37,032.30	34,730.00
Groon	10	_	ent income (Part VIII, column (A), lines 3, 4, and 7d)	164.62	198.05
	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	156,319.50	193,462.30
2013 -	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	194,116.62	228,390.35
~	13		and similar amounts paid (Part IX, column (A), lines 1–3)	134,110.02	220,330.33
حتمتم	14		paid to or for members (Part IX, column (A), Iling 4).	12,307.04	10,714.27
==1	a 15	Colorios	other compensation, employee benefits (Part X, Column A)—ines 5–10)	63,294.08	69,539.58
JAN	16a			03,234.00	03,338.30
JAN	b		onal fundraising fees (Part IX, column (A), line 118)	North Control of the	
. 4	17		(Dat IV salvas (A) lisas 1914 All (A)	93,039.74	85,360.44
	18			168,640.86	165,614.29
2	19	Povonue	penses. Add lines 13–17 (must equal Part IX, column (A), line 25) = eless expenses. Subtract line 18 from line QGDEN, UT	25,475.76	62,776.06
2 –		Neveriue		ng of Current Year	End of Year
SCANNITH Associ	를 20	Total acc	sets (Part X, line 16)	828,287.49	822,860.07
Ŭ Ž	원 원 21		Trate of The Law (Co.)	438,432.72	370,229.24
<u> </u>	21 22		ets or fund balances. Subtract line 21 from line 20	389,854.77	452,630.83
_	Part II		ture Block	363,634.77	432,030.03
_				and to the best of or	. In an dealer and ballet it is
			ury, I declare that I have examined this return, including accompanying schedules and statements, a slete. Declaration of preparer (other than officer) is based on all information of which preparer has an		y ratiowieuge and belief, it is
_				· · · · · · · · · · · · · · · · · · ·	
e	ign	Sign	nature of officer	Date	
	lere	1 7	GOMAS SNIDER TREASUREIR. 1	12-	28-12
• •	610	7/7	e or print name and title	17	
_		 			DTIN
P	aid			Check [
P	repar		State of Francisco	2//2 self-emp	
U	lse Or		aced to Other and Other and Other and Total	Firm's EiN ▶	73-0382001
<u> </u>	lay the		address > 2501 N. Stiles, Oklahoma City, OK 73105	Phone no	405.523.2300
	iay (ne	ino discus	ss this return with the preparer shown above? (see instructions)	<u> </u>	· · 📝 Yes 🗌 No

	U (2011)	ment of Business Consider	A a a a marlia la manta		raye £
Part		ment of Program Service	esponse to any question in this Part I	41	П
1		cribe the organization's mission			
'		I Mambarchia Organization			
2	Did the org	anization undertake any signi	ficant program services during the year	r which were not listed on the	
	If "Yes," de	scribe these new services on	Schedule O.		
3			g, or make significant changes in ho		
	services? .				☐ Yes <a> ✓ No
	If "Yes," de	scribe these changes on Sch	edule O.		
4	expenses.	Section 501(c)(3) and 501(c)	vice accomplishments for each of its (4) organizations and section 4947(a) Il expenses, and revenue, if any, for each	1) trusts are required to repo	
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)

\		~			
,					
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$	
74	(0000) (Exponsos 4		/ (,
4d		gram services (Describe in Sci		•	
 -	(Expenses		grants of \$) (Revenue	>)	
40	I OTAL DIOC	ram service expenses			

Part I	Checklist of Required Schedules	— т	V 1	No.
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
_	complete Schedule A	2		√
2 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	-	<u>▼</u>
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	✓	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		✓
7 8	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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		✓
•	complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		-*, 0	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
-	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		148		-
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		✓

Part IV	Checklist	of Required	Schedules	(continued)
			•	

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_	1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d 25a	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 disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):	% \$5	į ,	3 L.
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	-	1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
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		✓
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		√
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O .	38		*
			m 990	(2011)

Part				_
 	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 1a -0-		105	NO
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b -0-			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
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 2a			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	✓	
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		✓
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.	₹ 1		,
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		/
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		✓
Va.	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		ļ i	
b	organization solicit any contributions that were not tax deductible?	6a		✓
-	gifts were not tax deductible?	- F		1
7	Organizations that may receive deductible contributions under section 170(c).	6b	,	12.
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	٠,	*	1 AF
	and services provided to the payor?	7a	ľ	/
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u>-</u>	-
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
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.	_		
8	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 a				
b	Initiation fees and capital contributions included on Part VIII, line 12	<		
11	Section 501(c)(12) organizations. Enter:			
	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
8	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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			
С	Enter the amount of reserves on hand			
148	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an evaluation in School to O	444		

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response to any question in this Part VI	ee ins	tructi	ons.
Section	on A. Governing Body and Management			
			Yes	No_
	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	1	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		√
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		✓
6	Did the organization have members or stockholders?	6	1	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			`~
a	The governing body?	8a	√	
9	Each committee with authority to act on behalf of the governing body?	8b 9	V	1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		l ode.)	_
<u> </u>	on bit one to the order of the		Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		/
14 15	Did the organization have a written document retention and destruction policy?	14		✓
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
b	with a taxable entity during the year?	16a		1
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	only)
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			oolicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	е	

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'aq	8	

Form	990	(201	11

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

Check this box if neither the organization nor	any related	d orga	aniz	atio	n co	ompe	nsa	ted any curren	t officer, director	, or trustee.
				(C	>)					
***	m,			Posi	ition			(D)	15	(5)
(A)	(B)	(don	do not check m			more than one			(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per	office	r enk	bst	irect	or/trust	ee)		compensation from	amount of
	week	23	=	0	조	東工	Ţī	from	related	other
	(describe	요문	8	Officer	ву	전형	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for related	8 2	<u>E</u>	翼	3	5 8	戟	(W-2/1099-MISC)		organization
	organizations	₫ 🖺	8		Key employee	88		(44-2/1033-141130)		and related
	in Schedule	1 2	¥4		3	૱				organizations
	O)	Individual trustee or director	institutional trustee		"	9 9				y .
		۳ ا	8			Highest compensated employee				
						8.				
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(1) Schedule Attached	1					1			1	I
1) Schedule Attached	1									I
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(40)	1		1		†	 	T			· · · · · · · · · · · · · · · · · · ·
(12)	-{						1		ĺ	
	ļ	ļ		ļ _		ļ	<u> </u>	1		
(13)			1	1						
	1					1		1		
7	 	+	\vdash	\vdash	+	├	+	+	 	<u> </u>
(14)	4				1		1			
		1	1	i	1	1	1	1	1	1

	(A) Name and title	(B) Average hours per week	officer and a director/truste					an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other		
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fr org. and	pensati om the anizatio i related anization	n d
15)												•	
16)								-					
17)													
18)								ļ. .					
19)					-			<u> </u>					
20)									1			-	
21)											 		
22)						-	-						
23)													
24)													
25)													
1b c d	Sub-total			•				> > >					
2	Total number of individuals (including but reportable compensation from the organi	not limited					above	e) w	no received m	ore than \$100,0	00 of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete:	ficer, direc						emp	bloyee, or high	est compensat	ed 3	Yes	N
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	porta	ble	con	npei	nsatio				he		
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or individe			Ť,
iectio	n B. Independent Contractors											٠	
1	Complete this table for your five highest compensation from the organization. Repyear.												lax
	(A) Name and business add	ress							(B) Description of s	ervices	(C Comper		
													
2	Total number of independent contractor	rs (includir	na bi	ıt n	ot	lımıt	ed to) th	nose listed ab	ove) who			

	990 (2011							- rage &
Par	t VIII	Statement of Reve	nue				(0)	(D)
•	, .	, , ,	•	1	(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
		1 - 142	•	•		exempt function	business revenue	excluded from tax under sections
			1,			revenue		512, 513, or 514
\$ \$	1a	Federated campaigns						
2 3	b	Membership dues .	1b	34,730.00				
A S.	C	Fundraising events .	1c				'	
# #	d	Related organizations	<u>1d</u>					
% <u>E</u>	e	Government grants (conf	tributions) 1e				1	
20	f	All other contributions, gif	fts, grants,		A CONTRACTOR OF THE PARTY OF TH	,		
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts not inc	luded above 11		200	- <u>.</u>		
重る	g	Noncash contributions includ	ed in lines 1a-1f:\$		Kong C	,		
ਤੋਂ ਙੋਂ	_	Total. Add lines 1a-11	f	>	34,730.00			
	 			Business Code	And the contract of	,	-	7
至	2a			-			Ì	
Æ	b							
8	c							· · · · · · · · · · · · · · · · · · ·
Program Service Revenue	d					-		
	e							
Ē		All other program serv	vice revenue					
ξ		Total. Add lines 2a-21						
	3	Investment income						
		and other similar amo			198.05			198.05
	4	Income from investment						
	1		•					
	5	Royalties	(i) Real	(ii) Personal	\$ 50° .		······	
		Cross routs	40,924.00	<u> </u>				
	6a	Gross rents	7,178.11			,	Ì	
	b	Less: rental expenses Rental income or (loss)		+		, 6	~	. , ,
	C	Net rental income or (loss)			33,745.89	7,761.55	25,984.34	
	d 7a	Gross amount from sales of	(i) Securities	(ii) Other	25,745.05 25,745.05	7,701.00	20,004.04	, , ,
	10	assets other than inventory	(70002	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Brist Fresh		
	ь	Less: cost or other basis		 			, j	T.
	"	and sales expenses .		1		Mark Late 1 - 1		
								~ 3
	C	Gain or (loss)				1 135	,	• •
	d	Net gain or (loss) .		· · · · •	nick Control of	1.00		
<u>•</u>	0	Crean income from fo	indraioina			•		
Ĕ	8a	Gross income from fu events (not including \$	nuraising					
×]		ad an line 1a)			,	4,	•
Œ		of contributions reported See Part IV, line 18				, · · · .	ŕ	
Other Revenue			_	·				
ర	b	Less: direct expenses		L	- 1 Print	, ,		
	C	Net income or (loss) f		events >	(63):			
	9a	Gross income from ga See Part IV, line 19	-					
		•						
	b	Less: direct expenses						
	C	Net income or (loss) f		tivities >	W.180***			
	10a	Gross sales of in	=					
		returns and allowance	-					
	b	Less: cost of goods s		·				
	С	Net income or (loss) f					ļ	
		Miscellaneous F	Revenue	Business Code	*			
	11a	Office Commissions	Office Commissions 524113		13,222.17	-	13,222.17	
	b	Office Commissions		524126	145,334.65		145,334.65	
	C	Phone Reimbursemer	nt	524126	1,100.00		1,100.00	
	d	All other revenue			59.59			59.59
	е	Total. Add lines 11a-		▶	159,716.41			
	12	Total revenue. See I	netrictions	•	228,390.35	42,491.55	185,641.16	257.64

Part IX Statement of Functional Expenses

ection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not equired to complete columns (B), (C), and (D).

8b, 9b, 1	Include amounts reported on lines 6b, 7b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing
			04001000	general expenses	expenses
	Organizations in the United States. See Fair 14, him 21				Marian Artistan Artis
	Grants and other assistance to individuals in the United States. See Part IV, line 22			. 95	
	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16			63.	
	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	10,714.27	,		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	64,203.99			
9	Other employee benefits	5,335,59		_	
10 11	Payroll taxes	5,353.55			
'' a	Management				
b	Legal				
. c	Accounting	420.00			
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17		y 1884 +	· ·	
f	Investment management fees				
g	Other			 	
12	Advertising and promotion	2,500.86			
13	Office expenses	9,279.12		-	
14	Information technology				
15	Royalties	90 444 44		-	
16	Occupancy	22,441.11			
17 18	Travel			<u> </u>	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	10,660.40		<u> </u>	
21	Payments to affiliates	,			
22	Depreciation, depletion, and amortization	19,103.79			
23	Insurance	10,595.33			
24	Other expenses, Itemize expenses not covered		3 * 4 * 4 * *) 42 m -	
	above. (List miscellaneous expenses in line 24e. If		**************************************	, -	
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	***			
8	Federal Income Tax	4,942.38		ļ	
b	State Income Tax	1,977.00			
c	Postage	2,778.24		-	
d	Rent Expense	662.00			ļ
е	All other expenses	.21			
25	Total functional expenses. Add lines 1 through 24e	165,614.29			<u> </u>
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)				

Pa	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	23,670.86	1	87, 99 6.53
	2	Savings and temporary cash investments	89,954.30	2	40,152.35
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	407.00	4	559.00
j	5	Receivables from current and former officers, directors, trustees, key	35 4,		1
:		employees, and highest compensated employees. Complete Part II of Schedule L	راد المراجعة الأسراطية الأسراطية	5	·
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
g		employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	The state of the s	6	and the second
Assets	7	Notes and loans receivable, net		7	
8	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	7,000.00	9	7,057.62
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 931,313.21		Ž	
	ь	Less: accumulated depreciation 10b 244,218.64	707,255.33	10c	687,094.57
	11	Investments—publicly traded securities	·	11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	828,287.49	16	822,860.07
	17	Accounts payable and accrued expenses	481.00	17	372.00
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
豆	00	·		23	
_	23 24	Secured mortgages and notes payable to unrelated third parties	437.951.72		369,857.24
		Other liabilities (including federal income tax, payables to related third	107,001.72		000,007.27
	25	parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	i	25	
	26	Total liabilities. Add lines 17 through 25	438,432.72		370,229.24
 9		Total liabilities. Add lines 17 through 25			
JE.	27	Unrestricted net assets	, stat 77, 80	27	
ğ	28	Temporarily restricted net assets		28	
P	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 30 through 34.	., ., .	-	75.
38	30	Capital stock or trust principal, or current funds		30	
<u>8</u>	31	Paid-In or capital surplus, or land, building, or equipment fund		31	
∀	32	Retained earnings, endowment, accumulated income, or other funds .	389,854.77	32	452,630.83
<u>इ</u>	33	Total net assets or fund balances	389,854.77		452,630.83
Z	34	Total liabilities and net assets/fund balances	828,287.49	•	822,860.07
_		· · · · · · · · · · · · · · · · · · ·		-	Form 990 (2011)

Form 99	0 (2011)			⊢ag	12		
Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>		· ·			
		1					
1	Total revenue (must equal Part VIII, column (A), line 12)	↓		28,39			
2							
3	Revenue less expenses. Subtract line 2 from line 1	<u> </u>			6.06		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<u> </u>	38	39,85	4.77		
5	Other changes in net assets or fund balances (explain in Schedule O)	<u> </u>					
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	1					
	column (B))		45	52,63	0.83		
Part	XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII		· ·,	• ;			
		-		/es	No		
1	Accounting method used to prepare the Form 990: Cash Accrual Other				- : '		
	If the organization changed its method of accounting from a prior year or checked "Other," explain	in					
	Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. [2a -	/			
b	Were the organization's financial statements audited by an independent accountant?	٠ ـ	2b		✓		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversignment of the committee of the committ	- 1					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant	L	2c		<u> </u>		
	If the organization changed either its oversight process or selection process during the tax year, explain	in þ		\$	77.		
	Schedule O.				48.		
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year we	ere			y- * 4 \		
	issued on a separate basis, consolidated basis, or both:	Š			. ` .		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		33 A	1683 ·			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	Hn		ŀ			
	the Single Audit Act and OMB Circular A-133?	. [3a		✓		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo to						
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	;	3b				
_			Form	990	(2011)		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2011

Open to Public Inspection

OMB No 1545-0047

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

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.

• Se	ection 501(c)(3) organizations	that have NOT filed Form 5768 (ele	ction under section 501	(h)): Complete Part II-B. Do	not complete Part II-A.
If the o	organization answered "Yes	r" to Form 990, Part IV, line 5 (Pro	xy Tax) or Form 990-E	Z, Part V, line 35c (Proxy T	ex), then
		anizations: Complete Part III.			
	of organization			Employer ide	ntification number
	r County Farm Bureau				73-0581050
Part		e organization is exempt u			organization.
1		the organization's direct and inc			
2	Political expenditures .				φ.
3	Volunteer hours				***************************************
Part		e organization is exempt u			
1	Enter the amount of any	excise tax incurred by the orga	nization under sectio	n 4955 ▶ S	3
2	Enter the amount of any	excise tax incurred by organiza	ition managers under	r section 4955 🕨 🧐	3
3	If the organization incurre	ed a section 4955 tax, did it file	Form 4720 for this y	ear?	Yes No
4a	Was a correction made?				Yes No
þ	If "Yes," describe in Part	IV.			
Part		e organization is exempt u			(c)(3).
<u> 1</u>		ly expended by the filing orga			
}					;
2		filing organization's funds cor		2	
		ivities			<u></u>
3		expenditures Add lines 1 and			
4		n file Form 1120-POL for this y			
5		ses and employer identification			
	organization made paym	ents. For each organization liste	ed, enter the amount	paid from the filing organ	ization's funds. Also enter
		ontributions received that were			
	as a separate segregated	fund or a political action comn	nittee (PAC). If addition	oriai space is needed, prov	ride 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)					
(2)					
(2)				 	
(3)					
(4)					
(5)					

Sched	ule C (Form 990 or 990-EZ) 2011					Page 2
\	II-A Complete if the organization section 501(h)).	-			•	ection under
A C	theck ► ☐ if the filing organization be name, address, EIN, expe					oup member's
вС	heck > I if the filing organization ch	ecked box A	and "limited con	trol" provisions a	pply.	
		bying Expendit		•	(a) Filing	(b) Affiliated
	(The term "expenditures" n	eans amounts	paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence	public opinion	(grass roots lobby	ring)		
b						
C	Total lobbying expenditures (add lines	la and 1b) .				
d	Other exempt purpose expenditures .					
е	Total exempt purpose expenditures (ad	d lines 1c and 1	d)			
f	Lobbying nontaxable amount. Enter columns.	the amount fi	rom the following	table in both		
	If the amount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:		
	Not over \$500,000		nount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess of	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.			Mile High School	
g	Grassroots nontaxable amount (enter 2	5% of line 1f)				
h	Subtract line 1g from line 1a. If zero or	ess, enter -0-				
i	Subtract line 1f from line 1c. If zero or le	ess, enter -0-				
j	If there is an amount other than zero reporting section 4911 tax for this year	_		the organization		Yes No
	(Some organizations that m	ade a section 5		• •		e
	Lobbyin	g Expenditures	During 4-Year A	veraging Period	,	
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))				r Arrive	
	Total lobbying expenditures					

d Grassroots nontaxable amount

e Grassroots celling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2011

		0	a)	(b)		
of the	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description In lobbying activity.	Yes	No	A	moun	t
1	Dunng 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 referendum, through the use of:		- 40		-5	,
а	Volunteers?				ا در معرب	,
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				*s ** *	7 11
C	Media advertisements?	<u> </u>				
d	Mailings to members, legislators, or the public?		<u> </u>			
e	Publications, or published or broadcast statements?		<u> </u>			
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
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)?				(Č):	Ťį,
b	If "Yes," enter the amount of any tax incurred under section 4912					
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		1 . 14.2	75 10 10 10 10	2 / 1/2	,
	III-A Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5).	or se	ction	٠.	
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	ļ
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	✓	<u> </u>
3	Did the organization agree to carry over lobbying and political expenditures from the prior year III-B Complete if the organization is exempt under section 501(c)(4), section 50			3	1	✓
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No' answered "Yes."	OR (b)	Part	III-A,	line :	3, is
1	Dues assessments and similar amounts from members		1	I	34.	730.0
1 2	Dues, assessments and similar amounts from members	ints of	1		34,	730.0
	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year				34,	730.0
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amor political expenses for which the section 527(f) tax was paid).		2a 2b		34,	730.0
2 a	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year		28		34,	730.0
2 a b	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year		2a 2b		34,	730.0
2 a b c	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es.	2a 2b 2c		34,	730.0
2 8 b c 3	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c		34,	730.0
2 8 b c 3	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3		34,	
2 a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3		34,	
2 a b c 3 4	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-(
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-(
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-0
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pal		-(
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-(
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-(
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-(
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-0
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-C
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pal		-0
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-0
2 b c 3 4 5 Pari	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid). Current year	es	2a 2b 2c 3 4 5	nd Pa		-0

	11 33U OF 33U-EZJ 2011	Page 4
Part IV	Supplemental Information (continued)	
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# SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

20**11** 

∠U Public

Department of the Treasury Internal Revenue Service Name of the organization ➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name o	of the on	ganization		Employ	er identification number
Custe	r Coun	ty Farm Bureau			73-0581050
Par	t I	Organizations Maintaining Dono organization answered "Yes" to Fo	r Advised Funds or Other Similar Fu orm 990, Part IV, line 6.	nds or	Accounts. Complete if the
			(a) Donor advised funds		(b) Funds and other accounts
1	Total	number at end of year			
2	Aggre	egate contributions to (during year) .			
3	Aggre	egate grants from (during year)			
4		egate value at end of year			
5			donor advisors in writing that the assets it to the organization's exclusive legal cont		
6	Did the	ne organization inform all grantees, dor for charitable purposes and not for the	nors, and donor advisors in writing that grabenefit of the donor or donor advisor, or	ant fund: for any	s can be used other purpose
Par		- ·	lete if the organization answered "Yes		
1		<del></del>	by the organization (check all that apply).	10 1 011	111 000, 1 art 14, 1110 7.
•			recreation or education) Preservation	of an hie	torically important land area
	_	rotection of natural habitat			ified historic structure
	_	reservation of open space		UI a Coit	med historic structure
2			tion held a qualified conservation contribut	tion in th	e form of a conservation
-		nent on the last day of the tax year.			5 15 m 5 4 55 m 5 m 7 m 10 m
		•		1	Held at the End of the Tax Year
a	Total	number of conservation easements .			28
b			ements		2b
c			tified historic structure included in (a)		2c
ď			ed in (c) acquired after 8/17/06, and no		
-		ic structure listed in the National Regist			2d
3		<del>-</del>	d, transferred, released, extinguished, or te	minated	
	tax ye		,		
4	Numt	per of states where property subject to	conservation easement is located ▶		
5			cy regarding the periodic monitoring, in	spection	n, handling of
			ion easements it holds?		
6	Staff	and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservatio	n easem	nents during the year
-	<b>&gt;</b>		<b>3</b> ,		, , , , , , , , , , , , , , , , , , ,
7	Amou	unt of expenses incurred in monitoring.	inspecting, and enforcing conservation eas	sements	during the year
•	▶\$	,			aum g mo you.
8	Does	each conservation easement reported	on line 2(d) above satisfy the requirements	of secti	on 170(h)(4)(B)
9	In Pa	rt XIV. describe how the organization re	ports conservation easements in its revenu	ue and e	
•			text of the footnote to the organization's f		
		ization's accounting for conservation e			
Part		<b>Organizations Maintaining Colle</b>	ctions of Art, Historical Treasures, o	r Other	r Similar Assets.
			ered "Yes" to Form 990, Part IV, line 8		
18	If the	organization elected, as permitted und	ler SFAS 116 (ASC 958), not to report in i	ts reveni	ue statement and balance shee
			similar assets held for public exhibition, e		
	public	service, provide, in Part XIV, the text of	of the footnote to its financial statements the	nat descr	ribes these items.
ь	if the	organization elected, as permitted un	nder SFAS 116 (ASC 958), to report in its	s revenu	e statement and balance shee
	work		similar assets held for public exhibition, o		
	•	· · · · · · · · · · · · · · · · · · ·			<b>.</b> •
	(I) M	rects included in Form 990, Part VIII,	line 1		
•	(II) As	isets included in Form 990, Part X	of out biokening tenenture or alternative		. > 5
2		<del></del>	of art, historical treasures, or other simil		s for financial gain, provide the
		- ·	nder SFAS 116 (ASC 958) relating to these		<b>.</b>
8	Heve	nues included in Form 990, Part VIII, lin	e1		<b>5 5 5 5 5 5 5 5 5 5</b>
<b>b</b> _	Asset	is included in Form 990, Part X	<u> </u>		▶ \$

Par	Organizations Maintaining	Collec	tions of A	rt, His	torical T	reasures	, or Ol	ther Similar Ass	sets (co	ıntinı	red)
3	Using the organization's acquisition, collection items (check all that apply):		on, and other	er reco	rds, chec	k any of th	e follov	ving that are a si	gnifican	use	of its
а	☐ Public exhibition			d	□Loan	or exchang	ae prog	rams			
b	☐ Scholarly research			9	☐ Other	_					
c	☐ Preservation for future generations			•							
4	Provide a description of the organizat		llections an	d expla	ain how th	nev further	the ord	anization's exem	int num	ose ir	ı Part
•	XIV.			p		,		Junización o oxon	p. pup.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
5	During the year, did the organization	solicit o	r receive de	onation	s of art. I	historical tr	reasure	s or other simila	r		
-	assets to be sold to raise funds rather									-a [	) No
Par	IV Escrow and Custodial Arra										
	line 9, or reported an amoun						u	.00 .00 .01.0	,,,,,		,
18						r contribut	tions o	other assets no	t		
	included on Form 990, Part X?								` □ Y	96 [	l No
b	If "Yes," explain the arrangement in Pa								_ ··	<b>73</b> [_	, 140
-	in too, oxplain the artallyonion in the		···a complet	J 1.10 / C	monning a	10.0.		An	nount		
c	Beginning balance						10				
ď	Additions during the year			• •			10				
e	Distributions during the year						16				
f	Ending balance						11				—
2a	Did the organization include an amour						ننيا				1 31-
	If "Yes," explain the arrangement in Pi		iii 990, Fai	ı A, iiile	1211				□ Y ₀	38	NO
	Endowment Funds. Complete		o organiza	tion ar	reword	"Voo" to E	Form O	On Part IV line	10		
1 41	Lidownient Funds. Compi		rent year		or year			(d) Three years back			haak
40	Paginning of year balance	(4) 00.	ionit your	(10)		(e) 1 #10 yaca	- Dack	(a) mieo years back	(6) 100	yours	Dack
1a	Beginning of year balance		——						7.8.9	1 7 7 13	1 mar
b	Contributions								13.25		<u> </u>
С	Net investment earnings, gains, and								2.1.	^ #% ; ,	, , , , , , ,
	losses								\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$ y,	<del>, ,</del>
d	Grants or scholarships									<u></u>	198, 71
е	Other expenditures for facilities and										
	programs								'a	ê Ş	<u> </u>
f	Administrative expenses								20°2.		
g	End of year balance									· · ,	4 3, 1 5,
2	Provide the estimated percentage of t	he curre	nt year end	balanc	e (line 1g	, column (a	i)) held	as:			
а	Board designated or quasi-endowmer	nt 🕨		%							
b	Permanent endowment	%									
c	Temporarily restricted endowment ▶		%								
	The percentages in lines 2a, 2b, and 2			%.							
3a	Are there endowment funds not in the	e posses	ssion of the	organi	zation tha	it are held	and ad	ministered for the	9		
	organization by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organi	izations	listed as rec	uired o	n Schedu	ule R?			3b		
4	Describe in Part XIV the intended uses										
Part											
	Description of property		a) Cost or othe			r other basis	(c)	Accumulated	(d) Boo	k value	——— ə
			(investmen	1)	(01	ther)		epreciation	` ,		
1a	Land	. – † –				95,513.48				95,5	13 48
b	Buildings	. $dash$				789,571.87		202,163.18			08.69
c	Leasehold improvements	. $\vdash$	• • • • • • • • • • • • • • • • • • • •		<u> </u>				<u> </u>		
d	Equipment					46,227.86		42,055.46		<u> 4</u> 1	72.40
e	Other	·				,		.2,000.10		<del></del>	
	Add lines 1a through 1e. (Column (d) n	nuet ear	al Form 000	) Dort	Y column	(B) line 10	2/01 1			607.0	04 57
TOTAL.	Add titles to titlough te. [Column (a) 11	iusi equ	ai ruiii 990	, rail	, coluititi	(O), III U	1( <i>1</i> ).)	· · · · -		007,0	94.57

Part VII	Investments - Other Securities	. See Form 990, Part	X, line 12.
(1	a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	I derivatives		
	held equity interests		
(3) Other	***************************************		
(A)		<del></del>	
(B)			
(C) (D)			
(E)			
(F)		<del></del>	
(G)	***************************************		
(H)		<u> </u>	-
(1)			
	(b) must equal Form 990, Part X, col. (B) line 12.)	: 	1. 14 to 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
Part VIII	Investments - Program Related	L See Form 990 Part	t X line 13
	(a) Description of investment type	(b) Book value	(c) Method of valuation:
	, , , , , , , , , , , , , , , , , , ,	<b>(-)</b>	Cost or end-of-year market value
(1)			
(2)		<u> </u>	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	A)		
Part IX	(b) must equal Form 990, Part X, col. (B) line 13.) ► Other Assets. See Form 990, Pa	nt V line 15	The state of the s
FaitiA	····	) Description	the Cook value
(1)		, 5000, 500	(b) Book value
(2)			
(3)		*	
(4)		<del></del>	
(5)		· · · · · · · · · · · · · · · · · · ·	
(6)			
(7)			
(8)			
(9)			
(10)			
	mn (b) must equal Form 990, Part X, co		<b>&gt;</b>
Part X	Other Liabilities. See Form 990,		
1.	(a) Description of liability	(b) Book value	
	income taxes		
(2)		<del></del>	~4
(3)			
(4)			· · · · · · · · · · · · · · · · · · ·
(5) (6)			
(8)		<del></del>	
(9)			- Angelia de la partir de la companya della companya de la companya de la companya della company
(10)			
(11)		<u> </u>	
	b) must equal Form 990, Part X, col. (B) line 25.)		
		the text of the footnote	to the organization's financial statements that reports the
organization	n's liability for uncertain tax positions up	nder FIN 48 (ASC 740).	to the organization of infancial statements that reports the

	te D (Form 990) 2011		Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial State	ments
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1
2	Total expenses (Form 990, Part IX, column (A), line 25)		2
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3
4	Net unrealized gains (losses) on investments		4
5	Donated services and use of facilities		5
6	Investment expenses		6
7	Prior period adjustments		7
8	Other (Describe in Part XIV.)		8
9	Total adjustments (net). Add lines 4 through 8		9
10	Excess or (deficit) for the year per audited financial statements. Combine	lines 3 and 9	10
Part	XII Reconciliation of Revenue per Audited Financial Statement	ents With Revenue pe	er Return
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	7 ~
c	Recoveries of prior year grants	2c	<del>-</del>
đ	Other (Describe in Part XIV.)		<b>-</b>
•	Add lines 2a through 2d		
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		2.10
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1774
b	Other (Describe in Part XIV.)	4b	<u> </u>
C	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part	XIII Reconciliation of Expenses per Audited Financial Statem		
1		· · · · · · · · · · · · · · · · · · ·	• + + + + + + + + + + + + + + + + + + +
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		` <b>  •</b>
a	Donated services and use of facilities	2a	
ь	Prior year adjustments	2b	
c	Other losses	2c	
ď	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	<del></del>	
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	· · · · · · · · · · · · · · · · · · ·	. 3
•	Investment expenses not included on Form 990, Part VIII, line 7b	140	
a	Other (Describe in Part XIV.)	48 4b	
b	· · · · · · · · · · · · · · · · · · ·		<b>→</b> 、_
C E	Add lines 4a and 4b		.   4c
5 Post	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 10.)	5
Part Comp	XIV Supplemental Information lete this part to provide the descriptions required for Part II, lines 3, 5, and	9: Part III lines 1a and 4	· Part IV lines 1h and 2h
) Part V	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII,	lines 2d and 4h. Also co	molete this part to provide
	Iditional information.	11103 20 010 4D. AISO CO	implete this part to provide
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		· .	
		· · · · · · · · · · · · · · · · · · ·	
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Schedule D (Form 990) 2011

Part XIV Supplemental Information (continued)	Schedule D (For	m 990) 2011	Page 5
	Part YIV	Supplemental Information (continued)	
	r all t All	Supplemental information (Continues)	<del></del>
			·

NAME: TAX NO. TAX YEAR ENDING Custer County Farm Bureau 73-0581050 8/31/2012

## LIST OF OFFICERS, DIRECTORS AND TRUSTEES

(A) NAME AND ADDRESS	(B)	(C)	(D)	(E)
Bill Sawatzky	PRESIDENT	NONE	NONE	NONE
RR 1 Box 72 Custer City 73639	4 HRS A MONTH			
Lawrence Sawatzky	VICE-PRESIDENT	NONE	NONE	NONE
22945 E 1050 Road Clinton 73601	4 HRS A MONTH			
Alveta Taylor	SECRETARY	NONE	NONE	NONE
P.O. Box 303, Thomas 73669	4 HRS A MONTH			
Tommy Snider	TREASURER	NONE	NONE	NONE
RR 1Box 600 Clinton 73601	4 HRS A MONTH			
Bryan Hunter	DIRECTOR	NONE	NONE	NONE
RR 1 Box 27 Arapaho 73620	4 HRS A MONTH			
James Robert Dozier	DIRECTOR	NONE	NONE	NONE
10141 N 2350 RD Weatherford 73096	4 HRS A MONTH			
Jerry Waltrip	DIRECTOR	NONE	NONE	NONE
22317 E 970 RD, Weatherford 73096	4 HRS A MONTH			
Ken Hamar	DIRECTOR	NONE	NONE	NONE
140 Sandra Rd Clinton 73601	4 HRS A MONTH			
Howard Bartel	DIRECTOR	NONE	NONE	NONE
Rt 4 Box 54 Weatherford 73096	4 HRS A MONTH			

### 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.

2011

Department of the Treasury Internal Revenue Service Name of the organization Open to Public Inspection

Employer Identification number

Custer County Farm Bureau	73-0581050				
The Organization does not have stockholders but it does have members. There are two types of mo	embers. One is an Associate member				
and the other is a Voting member. An Associate member includes someone who runs or operates	a farm but whose average gross				
agricultural income is less than half their total income. An Associate member also includes someo	ne working in Agribusiness. Someone				
who is not directly related to Agriculture is an associate member. Lastly, an Associate member car	hold their membership through a				
church, FFA chapter, an association, or by a corporation not producing agriculture products. A Vo	ting member can be a family that gets the				
majority of its average gross income from the sale of agricultural products. A Voting member can a	also be held by a retired agricultural				
person living on an income or social security accrued and not employed full time in another occupa	ation. A Voting member can also be held				
by a partnership or corporation receiving the majority of income from the sale of agricultural products. There is a relative of the President					
of the Board on the Board of Directors.					