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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)

Open to Public

Inspection

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

OMB No 1545-0047

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)  13 Grants and similar amounts paid (Part IX, column (A), lines 1·3)  14 Benefits paid to or for members (Part IX, column (A), line 4)  15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10)  16a Professional fundraising fees (Part IX, column (A), line 11e)  17 Other expenses (Part IX, column (A), line 25)  18 Total expenses Add lines 13·17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	A	For th	e 2011 calendar year, or tax year beginning OCT 1, 2011 and e	ending (	SEP 30, 2012	
DOUGLAS COLUNY FARM BURRAY  Dong Business As  Number and street (or P.O. bor if mails in or delivered to street address)    Program   P		Check if	C Name of organization		D Employer identifi	cation number
Tave-enroph status   Stollar   St		Addre	DOUGLAS COUNTY FARM BUREAU			
Number of stated (8P) to so if main is not deviced to street address)    Section   Comparison		Name chang	Doing Business As		47-0	406434
City or town, state or country, and ZIP + 4    Conserved   Chip or town, state or country, and ZIP + 4   Replaced   Chip or town, state or country, and ZIP + 4   Replaced   Chip or town, state or country, and ZIP + 4   Replaced	<u></u>	]Initial Ireturn	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	'	
MAHA, N. E 68164   F Name and address of propagation   FRED TONACK   Haj is this a group return for affiniates?   FNAme and address of propagation   FNAME	Ļ	_Jated	10033 COTTONWOOD DAME		(402	
Name and address of principal official FRED TONACK   8909 NORTH 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   No   North 117TH ST. OMAHA, NE   68142   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH ST. ON   Hit) / Are all affaitates included   Vee   North 117TH State   Vee   Vee   North 117TH State   Vee   Vee   North 117TH State   Vee   Vee   N	<u>L</u>	lreturn	City or town, state or country, and ZIP + 4		G Gross receipts \$	99,775.92
Finame and address of principal efficient PLRD TUNACK   1   1   1   1   1   1   1   1   1	L_	_Jtion	OMAHA, NE 00104		H(a) is this a group re	
Tax-exempt status   \$01(c)(3)   \$51(c)(5)   \$   (insert no.)   4947(a)(1) or   527   If "No." attach a last (see instructions)   Websites   N/A   N   N   N/A   N   N/A   N   N/A   N   N/A   N   N/A   N   N/A   N   N/A   N   N/A   N   N   N/A   N   N   N/A   N   N   N/A   N   N   N   N   N/A   N   N   N   N   N   N   N   N   N		pena	F Name and address of principal officer FRED TONACK		for affiliates?	Yes X No
Website: ► N / A   Hick Group exemption number ►			8909 NORTH 117TH ST, OMAHA, NE 68142		H(b) Are all affiliates inc	luded? Yes No
Form of organization:	1	Tax-ex	empt status 501(c)(3)X 501(c)(5) ◀ (insert no.) 4947(a)(1) o	or 52	7 If "No," attach a	list (see instructions)
Benefity describe the organization's mission or most significant activities   PROGRAMS TO UNITE FARM AND RANCH						
Briefly describe the organization's mission or most significant activities   ROGRAMS TO UNITE FARM AND RANCH				L Year	of formation: 1955 N	State of legal domicile: NE
FAMALIES AND BETTER THE CONDITIONS OF THOSE ENGAGED IN THE PURSUIT  2 Check this box ▶  if the organization discontinued its operations or disposed of more than 25% of its net assets.  3 Number of voting members of the governing body (Part VI, line 1a)  4 Number of undependent voting members of the governing body (Part VI, line 1b)  5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)  6 Total number of volunteers (estimate if necessary)  7a Total unrelated business revenue from Fart VIII, column (C), line 12  8 Contributions and grants (Part VIII, line 1h)  9 Program service revenue (Part VIII, line 1h)  9 Program service revenue (Part VIII, loulumn (A), line 3, 4, and 7d)  10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)  11 Other evenue (Part VIII, column (A), lines 3, 4, and 7d)  12 Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12)  13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)  14 Benefits paid to or for members (Part IX, column (A), lines 1-3)  15 Salaines, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16 Salaines, other compensation, employee benefits (Part IX, column (A), lines 5-10)  17 Other expenses (Part IX, column (A), lines 1-2)  18 Protessional fundriaising fees (Part IX, column (A), line 25)  19 Revenue loss expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  20 Total assets (Part X, line 16)  21 Total revenue and lines 13-17 (must equal Part IX, column (A), line 25)  22 Net assets or fund balances. Subtract line 21 from line 20 (GCT 2) 2012 (GCT 2) 2012 (GCT 2) 2010 (	Pa	art I				
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Security	ern	2	Check this box   If the organization discontinued its operations or disposit	ed of mor	e than 25% of its net as	
Security	Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	
Security	∞ ∞	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	
Secont industrial content of the c	ies	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	
Security	Ξŧ	6	Total number of volunteers (estimate if necessary)		. 6	
B Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, column (A), lines 3, 4, and 7d) 10 Investment income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), lines 1-3) 15 Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16 Professional fundraising fees (Part IX, column (A), line 25) 17 Other expenses (Part IX, column (A), lines 25) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 23 Line 15 (Salane) 24 Signature 15 (Salane) 25 Signature 15 (Salane) 26 Free 11 Signature 15 (Salane) 27 Fart II Signature 15 (Salane) 28 Signature 15 (Salane) 29 Free 17 Signature 15 (Salane) 20 Total assets (Part X, line 26) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 23 (Salane) 24 Signature 15 (Salane) 25 Signature 15 (Salane) 25 Signature 15 (Salane) 26 Signature 15 (Salane) 27 Signature 15 (Salane) 28 Signature 15 South 10 7TH AVENUE 28 FERDIG LLP Firm's address 16 South 10 7TH AVENUE 29 Phone no. (402) 592-3800	Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		. 7a	
1	_	b	Net unrelated business taxable income from Form 990-T, line 34		<del></del>	
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Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16a Professional fundraising fees (Part IX, column (A), line 11e)  17 Other expenses (Part IX, column (A), line 11d, 11f-24e)  18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)  19 Revenue less expenses. Subtract line 18 from line 12  20 Total assets (Part X, line 16)  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  11 Signature Block  12 Signature Block  13 Signature Block  14 Signature Block  15 Signature Block  16 FRED TONACK, PRESIDENT  17 Firm's name  18 Preparer   Part II   Preparer's name  19 Preparer   Preparer's name  10 Signature Block  10	<u>z</u>					
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19 Revenue less expenses. Subtract line 18 from line 12  27,723.17  27,995.05  Beginning of Current Year  End of Year  570,551.22  598,621.22  1,875.30  1,950.25  Net assets or fund balances. Subtract line 21 from line 20  Index penalties of perjury, I decret that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaron of penalties of officer  FRED TONACK, PRESIDENT  Type or print name and title  Print/Type preparer's name  Preparery signature  Print/Type preparer's name  Preparery signature  Firm's name  O'DONNELL FICENEC WILLS & FERDIG LLP  Firm's address  4815 SOUTH 107TH AVENUE  OMAHA, NE 68127-1904  Phone no. (402)592-3800	_	1		<u> </u>		
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of peparer (other than officer) is based on all information of which preparer has any knowledge.  Sign Here  PRED TONACK, PRESIDENT Type or print name and title  Print/Type preparer's name  Preparer  Preparer's ignature  Date  Check X PTIN  form's name  O'DONNELL FICENEC WILLS & FERDIG LLP  Firm's address  4815 SOUTH 107TH AVENUE  OMAHA, NE 68127-1904  Phone no. (402)592-3800	<u>_ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~</u>	19	Revenue less expenses. Subtract line 18 from line 12			
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of peparer (other than officer) is based on all information of which preparer has any knowledge.  Sign Here  PRED TONACK, PRESIDENT Type or print name and title  Print/Type preparer's name  Preparer  Preparer's ignature  Date  Check X PTIN  form's name  O'DONNELL FICENEC WILLS & FERDIG LLP  Firm's address  4815 SOUTH 107TH AVENUE  OMAHA, NE 68127-1904  Phone no. (402)592-3800	Sse	20	Total assets (Fart A, Illie TO)	⊣ن⊩		
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true, correct, and complete. Dectration of preparer (other than officer) is based on all information of which preparer has any knowledge.  Sign Here  FRED TONACK, PRESIDENT Type or print name and title  Print/Type preparer's name  Preparer  Firm's name  O'DONNELL FICENEC WILLS & FERDIG LLP  Firm's address  4815 SOUTH 107TH AVENUE OMAHA, NE 68127-1904  Phone no. (402)592-3800			· · · · · · · · · · · · · · · · · ·	100 contract	nonte and to the best of my	knowledge and helief it is
Sign Here FRED TONACK, PRESIDENT Type or print name and title  Print/Type preparer's name Preparer Firm's name O'DONNELL FICENEC WILLS & FERDIG LLP Firm's address 4815 SOUTH 107TH AVENUE OMAHA, NE 68127-1904  Pate  Date  Check X PTIN 1 sett-emptoyed P00103948  Firm's EIN 47-0387937  Phone no. (402)592-3800						y knowledge and belief, it is
Here  FRED TONACK, PRESIDENT Type or print name and title  Print/Type preparer's name  Preparer  Prim's name O'DONNELL FICENEC WILLS & FERDIG LLP Firm's address 4815 SOUTH 107TH AVENUE OMAHA, NE 68127-1904  Proparer  Print/S PRESIDENT  O'C-/C-/  Sett-emptoyed PO0103948  Prim's EIN 47-0387937  Phone no. (402)592-3800	1100,	COLLEC	t, and complete. Decaration of prepare (over main drice) is bases on all minimum and on which	- Tepare	i ilas arīy kilowieuge.	
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Print/Type preparer's name  Print/Type preparer's name  Preparer  Prim's name  O'DONNELL FICENEC WILLS & FERDIG LLP  Firm's address  4815 SOUTH 107TH AVENUE  OMAHA, NE 68127-1904  Preparer  Preparer's signature  Date  Sett-employed  Firm's EIN  47-0387937  Phone no. (402)592-3800					10-1	16-12
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Use Only   Firm's address   4815 SOUTH 107TH AVENUE OMAHA, NE 68127-1904   Phone no. (402)592-3800			Firm's name O'DONNETT, RICENER WITTE & PEDDIC	. T.T.D		
OMAHA, NE 68127-1904 Phone no. (402)592-3800					TIMES LINE	<u> </u>
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	n 990 (2011) DOUGLAS COUNTY FARM BUREAU	<u>47-0406434</u>	Page 2
<u> Pa</u>	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission:  PROGRAMS TO UNITE FARM AND RENCH FAMILIES AND BETTER THE THOSE ENGAGED IN THE PURSUIT OF FARMING AND RANCHING.	CONDITIONS	OF
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as r Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of g others, the total expenses, and revenue, if any, for each program service reported		
4a		\$	
	INDUSTRY PROMOTION		
4b	(Code) (Expenses \$	\$	
4c	(Code) (Expenses \$) (Revenue	\$	)
		<u> </u>	′
		<del></del>	
	Other program services (Describe in Schedule O.)		
74		١	
	(Expenses \$ including grants of \$ ) (Revenue \$  Total program service expenses		
+6	Total program activide expenses P	Form <b>99</b> 0	0 (2011)
32002		רטוווו ששנ	· (2011)

47-0406434 DOUGLAS COUNTY FARM BUREAU Page 3 Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect 4 during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete 8 X 8 Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide Х credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a 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 X c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 X Part X, line 16? If "Yes," complete Schedule D, Part IX 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 1<u>1f</u> 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI, XII, and XIII 12a 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 X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Х X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 Х or more? If "Yes," complete Schedule F, Parts I and IV 14b 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 Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals Х located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16

Form 990 (2011)

X

X

17

18

19

20a 20b

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

1c and 8a? If "Yes," complete Schedule G, Part II

complete Schedule G, Part III

Form 990 (2011) DOUGLAS COUNTY FARM BUREAU
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			3.5
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21_		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			v
	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	00		Х
	Schedule J	23		Λ.
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	04-		X
	Schedule K. If "No", go to line 25	24a		Λ
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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?  Did the exceptration set as an "on behalf of" requer for bonds outstanding at any time during the year?	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		
258	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
_	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	Zua		
D	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	200	_	
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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		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
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		į	
	sections 301.7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of		1	
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
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		<u> X</u>
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	X	
		Form 9	99U (2	2011)

Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes Nο 0 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 0 1b b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 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 X b 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) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За 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 Х 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 X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes." to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? 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? X 7a **7**b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с d If "Yes." indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a 9b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 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 Section 501(c)(29) qualified nonprofit health insurance issuers. a 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 13b 13c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b

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Form 990 (2011) DOUGLAS COUNTY FARM BUREAU 47-0406434 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 47-04<u>06434</u> Page 6

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 11			
	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.			
b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
2	officer, director, trustee, or key employee?	2	x	
•	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3		3		Х
_	of officers, directors, or trustees, or key employees to a management company or other person?	4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	х	Δ
6	Did the organization have members or stockholders?	6_	^	
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	_X_	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			77
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
		8a	X	
þ	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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
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		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent			
. •	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	The organization's CEO, Executive Director, or top management official	15a		Х
		15b		X
D	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	,JU		42
ıe-	, , , , , , , , , , , , , , , , , , , ,			
oa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16.	ŀ	х
	taxable entity during the year?	16a		
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401		
	exempt status with respect to such arrangements?	16b	J	
	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 (Section 501(c)(3)s only) at	valiab	e	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request	_	_	
9	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	finan	cıal	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	on. 🕨		
	DOUGLAS COUNTY FARM BUREAU - 402 991-1433			
, <del>, ,</del>	10835 COTTONWOOD LANE, OMAHA, NE 68164			
32000 1-23-	12	Form	<b>990</b> (	2011)

# 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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

(A) Name and Title	(B) Average hours per week	box	not c	Pos heck ss pe	more	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(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)	compensation from the organization and related organizations
(1) DARLEEN TONACK BOARD MEMBER	1.00	x						0.00	0.00	0.00
(2) JACKIE MARKMANN BOARD MEMBER	1.00							0.00		0.00
(3) RYAN UEBERRHEIN BOARD MEMBER	1.00	x						0.00	0.00	0.00
(4) GERALD GOTTSCH BOARD MEMBER	1.00	x						0.00	0.00	0.00
(5) DORIS GOTTSCH BOARD MEMBER (6) FRED TONACK	1.00	х						0.00	_0.00	0.00
PRESIDENT (7) LARRY HADAN	10.00			X				0.00	0.00	0.00
V. PRESIDENT	7.00			X			!	0.00	0.00	0.00
(8) MEL VALSEK SECRETARY AND TREASURER	5.00			X				0.00	0.00	0.00
										<u> </u>
			_]						_	
			_							

ra	T VII Section A. Officers, Directors, To	rustees, Key Ei	mplo	oyee	<u>s, a</u>	nd l	<u>High</u>	est	Compensated Employ	ees (continued)				
	(A)	(B)	1		-	C)			(D)	(E)			(F)	
	Name and title	Average	(40		Pos		than	ODE	Reportable	Reportable	- 1	Es	stimate	ed
		hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	n	ar	nount	of
		week	<del> </del>	cer an	nd a d	Irecto	or/trus	itee)	from	from related			other	
		(describe	혍			1	ĺ		the	organizations			pensa	
		hours for	10	يوا			ged		organization	(W-2/1099-MIS	(C)		rom th	
		related	stee	) day	1	a.	Bells		(W-2/1099-MISC)			_	anızat	
		organizations in Schedule	- E	la la		ploye	5 8	ĺ			1		d relat	
		O)	Individual bustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Богшег				orga	anızatı	IONS
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1b	Sub-total								0.00		.00			.00
С	Total from continuation sheets to Part V	II, Section A							0.00		.00			.00
_ <u>d</u>	Total (add lines 1b and 1c)								0.00	0.	00		0	.00
2	Total number of individuals (including but	not limited to th	ose	liste	d at	oove	e) wh	no re	eceived more than \$100	,000 of reportable	е			
	compensation from the organization													0
													Yes	No
3	Did the organization list any former officer	, director, or tru	ıstee	e, ke	y en	nplo	yee,	or I	highest compensated e	mployee on	ſ			
	line 1a? If "Yes," complete Schedule J for	such individual			•	•	-		•			3	ĺ	X
4	For any individual listed on line 1a, is the s		le co	mpe	ensa	ition	anc	oth	her compensation from	the organization				
	and related organizations greater than \$15	•		•								4		X
5	Did any person listed on line 1a receive or			•						dual for services	F			T
Ŭ	rendered to the organization? If "Yes," con							Cial	ca organization or mare	dadi for dervices	ŀ	5	ı	х
Sec	tion B. Independent Contractors	ipiete Scriedule	<del>5</del>	UI SL	icii j	Jers	.011		<del></del>					
		· · · · · · · · · · · · · · · · · · ·	<u> </u>			4-			h-4 -4	\$100,000 of som				
1	Complete this table for your five highest co	-	-								pensa	1110111	10111	
	the organization. Report compensation for	the calendar ye	e <u>ar</u> e	nair	ig w	/uri (	Or W	nrair:	<u>-</u>	year T				
	(A) Name and business	address	370	\ <b>\</b> \ T T				j	( <b>B)</b> Description of s	envices	C	(C	ز) nsatio	nn
	Name and basiles.		TAC	NE				$\dashv$	- Description of e	CIVICOS				
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2	Total number of independent contractors (	including but no	ot lin	nited	d to	thos	se (is	ted	above) who received m	ore than				
-	\$100,000 of compensation from the organ	_			-	C	)		,	1				
												Form	990 (	(2011)
													(	1

Pa	rt VII	Statement of Reve	nue		<u> </u>			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इ इ	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
S,E	c		1c					
ifts		Related organizations	1d					
B. B.	e	0						
Sign		All other contributions, gifts, gran						
ig je		similar amounts not included abo						
<u></u>	~	Noncash contributions included in lines	<del></del>					
SE	_	Total. Add lines 1a-1f	, III- II					
<u> </u>		Total: Add lines fu fi		Business Code				
	2 a	MEMBERSHIP DUES	2	813910		77,958.54		
Š				013310	77755.54	777556552		
Ser	b							
ΕŞ	C					_		
Pe	d e				-			
Program Service Revenue	f		eni ie					
		Total. Add lines 2a-2f	silue	<b></b>	77,958.54			
	<u>ч</u>	Investment income (including	dividends inter		7,7550151			
	•	other similar amounts)	arridorido, irridi	<b>&gt;</b>	4,877.73	4,877.73		
	4	Income from investment of ta	v-evemnt hand i	-	1,0,,,,,	27011010		
	5	Royalties	x exempt bond ;	>10000000 <b>&gt;</b>				
	3	Hoyanics	(i) Real	(ıi) Personal				
	6 a	Gross rents	16,939,65	1 11				
		Less: rental expenses	6,503.08					
- 1		Rental income or (loss)	10,436.5					
		Net rental income or (loss)	10,430,3	<u>'</u>	10 436.57	10,436.57		
		Gross amount from sales of	(i) Securities	(ii) Other	10,430.37	10,130,37		
	, a	assets other than inventory	(I) Occurred	(ii) Otilloi				
	<b>h</b>	Less: cost or other basis						
		and sales expenses	ļ					
	_	Gain or (loss)						
		Net gain or (loss)						
_		Gross income from fundraisin	a events (not					
Other Revenue	0 a	including \$						
Ş		contributions reported on line						
~		Part IV, line 18	а	1				
ള	h	Less: direct expenses	. b					
٥∣		Net income or (loss) from fund	•			1		
		Gross income from gaming ac						
	<i>- - - - - - - - - -</i>	Part IV, line 19	а					
	h	Less direct expenses	b					
- 1		Net income or (loss) from gam	_	<b></b>				
1		Gross sales of inventory, less						
1		and allowances	а					
	h	Less cost of goods sold	b					
		Net income or (loss) from sale		<b></b>				
t		Miscellaneous Revenu		Business Code				-
H	11 a			- COURT				
				-				-
	b		<del></del>					
	۲ د	All other revenue						
	a			L				
	12	Total revenue. See instructions.			93.272.84	93,272.84	0.00	0.00
132009	)	TOTAL TOTORIDE. OUD MISH BUILDING.			<u> </u>	JU, 2, 2, 0 T		Form <b>990</b> (2011)

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

	Check if Schedule O contains a respon	se to any question in th	is Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and		<del></del>		
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the			1	
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members	<del></del>			
5	Compensation of current officers, directors,				
	trustees, and key employees				L
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	•			
_	persons described in section 4958(c)(3)(B)	10 150 00	<del> </del>		<u> </u>
7	Other salaries and wages	10,152.00			
8	Pension plan accruals and contributions (include				
_	section 401(k) and section 403(b) employer contributions)	<del></del>			
9	Other employee benefits	920 10			
10	Payroll taxes	829.10			
11	Fees for services (non-employees):				
a	Management				
b	Legal	2,413.50		<u> </u>	
C	Accounting Lobbying	2,413.50			
d e	Professional fundraising services. See Part IV, line 17		<del></del>		
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	864.69			
14	Information technology				
15	Royalties				
16	Occupancy	8,607.93			
17	Travel	637.12			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	38,057.32			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	746.26			
23	Insurance	667.00			<del> </del>
24	Other expenses. Itemize expenses not covered 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.)				
а	TELEPHONE	1,510.88			
b	MEETINGS	347.37			
С	UNCLASSIFIED	269.00			<u> </u>
d	MEMORIALS	137.50			
е	All other expenses	38.12			
25	Total functional expenses. Add lines 1 through 24e	65,277.79			
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)				- 000

orm 99 <b>Part</b>	_	DOUGLAS COUNTY Balance Sheet	TARM BUREAU		<del>4</del> /	U4U0434 Page II
				(A) Beginning of year		(B) End of year
ĺ	1	Cash - non-interest-bearing		26,791.67	1	41,828.42
	2	Savings and temporary cash investments		189,394.51	2	209,643.17
	3	Pledges and grants receivable, net			_ 3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, di	rectors, trustees, key			
		employees, and highest compensated employee	es Complete Part II			
		of Schedule L		<u> </u>	5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)), persons described in section 4958(c	)(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 501(c)(9) voluntary			
.		employees' beneficiary organizations (see instru	ctions) .		6	
	7	Notes and loans receivable, net		15,000.00	7	15,000.00
Assets	8	Inventories for sale or use		<u> </u>	8	
`	9	Prepaid expenses and deferred charges			9	
1	l0a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a 366,762.26 10b 38,262.63			
	b	Less: accumulated depreciation	10b 38,262.63	336,565.0 <u>4</u>	10c	328,499.63
1	11	Investments - publicly traded securities			11	
1	12	investments - other securities See Part IV, line 1	l1 J	i	12	
1	13	Investments - program-related See Part IV, line	11		13	
1	14	Intangible assets .			14	
1	15	Other assets See Part IV, line 11		2,800.00	15	3,650.00
1	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	570,551.22	16	598,621.22
1	17	Accounts payable and accrued expenses			17	
1	18	Grants payable .			18	
1	19	Deferred revenue			19	
2	20	Tax-exempt bond liabilities			20	
3 2	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
2	22	Payables to current and former officers, director	s, trustees, key employees,			
		highest compensated employees, and disqualifi	ed persons. Complete Part II			
-		of Schedule L			22	
2	23	Secured mortgages and notes payable to unrela	ated third parties		23	
2	24	Unsecured notes and loans payable to unrelated	d third parties		24	
2	25	Other liabilities (including federal income tax, pa	yables to related third	}		
		parties, and other liabilities not included on lines	17-24) Complete Part X of			4 0 5 0 0 5
		Schedule D		1,875.30	25	1,950.25
2	26	Total liabilities. Add lines 17 through 25		1,875.30	26	1,950.25
		Organizations that follow SFAS 117, check he	ere 🕨 🗓 and complete			
S G		lines 27 through 29, and lines 33 and 34.				506 650 05
2 2	27	Unrestricted net assets	,	568,675.92		596,670.97
2	28	Temporarily restricted net assets			28	
2	29	Permanently restricted net assets	· , , . ,		29	
Net Assets of Fulld balances		Organizations that do not follow SFAS 117, cl	neck here 🕨 📖 and			
5		complete lines 30 through 34.				ļ
<u> </u>	Ю	Capital stock or trust principal, or current funds			30_	
ខ្មុំ 3	11	Paid-in or capital surplus, or land, building, or ed			31	
<u>.</u>   3	2	Retained earnings, endowment, accumulated in	come, or other funds	F.CO. CD.F. C.O.	32	F06 650 05
- 3	13	Total net assets or fund balances	. ,	568,675.92	33	596,670.97
3	4	Total liabilities and net assets/fund balances		570,551.22	34	598,621.22 Form <b>990</b> (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

Department of the Treasury Internal Revenue Service Complete if the organization is des

➤ 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
- 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 35c (Proxy Tax), then

• Section	501(c)(4), (5), or (6) organiza	ations Complete Part III	,,	_, , _, , , , , , , , , , , , , , , , ,	
Name of org		ations complete vart in		Emp	loyer identification number
	DOUGLAS	COUNTY FARM BUR	EAU		47-0406434
Part I-A	Complete if the or	ganization is exempt und	er section 501(c)	or is a section 527 of	rganization.
	a description of the organi Lexpenditures	zation's direct and indirect politica	al campaign activities	ın Part IV ▶ \$	
3 Volunte	er hours				
Part I-B	Complete if the or	ganization is exempt und	er section 501(c)	(3).	
1 Enter th	e amount of any excise tax	incurred by the organization und	er section 4955	▶\$	
2 Enter th	e amount of any excise tax	incurred by organization manage	ers under section 4955	<b>▶</b> \$	
3 If the or	ganization incurred a section	on 4955 tax, did it file Form 4720 t	for this year?		Yes No
	correction made?		•		Yes No
b If "Yes,	" describe in Part IV.		•		
Part I-C	Complete if the org	ganization is exempt unde	er section 501(c)	, except section 501	c)(3).
1 Enter th	e amount directly expende	d by the filing organization for sec	tion 527 exempt func	tion activities	
	- ·	nization's funds contributed to oth	•		
	function activities		<b>g</b>	<b>▶</b> \$	
•		 s. Add lines 1 and 2. Enter here ar	nd on Form 1120-POL	• • •	
line 17b	,			, • \$	4
	filing organization file Form	1120-POL for this year?	•		Yes No
		nployer identification number (EIN	 J) of all section 527 no	olitical organizations to which	
		ition listed, enter the amount paid		_	• •
		omptly and directly delivered to a			
		additional space is needed, provi		· · · · · · · · · · · · · · · · · · ·	
<del></del> -	(a) Name	(b) Address			(e) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
				<del> </del>	<u> </u>
			1		1

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

Schedule C (Form 990 or 990-EZ) 2011

LHA 132041

Schedule C (Form 990 or 990-EZ) 2011 Part II-A   Complete if the org	DOUGL	AS COU	NTY FARM BU	REAU	47-6	0406434 Page 2
(election under sec			inpi under sectio	n oo rojoj and me		
<del></del>		<del></del>	liated group (and list ii	n Part IV each affiliated o	roup member's nar	me, address, EIN.
expenses, and sha		_	_	, ran ir odon annator s	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,
			nd "limited control" pro	ovisions apply		
Lim	its on Lob	bying Expe			(a) Filing organization's totals	(b) Affiliated group totals
			·	·		ļ <u> </u>
1a Total lobbying expenditures to infl	•	•		-		
<b>b</b> Total lobbying expenditures to infl	luence a le	gislative boo	dy (direct lobbying)	<u> </u>		
c Total lobbying expenditures (add l	ines 1a an	d 1b)		<u> </u>		
d Other exempt purpose expenditure	es					
<ul> <li>Total exempt purpose expenditure</li> </ul>	es (add line	s 1c and 1c	d)	_		
f Lobbying nontaxable amount. Ent	er the amo	unt from the	e following table in bot	h columns.		
If the amount on line 1e, column (a)	or (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,00	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17			00 plus 5% of the exce			
Over \$17,000,000	· · · · · · ·	\$1,000.				
,						
g Grassroots nontaxable amount (er	nter 25% o	fine 1f)	<del>-</del>			
h Subtract line 1g from line 1a. If zei		•	•	-		<del> </del>
i Subtract line 1f from line 1c. If zero	•			•		<del></del>
j If there is an amount other than ze			 Ino 1, did the erganiz	Lotion file Form 4720	<del></del>	
•		si ilite ili oi	ine ii, did tile organiz	ation ille i omi 4720		Yes No
reporting section 4911 tax for this	yearr	4 V 4		Castina E04/h)		Tes NO
		at made a s		section 501(n) n do not have to compl es 2a through 2f on pag		
	Lobk	ying Exper	nditures During 4-Yea	ar Averaging 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))						
c Total lobbying expenditures			·			
d Grassroots nontaxable amount						
e Grassroots ceiling amount		<del>-</del>				
(150% of line 2d, column (e))	· · · · · ·					
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2011

# Schedule C (Form 990 or 990-EZ) 2011 DOUGLAS COUNTY FARM BUREAU 47-0406434 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)).

r each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	<del>  (</del>	b)
the lobbying activity	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or			<del></del>	
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:			}	
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?			ļ <u>.</u>	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		·		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			<u> </u>	
i Other activities?				
j Total Add lines 1c through 1i				
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912	] }			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u> </u>	
art III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)	(5), or s	ection	
501(c)(6).			1	
		_	Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		1	X	<del> </del>
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	<u> </u>
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered.		2 3 (5), or s	X	) ne 3, i
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Int III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		2 3 (5), or s (b) Par	X	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	ed "No" OR	2 3 (5), or s	X	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ed "No" OR	2 3 (5), or s (b) Par	X	
Did the organization make only in house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polesceness for which the section 527(f) tax was paid).	ed "No" OR	2 3 (5), or s (b) Par	X	
Did the organization make only in house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	ed "No" OR	2 3 (5), or s (b) Par	X	
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polespenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  Total	ed "No" OR	2 3 (5), or s (b) Par	X	
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ed "No" OR	2 3 (5), or s (b) Par 1 2a 2b 2c	X	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	ed "No" OR	2 3 (5), or s (b) Par 1 2a 2b 2c	X	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole 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 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year?	ed "No" OR	2 3 (5), or s (b) Par 1 2a 2b 2c 3	X	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year?	ed "No" OR	2 3 (5), or s (b) Par 1 2a 2b 2c 3	X	ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Int IV Supplemental Information	ed "No" OR	2 3 (5), or s (b) Par 1 2a 2b 2c 3	ection t III-A, lin	ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) 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 amounts of pole expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  mplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5	ed "No" OR	2 3 (5), or s (b) Par 1 2a 2b 2c 3	ection t III-A, lin	ne 3,
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### 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB\_No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	DOUGLAS COUNTY FARM BUREAU	47-0406434
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fur	nds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
•	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	=
	impermissible private benefit?	Yes No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•	Preservation of land for public use (e.g., recreation or education)  Preservation of an historical	lly important land area
	Protection of natural habitat  Protection of natural habitat	• •
	Preservation of open space	istorio structuro
2	, ,	procesuation approment on the last
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a contribution of the Assurance	onservation easement on the last
	day of the tax year	Hold at the Ford of the Tou Vone
_	Total acceptance of common at an acceptance	Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
_	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	nization during the tax
	year >	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	Yes No
	violations, and enforcement of the conservation easements it holds?	•• • •
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	<del>-</del> :
7 8	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
0	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(E	Yes No
_	and section 170(h)(4)(B)(ii)?	
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense state	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization of the footnote to the organization of the footnote organization of the footnote to the organization of the footnote organization organization organization organization of the footnote organization organiza	ganization's accounting for
Pai	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assats
T a	<del></del>	Sillilai Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	
та	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and between the statement and bestitute and between the statement and between the statement and b	
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	rvice, provide the following amounts
	relating to these items.	<b>.</b> .
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ ▶ \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain,	provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
	Revenues included in Form 990, Part VIII, line 1	▶ \$ ▶ \$
ь	Assets included in Form 990, Part X	<b>&gt;</b> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

		COUNTY FA							4 Page 2
Pa	rt III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Oth	er Similar A	ssets (con	tınued)
3	Using the organization's acquisition, access	on, and other record	ls, chec	k any of the	following that	at are a	significant use o	f its collection	n items
	(check all that apply)								
а	Public exhibition	d		Loan or exc	hange progr	ams			
b	Scholarly research	е		Other					
С	Preservation for future generations			·					
4	Provide a description of the organization's c	ollections and explai	ກ how tl	hey further t	he organizat	ion's exe	empt purpose in	Part XIV.	
5	During the year, did the organization solicit								
	to be sold to raise funds rather than to be m							Yes	☐ No
Pa	rt IV Escrow and Custodial Arran					"Yes" to	Form 990, Part	IV, line 9, oi	r
	reported an amount on Form 990, Pa			ŭ					
1a	Is the organization an agent, trustee, custod	an or other intermed	lary for	contribution	ns or other as	sets no	t included		
	on Form 990, Part X?		,					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ilowina	table			•		
-		and complete the le		(QDIO				Amour	nt
С	Beginning balance						1c	7 11.100.	<del></del>
	A 1.45						1d		
đ	Distributions during the year	•					1e		
e f	Ending balance						1f		
	•	erm 000 Dort V line	212				L.UL	Yes	□ No
	Did the organization include an amount on F		217					res	NO
	rt V Endowment Funds. Complete			"Voo" to Co	rm 000 Part	IV line	10	<del></del>	
I a	Littowinent i unas. Complete	<del></del>			T			only (-) Four	s usara bask
	Dames of analysis	(a) Current year	(b) ⊢	Prior year	(c) Two yea	rs back	(d) Three years b	ack (e) rou	r years back
1a									
b	Contributions	<del></del>						<del>-   </del>	
C	Net investment earnings, gains, and losses	-				_			
d									
е								ŀ	
	and programs								
f	Administrative expenses						<del></del> .		<del> </del>
g	End of year balance .				l				
2	Provide the estimated percentage of the curi	rent year end balanc	e (line 1	g, column (a	a)) held as.				
а	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
C	Temporarily restricted endowment	%							
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%							
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	at are held a	nd administe	ered for	the organization		<del></del>
	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	n Sched	dule R?	•			3b	L_L_
4	Describe in Part XIV the intended uses of the								
Par	rt VI Land, Buildings, and Equipm	ent. See Form 990	, Part X	, line 10.					
	Description of property	(a) Cost or of		(b) Cost			ccumulated	(d) Boo	k value
		basis (investr		basis	(other)	de	preciation		
1a	Land	65,000							000.00
b	Buildings	285,44	6.82			2	<u>5,365.75</u>	260,	<u>081.07</u>
С	Leasehold improvements .								
d	Equipment	16,31	5.44			1	<b>2,896.88</b>	3,	<u>418.56</u>
е_	Other								
lotal	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. colun	nn (B). line 1	O(c) )			328.	499.63

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011 DOUGLAS CO	<u>UNTY FARM BU</u>	JREAU	47	-0406434	Page 3
Part VII Investments - Other Securities.	See Form 990, Part X, IIr	ne 12.		· · · · ·	
(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valua st or end-of-year mar		
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other	<del> </del> -				
(A)	ļ. <u> </u>				
(B)					
(C)	<u> </u>				
(D)				<del></del>	
(E)					
<u>(F)</u>					
(G)					
(H)					
(0					
Total (Col (b) must equal Form 990, Part X, col (B) line 12.)					
Part VIII investments - Program Related.	See Form 990, Part X, II	ne 13.			
(a) Description of investment type	(b) Book value	Cos	(c) Method of valua st or end-of-year mar		
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					_
(7)					
(8)					
(9)					
(10)					
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)	<u> </u>			<u>.</u>	
Part IX Other Assets. See Form 990, Part X, lin					
(a	a) Description			(b) Book va	lue
(1)					
(2)				==-	
(3)					
(4)					
(5)					
(6)		·-····			
(7)					
(8)	<del></del>				
(9)	. <u> </u>	<u></u>			
(10)				·- ··	
Total. (Column (b) must equal Form 990, Part X, col (B) lir	ne 15.)		<u> </u>		
Part X Other Liabilities. See Form 990, Part X	(, line 25	•			
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2) PAYROLL TAX LIABILITIES		535.95			
(3) SECURITY DEPOSITS		1,414.30			
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					

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 132053
01-23-12

Schedule D (Form 9

Sche	dule D (Form 990) 2011 DOUGLAS COUNTY FARM BUREAU				06434 Page	<u>, 4</u>
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audite	d Financial St	atements	<del> </del>	
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		10	- Dotum		
	t XII Reconciliation of Revenue per Audited Financial Stateme	ints wit	n Revenue per			
1	Total revenue, gains, and other support per audited financial statements			1-1-		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 _ 1				
а	Net unrealized gains on investments	2a		_		
b	Donated services and use of facilities	2b	<del></del>			
С	Recoveries of prior year grants	2c	<del></del>			
d	Other (Describe in Part XIV)	2d	·· <del></del>			
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3	<del></del>	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	F 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_		
b	Other (Describe in Part XIV.)	4b				
С	Add lines 4a and 4b			4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		Ala Farancia a	5		
Par	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents Wi	tn Expenses p	er Return	<del></del>	—
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:	1 1				
э	Donated services and use of facilities	_2a		<b>⊣</b>		
b	Prior year adjustments	2b		_		
С	Other losses .	2c		_		
d	Other (Describe in Part XIV.)	_2d	· · · · · · · · · · · · · · · · · · ·	<b>⊣</b> 1		
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3	<del></del>	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
þ	Other (Describe in Part XIV)	_4b				
	Add lines 4a and 4b			4c		
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	<del> </del>	_
	t XIV Supplemental Information					_
	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III					
X, line	2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp	lete this p	part to provide any	additional info	ormation.	
					<del></del>	
						_
			<del></del>			
					<del></del>	_
						_
						_

### **SCHEDULE O**

(Fcrm 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.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number 47-0406434

DOUGLAS COUNTY FARM BUREAU 47-0406434
FORM 990, PART VI, SECTION A, LINE 2: OF THE 11 VOTING OFFICERS AND BOARD
MEMBERS 4 ARE HUSBANDS AND WIVES
FORM 990, PART VI, SECTION A, LINE 6: ACTIVE MEMBERS AND ASSOCIATE
MEMBERS. ASSOCIATE MEMBERS ARE NOT ENTITLED TO VOTE OR HOLD ELECTIVE
OFFICE.
FORM 990, PART VI, SECTION A, LINE 7A: NOMINATING COMMITTEE MAKES NO LESS
THAN 2 NOMINATIONS FOR OFFICE. ELECTED AT ANNUAL MEETING BY MEMBERSHIP.
FORM 990, PART VI, SECTION B, LINE 11: THE PRÉSIDENT IS RESPONSIBLE FOR
REVIEWING THE FORM 990 BEFORE SIGNING
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, FINANCIAL
STATEMENTS AND FORM 990 ARE AVAILABLE TO PUBLIC UPON INQUIRY