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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)

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

Open to Public Inspection

	A F	<u>or"th</u>	2011 calendar year, or tax year beginning NOV 1, 2011 and	ending C	CT 31, 20	12			
	B c	heck if	C Name of organization		D Employer ide	ntification r	number		
		Addre	Arkansas County Farm Bureau						
		Name			71	-02309	87		
]Initial return	Number and street (or P 0 box if mail is not delivered to street address)	Room/suite	E Telephone nui				
	<u>_</u>	Termi	1.0. DIGWEL 232	<u> </u>	87	<u>0-946-</u>			
	<u> </u>	Ameni return Applic	City or town, state or country, and ZIP + 4		G Gross receipts \$		256,525.		
		Ition pendi	DEWICC, AR 72042-0252		H(a) Is this a grou	_			
			F Name and address of principal officer: Steve Orlicek same as C above		for affiliates	_	Yes X No		
	. T				H(b) Are all affiliate				
			empt status: $501(c)(3)$ $X 501(c)(5)$ (insert no) 4947(a)(1) e: \blacktriangleright www.arfb.com/arkansas	or 527	-1		e instructions)		
			organization X Corporation Trust Association Other ►	I Voor	of formation 195				
		rt I	Summary	L Teal	or iornation 199	O IN STATE O	r legal duffiche zaix		
			Briefly describe the organization's mission or most significant activities: Agri	cultur	al Promot	i on			
	ဦ	•	briony describe the organization's mission of most significant activities.		EIVED	1			
	E	2	Check this box If the organization discontinued its operations or dispo			et assets			
	Activities & Governance	_	· · · · · · · · · · · · · · · · · · ·		\ <u>\(\(\) \</u>	3	42		
	ğ	4	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)	ši MAR	1 5 2013	54	42		
	8		Total number of individuals employed in calendar year 2011 (Part V, line 2a)			=5	5		
	itie		Total number of volunteers (estimate if necessary)	റ്റ്വ	DEN, UT	6	50		
	į (Total unrelated business revenue from Part VIII, column (C), line 12		JE143 0 1	7a	189,100.		
	4		Net unrelated business taxable income from Form 990-T, line 34			7b	16,866.		
					Prior Year	С	urrent Year		
	a	8	Contributions and grants (Part VIII, line 1h)			0.	0.		
	Š		Program service revenue (Part VIII, line 2g)		46,63	5.	45,262.		
	Revenue		investment income (Part VIII, column (A), lines 3, 4, and 7d)		13,14	6.	11,643.		
	-		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		184,85	1.	199,620.		
		12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		244,63	2.	256,525.		
		13	Grants and similar amounts paid (Part IX, column (A), lines 1·3)			0.	0.		
]	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.		
	S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	ļ	139,68	138,239.			
	Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	_	0.				
	Š		Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>		_ 	00 000		
	۳		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		81,50		80,800.		
	l		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	221,19		219,039.		
	اي	19	Revenue less expenses. Subtract line 18 from line 12		23,44	- 1	37,486.		
ia.	ts or		T. 1 (2) (2) (3)	Be	ginning of Current Y		nd of Year		
3	Balan		Total assets (Part X, line 16)	<u> </u>	950,34 23,54		987,141.		
j			Total liabilities (Part X, line 26)		926,80		22,850. 964,291.		
•	Da		Net assets or fund balances. Subtract line 21 from line 20 Signature Block		920,00	J •1	304,231.		
•			ities of perjury, I declare that I have examined this return, including accompanying schedule	ee and statem	ents and to the hest	of my knowle	dne and helief it is		
•			t, and com <u>ple</u> te. Declaration of <u>pr</u> eparer (other than officer) is based on all information of w			or my knowie	age and belief, it is		
	1146,	COITEC	The Same Complete Geolaration of preparer (other than officer) is based on an information of w	mich proparet	nas any knowledge				
}	Sign	1	Stgnature of officer		Date				
	Here		Hogth Long Pros.		2.	27-13			
		•	Type or print name and title			K!	 		
			Print/Type preparer's name Preparer's signature/		Date / Chec	, P	PTIN		
	Paid		Maria K. Bean Main K bean	CPA	2/14/13 If self-e	mployed P0	0941762		
	Prep		Furm's name Thomas & Thomas LLP		Firm's EIN		0271741		
	Use (Firm's address 201 E. Markham, Suite 500						
		•	Little Rock, AR 72201		Phone no	(501)	375- <u>2</u> 025		
	Mav	the if	S discuss this return with the preparer shown above? (see instructions)		1	X			

LHA For Paperwork Reduction Act Notice, see the separate instructions.

	rt III Statement of Program Service Accomplishments
ra	
_	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: Agricultural Promotion
	ingrioured in the second secon
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
4a	
	(Code) (Expenses \$) (Revenue \$) County Farm Bureau work is general in nature, helping farm families
	achieve educational improvements, economic opportunity, and social
	advancement.
4b	(Code) (Expenses \$
4c	(Code) (Expenses \$
	Other reserve and Provide a Cole Add O
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$
<u>+e_</u> _	Total program service expenses

Page 3

Form 990 (2011) Arkansas County Farm Bureau
Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2		_X_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3	_	<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	ا ا		
	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	_	Х	
	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			х
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	- 		
8		8		Х
0	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			
9	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	X	
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
С	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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d_		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			J.
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	100		x
	Schedule D, Parts XI, XII, and XIII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
_	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1.0		
•	Investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		İ	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,,
	1c and 8a? If "Yes," complete Schedule G, Part II	18	-	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19	+	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b	<u> </u>	<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		agn	(2011)

Form 990 (2011) Arkansas County Fa.

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		<u>X</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			Х
	Schedule K. If "No", go to line 25	24a		
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
	any tax-exempt bonds?	24c		
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	258		
ь	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	25b		
26	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200		
26	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
21	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		Х
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		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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_		X
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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		
	Schedule N, Part II	32	ļ	X
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		X
34	Was the organization related to any tax-exempt or taxable entity?			v
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	256		х
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36	[
0.7	If "Yes," complete Schedule R, Part V, line 2	30	 	-
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37	1	X
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	"	 	
50	Note. All Form 990 filers are required to complete Schedule O	38	x	
	130 COLOTA DE TIMO DE MOTO DE TOPO DE COMPOSTO O COMPOS			2011)

Page 5

	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 1			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
_	(gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	<u>X</u>	<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3ь	X	
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		X
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 A	Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
	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	ne organization solicit			١,,
	any contributions that were not tax deductible?		6a	<u> </u>	X
þ	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		6b		
	Organizations that may receive deductible contributions under section 170(c).		 		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	7c		
	to file Form 8282?	7d	76		
	If "Yes," indicate the number of Forms 8282 filed during the year	· · · · · · · · · · · · · · · · · · ·	7e		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution.		7f		
f	If the organization received a contribution of qualified intellectual property, did the organization file Fig.		7g	 	
9	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D				
Ŭ	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		8_		
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9Ь		
10	Section 501(c)(7) organizations. Enter:	1 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
11	Section 501(c)(12) organizations. Enter:	1 1			
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1		
	amounts due or received from them.)	11b	l		1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		ļ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		120	+	
а	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.				
þ	Enter the amount of reserves the organization is required to maintain by the states in which the	136			
	organization is licensed to issue qualified health plans	13c	1		
	Enter the amount of reserves on hand		14a	1	X
148	Did the organization receive any payments for indoor tanning services during the tax year? If "You " hour tiled a Form 720 to report these payments? If "No " provide an explanation in Schedu	le O	14b	1	1

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

	Check if Schedule O contains a response to any question in this Part VI						X			
<u>Sec</u>	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	1a		42						
	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	1	ľ							
þ	Enter the number of voting members included in line 1a, above, who are independent	1b		42	- [
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other							
	officer, director, trustee, or key employee?			Ĺ	2	X				
3	Did the organization delegate control over management duties customarily performed by or under ti	he dire	ct supervision		1					
	of officers, directors, or trustees, or key employees to a management company or other person?			L	3		_X			
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	as filed?	Ĺ	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?			5		X			
6	Did the organization have members or stockholders?				6	X_				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or							
more members of the governing body?										
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or							
	persons other than the governing body?				7b	X				
8	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following									
a The governing body?										
b Each committee with authority to act on behalf of the governing body?										
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O									
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal l	Reve <u>nu</u>	e Code.)							
				_		Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			L	10a		<u>X</u>			
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapter	s, affiliates,			1				
	and branches to ensure their operations are consistent with the organization's exempt purposes?									
11a	11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
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			Ŀ	12a	X				
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	flicts?	Ŀ	12b		X			
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," d	escnbe	İ						
	in Schedule O how this was done			Ŀ	12c	_X_				
13	Did the organization have a written whistleblower policy?			<u> </u>	13		X			
14	Did the organization have a written document retention and destruction policy?				14	X				
15	Did the process for determining compensation of the following persons include a review and approve	val by II	ndependent	1						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?								
а	The organization's CEO, Executive Director, or top management official			Ļ	15a		<u>X</u>			
b	Other officers or key employees of the organization			-	15b	***********	X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	vith a		1					
	taxable entity during the year?			ļ.	16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the control of	anizatıc	n's	1	1					
	exempt status with respect to such arrangements?				16b					
	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed None	-	504(.)(0)							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	·I (Sec	ion 501(c)(3)s o	niy) av	allabi	е				
	for public inspection. Indicate how you made these available. Check all that apply.									
40	Own website Another's website X Upon request		-66-m16		G					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	onflict	or interest policy	, and	rınan	cial				
••	statements available to the public during the tax year.		da # 40.							
20	State the name, physical address, and telephone number of the person who possesses the books and organization = 870-946-3501	and rec	oras of the orga	unizatio	on: P					
	The Organization - 870-946-3501 P.O. Drawer 232, Dewitt, AR 72042-0232									
	F.O. DIGWEL 232, DEWILL, AR /2042-0232									

Form 990 (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.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if neither the organization r	or any related	orga	anıza	tion	cor	npe	ns <u>a</u>	ted any current officer, o	director, or trustee.	
(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average	(40	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an officer and a director/trustee)		1	compensation	amount of other			
	week	<u> </u>			from	from related				
	(describe hours for	trustee or director		ľ		-		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	5 8	聲			TS2		(W-2/1099-MISC)	(11 2 1000 111100)	organization
	organizations	ESE.	a fa		B	aduo		(,		and related
	ın Schedule	Individual	Institutional trustee	英	Кеу етріоусе	Highest compensated employee	喜			organizations
	O)	1	1 ₹	Officer	<u>ş</u>	문등	퉏			
(1) Steve Orlicek									•	•
President	0.50	X	_	X			_	0.	0.	0.
(2) Heath Long						ł				
Vice President	0.50	X		X		-		0.	0.	0.
(3) Trent Dabbs	0.50	١								•
Secretary	0.50	X	_	Х		<u> </u>	_	0.	0.	0.
(4) Ronny Allen	0.50		İ						•	•
Member	0.50	X	-	_		_	_	0.	0.	0.
(5) Ronald Bauman	0.50								•	•
Member	0.50	X	 		_	├	-	0.	0.	0.
(6) Derek Bohanan	0.50								•	0
Member	0.50	X	<u> </u>	_	<u> </u>	├	-	0.	0.	0.
(7) Monty Bohanan	0.50	v	l					0.	0.	0.
Member	0.50	X	 —	-	├	├—	-	<u> </u>	<u>0.</u>	<u></u>
(8) Hank Bueker	0.50	X						0.	0.	0.
Member	0.30	^	 	-	\vdash	├─	-	- 0.		
(9) Jerry Burkett Member	0.50	X			İ		ĺ	0.	0.	0.
(10) Vogene Connor	0.50	Α.	 	_	-	├				
Member	0.50	X						0.	0.	0.
(11) Floyd Dabbs	 	-	\vdash		\vdash	┢		 		
Member	0.50	Х			ļ			0.	0.	0.
(12) Terry Dabbs		1				\vdash				
Member	0.50	Х						0.	0.	0.
(13) Trey Daniel			†							
Member	0.50	X	l	1		l		0.	0.	0.
(14) Tony Davis										
Member	0.50	X				l		0.	_ 0.	0.
(15) Tom Dierks										
Member	0.50	X				L		0.	0.	0.
(16) Mike Dodson		Γ								
Member	0.50	X						0.	0.	0.
(17) Harold Goetz										
Member	0.50	X	<u> </u>	<u> </u>		<u> </u>	L	0.	0.	0.

Part VII Section A. Officers, Directors, Tru	stees, Key E	mplo	oyee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)		· · · · ·	ugo o
· (A)	(B)	Γ			C)			(D)	(E)	1	(F)	
Name and title	Average				ition			Reportable	Reportable		Estimate	ed
•	hours per	box	not c	ss pe	erson	is bot	h an	compensation	compensation		amount	of
	week	⊢-	cer an	dad	lirecto	or/trus	tee)	from	from related	İ	other	
	(describe hours for	Eg						the	organizations	C	ompensa	
	related	9	露			rsatec		organization (W-2/1099-MISC)	(W-2/1099-MISC)	1.	from th organizat	
	organizations	tage	al trustee	1	8	ja ja		(** 2 1033 111100)			and relat	
	ın Schedule	individual trustae or director	Institutional	5	кеу етрюуее	Highest compensated employee	_				organizati	
	0)	힐	돧) High	ş	雪島	Former			<u> </u>		
(18) Danny Hearn				ļ								
Member	0.50	X		<u> </u>	_	<u> </u>		0.	0.	·		0.
(19) David Hillman		ł	1		ļ	l	Ì	1		1		_
Member	0.50	X			ļ			0.	0.	•		<u>0.</u>
(20) Jonathan Hillman		l							•			•
Member	0.50	X	_	<u> </u>	_	L_	<u> </u>	0.	0.	4_		0.
(21) Ryan Hillman									•			•
Member	0.50	X		ļ	ļ	<u> </u>		0.	0.	<u>.</u>		0.
(22) Walter Hillman	0.50								•			^
Member	0.50	X			_	-		0.	0.	:├─		0.
(23) Webster Hillman	0.50	,		}		İ	ļ		0			^
Member	0.50	X		-	-	├-	_	0.	0.	+-		0.
(24) Jody Holzhauer	0.50	v						0.	0.			Λ
Member	0.50	X			-	<u> </u>	_			+		0.
(25) David Jessup	0.50	X						0.	0.			0.
Member (26) Title Tallan	0.30	₽	_	_		├-	\vdash			_		-••
(26) Rirk Reller	0.50	X		ĺ	(ĺ	0.	0.			0.
Member 15 Cub Adda	0.50	<u> </u>	1	<u> </u>	l			0.		+		" 0:
1b Sub-total c Total from continuation sheets to Part VI	I Castian A							0.	0.	+		0.
d Total (add lines 1b and 1c)	i, Section A							0.	0.			0.
2 Total number of individuals (including but n	ot limited to th		lieta	nd al	hove		30.5			ـــــــــــــــــــــــــــــــــــ		
compensation from the organization		1030	Hote	, u		-, ···			logo di lobolitadio			0
Somponedion from the organization v								 			Yes	No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y er	mplo	yee	, or	highest compensated ei	mployee on			
line 1a? If "Yes," complete Schedule J for s	uch individual										3	X
4 For any individual listed on line 1a, is the su	ım of reportab	le co	omp	ensa	ation	and	d otl	her compensation from t	the organization	"		
and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual		14	1	X
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	rom	any	unr	elat	ed organization or indivi	dual for services			
rendered to the organization? If "Yes," com	plete Schedul	e J 1	or su	uch	pers	<u>son</u>	_			<u></u>	5	<u> </u>
Section B. Independent Contractors		_										
1 Complete this table for your five highest co	•	-								satio	on from	
the organization. Report compensation for	the calendar y	ear	end <u>ı</u>	ng v	vith	or w	<u>ithir</u>		/ear.			
(A) Name and business	addraga	37/	~ ****	-			ĺ	(B) Description of s	00/1000	^~m	(C) pensatio	· n
Ivalle allo ousiless	addiess	INC	INC	<u>. </u>			\dashv	Description of s	ervices	0011		''
							-					
						_						
			-				- †					
							\dashv					
									Ì			
		-			-	_						
							j					
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se li	sted	d above) who received m	ore than			
\$100,000 of compensation from the organi)						

Form 990 (2011) Arkansas								 	/1-023	0987	
Part VII Section A. Officers, Directors, Tr		mplo	yee			ligh	est	Compensated Employ			
Name and title	(B) Average hours	(cl		Posi all t	ition		oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Individual trustee or director Institutional trustee		Кеу етріоуее	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(27) Billy Long	0.50	l							•		
Member	0.50	X		\sqcup		<u> </u>	├	0.	0.	0 .	
(28) Wes Long Member	0.50	x					L	0.	0.	0	
(29) Kirk Meins								_	_	_	
Member	0.50	X					Ļ.,	0.	0.	0	
(30) Thayn Morton							}			_	
Member	0.50	X_					\vdash	0.	0.	0	
(31) Brad Koen	0.50							0.	0.	0	
Member	0.50	X				_	 -	0.	0.	0	
(32) Brandon Rodgers	0.50	X					İ	0.	0.	0	
Member (33) Jerry Rodgers	0.30	^	-			_	├				
Member	0.50	X						0.	0.	0	
(34) Shan Rodgers	1 0.30	1					 				
Member	0.50	X					1	0.	0.	0	
(35) Jason Smith			<u> </u>								
Member	0.50	X					ļ	0.	0.	0	
(36) Gary Prislovsky											
Member	0.50	X	L					0.	0.	0	
(37) Daniel Smith Member	0.50	X						0.	0.	0	
(38) Donnie Stroh											
Member	0.50	X						0.	0.	0	
(39) John Tarkington											
Member	0.50	X	L			<u> </u>	L	0.	0.	0	
(40) Kevin Wingfield						ļ					
Member	0.50	X	ļ_			_	┞-	0.	0.	0	
(41) Stephen Hoskyn	0.50		}					0.	0.	0	
Member	0.50	^	<u> </u>				┢	- 0.	0.		
(42) Clint Roth Member	0.50	x						0.	0.	0	
Member (43) Sam Tarkington	1 0.50	1	\vdash		-	-	\vdash	 		_	
Member	0.50	X	1					0.	0.	0	
					i						
Total to Part VII, Section A, line 1c					<u> </u>						

Part VIII Statement of Revenue (D) Revenue (B) (C) (A) Unrelated Related or Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue 1a 1 a Federated campaigns 1b **b** Membership dues c Fundraising events 1c 1d d Related organizations 1e e Government grants (contributions) f All other contributions, gifts, grants, and 1f similar amounts not included above Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f **Business** Code 45,262. 110000 45,262. 2 a Membership Dues Program Service Revenue f All other program service revenue 45,262. g Total. Add lines 2a-2f Investment income (including dividends, interest, and <u>11,6</u>43. 11,643. other similar amounts) Income from investment of tax-exempt bond proceeds 1,308. 1,308. Þ Royalties (i) Real (II) Personal 5,600. 6 a Gross rents 0. **b** Less: rental expenses 5,600. c Rental income or (loss) 5,600. 5,600. ▶ d Net rental income or (loss) (ii) Other (i) Securities 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV. line 19 b Less direct expenses c Net income or (loss) from gaming activities ▶ 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 189,100. 189,100. 524298 11 a Insurance Service Fees 3,612. 3,612. b Miscellaneous Income 900099 d All other revenue 192,712. Total. Add lines 11a-11d 45,262. 189,100. 22,163. 256,525. Total revenue. See instructions Form 990 (2011) Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respon	se to any question in this	s 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	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				'A
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				<u>' </u>
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees .				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	114 500			
7	Other salaries and wages	114,522.			
8	Pension plan accruals and contributions (include	2 544			
	section 401(k) and section 403(b) employer contributions)	2,544. 11,117.			
9	Other employee benefits	10,056.			
10	Payroll taxes	10,036.			
11	Fees for services (non-employees):			1	
_	Management				
b	Legal	600.			
C	Accounting	000.			
d	Lobbying		······································		
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees		 		
9 12	Other Advertising and promotion	1,250,		· · · ·	
13	Office expenses	1,250. 14,352.	_ 		
14	Information technology				
15	Royalties				
16	Occupancy	19,839.			
17	Travel	183.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,661.			
20	Interest				ļ <u></u>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	13,818.	<u> </u>		
23	Insurance	1,303.			
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	Youth and Safety	10,213.	<u></u>		
ь	Taxes and Licenses	2,717.			
c	Equipment Rental and Ma	1,627.			
d	Miscellaneous	1,237.			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	219,039.			
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)		<u> </u>		

Bowt V | Polone

Pa	rt X	Balance Sheet				
		•		(A) Beginning of year		(B) End of year
_	'1	Cash - non-interest-bearing		23,383.	1	40,589.
	2	Savings and temporary cash investments		706,181.	2	728,710.
	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			5	
	6	Receivables from other disqualified persons (as				
	}	4958(f)(1)), persons described in section 4958(c				
	1	employers and sponsoring organizations of sect				
		employees' beneficiary organizations (see instru		6		
Assets	7	Notes and loans receivable, net			7	
Ass.	8	Inventories for sale or use			8	
•	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or other				
	•	basis. Complete Part VI of Schedule D	10a 464,843. 10b 247,001.			
	ь	Less: accumulated depreciation	10b 247,001.	220,781.	10c	217,842.
	11	Investments - publicly traded securities		11		
	12	Investments · other securities. See Part IV, line		12		
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	950,345.	16	987,141. 2,949.
	17	Accounts payable and accrued expenses	2,342.	17	2,949.	
	18	Grants payable		18		
	19	Deferred revenue	21,198.	19	19,901.	
	20	Tax-exempt bond liabilities	į		20	
Š	21	Escrow or custodial account liability. Complete	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, director	rs, trustees, key employees,			
abi		highest compensated employees, and disqualif	ed persons. Complete Part II			
=		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities (including federal income tax, pa	yables to related third			
		parties, and other liabilities not included on lines	s 17-24). Complete Part X of			
		Schedule D			25	
	26_	Total liabilities. Add lines 17 through 25		23,540.	26	22,850.
		Organizations that follow SFAS 117, check h	ere 🕨 🔙 and complete			
S		lines 27 through 29, and lines 33 and 34.				
Š	27	Unrestricted net assets			27	
3ala	28	Temporarily restricted net assets			28	
Ā	29	Permanently restricted net assets			29	
Ē		Organizations that do not follow SFAS 117, c	heck here 🕨 🗓 and			
٥		complete lines 30 through 34.				-
ets	30	Capital stock or trust principal, or current funds	0.		0.	
ISS	31	Paid-in or capital surplus, or land, building, or ed	quipment fund	0.		0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	ncome, or other funds	926,805.		964,291.
Ž	33	Total net assets or fund balances		926,805.		964,291.
	34_	Total liabilities and net assets/fund balances		950,345.	34	987,141.

orm	1990 (2011) Arkansas County Farm Bureau	71-023	30987	Pag	e 12		
Pai	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,52			
2	Total expenses (must equal Part IX, column (A), line 25)	2	219,039.				
3	Revenue less expenses. Subtract line 2 from line 1	3	37,486.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	926,805.				
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.				
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	964	1,29	91.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				<u></u>		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>		
b	Were the organization's financial statements audited by an independent accountant?		2b		X		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis			1			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit	}				
	Act and OMB Circular A-133?		За		<u>X</u>		
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit		ļ			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3ь				

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

► See separate instructions.

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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	tions: Complete Part III.			
Nam	ne of organization			Emplo	oyer identification number
	Arkansa	s County Farm Bu	ıreau		71-0230987
Pa	rt I-A Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527 or	rganization.
3	Provide a description of the organize Political expenditures Volunteer hours	zation's direct and indirect politi	cal campaign activities	ın Part IV. ▶\$	
Pa	rt I-B Complete if the org	ganization is exempt un	der section 501(c)		
1	Enter the amount of any excise tax	incurred by the organization un	ider section 4955	> \$	
	Enter the amount of any excise tax			5 ▶\$	
	If the organization incurred a section	on 4955 tax, did it file Form 4720	o for this year?		Yes No
	Was a correction made?				Yes No
	if "Yes," describe in Part IV.	ganization is exempt un	dor coction 501/c)	except section 501/	0)/3)
					<u></u>
	Enter the amount directly expended			•	
2	Enter the amount of the filing organ exempt function activities	nization's lunds contributed to C	other organizations for s	► \$	
3	Total exempt function expenditures	Add lines 1 and 2 Enter here	and on Form 1120-POL	·	
Ŭ	line 17b	3. Add lines Taile 2. Lines Here	414 017 1 01111 1 1 20 1 00	-, ▶\$	
4	Did the filing organization file Form	1120-POL for this year?		• •	Yes No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a					e amount of political
	political action committee (PAC). If	T			
	(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

Schedule C (Form 990 or 990-EZ) 2011 Arkan				71-	0230987 Page 2
Part II-A Complete if the organization		mpt under sectio	n 501(c)(3) and fil	ed Form 5768	
(election under section 501	(h)).			· <u> </u>	
A Check ► ☐ If the filing organization belon	gs to an aff	iliated group (and list ii	n Part IV each affiliated	group member's nar	me, address, EIN,
expenses, and share of excess	ss lobbying	expenditures).			
B Check Lifthe filing organization check	ed box A a	nd "limited control" pro	ovisions apply.		
Limits on Lob (The term "expenditures" m)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence pub	dic opinion ((grass roots lobbying)			
b Total lobbying expenditures to influence a lea					
c Total lobbying expenditures (add lines 1a an	-	o, (eee, (eee),g,		·-··	
d Other exempt purpose expenditures	J . J,				
e Total exempt purpose expenditures (add line	s 1c and 1d	4)	·		
f Lobbying nontaxable amount. Enter the amo		•	th columns		
If the amount on line 1e, column (a) or (b) is:		bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500,000		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000,000					
Over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000. \$1,000,000.				
Grei #17,500,000	Ψ1,000,	000			
g Grassroots nontaxable amount (enter 25% o	f line 1f)				
h Subtract line 1g from line 1a. If zero or less, e	•				†
i Subtract line 1f from line 1c. If zero or less, e					
j If there is an amount other than zero on either		line 11 did the organiz	ation file Form 4720		<u> </u>
reporting section 4911 tax for this year?		ine ii, did trie organiz	ation no ronn 4720		Yes No
	4-Year Av	eraging Period Under	Section 501(h)		
(Some organizations the	st made a s	ection 501(h) election			
Lobi	ying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	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 (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	Arkansas	County	Farm	Bureau
	TIL MAIIDAD	Country	I GIII	Durcuu

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)).

For e	th "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description		a)	(b)		
of the lobbying activity.		Yes	Yes No		Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or			,	***************************************	
	local legislation, including any attempt to influence public opinion on a legislative matter					
	or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
¢	Media advertisements?	L				
þ	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
9	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	till-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)	(5), or se	ction		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X	
1	answered "Yes." Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	tical				
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2ь			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	xcess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	l political				
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5	<u> </u>		
Pa	t IV Supplemental Information					
Com	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; I	Part II-A; and	Part II-B, li	ne 1. Also, d	complete	
this	part for any additional information.					
						

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ 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.

2011
Open to Public Inspection

Name of the organization

Arkansas County Farm Bureau

Employer identification number 71-0230987

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the			
	organization answered "Yes" to Form 990, Part IV, line	e 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 advi	sed funds			
	are the organization's property, subject to the organization's		Yes No			
6	Did the organization inform all grantees, donors, and donor a		e used only			
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring					
	Impermissible private benefit?		Yes No			
Par		ganization answered "Yes" to Form 990,	Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).				
	Preservation of land for public use (e.g., recreation or e		storically important land area			
	Protection of natural habitat		rtified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last			
	day of the tax year.					
	•		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c			
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	ture			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax			
	year▶					
4	Number of states where property subject to conservation ea	sement is located >				
5	Does the organization have a written policy regarding the pe					
	violations, and enforcement of the conservation easements		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year ►			
7	Amount of expenses incurred in monitoring, inspecting, and					
8	Does each conservation easement reported on line 2(d) about					
	and section 170(h)(4)(B)(ii)?		Yes No			
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	se statement, and balance sheet, and			
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's accounting for			
	conservation easements.					
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or (Other Similar Assets.			
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.				
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ement and balance sheet works of art,			
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIV,			
	the text of the footnote to its financial statements that descri					
b	If the organization elected, as permitted under SFAS 116 (AS					
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic service, provide the following amounts			
	relating to these items:					
	(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 tre		ıal gaın, provide			
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:				
а	Revenues included in Form 990, Part VIII, line 1		> \$			
b	Assets included in Form 990, Part X		> \$			

Sche	dule D (Form 990) 2011 Arkansas								<u> 30987</u>	
Par	t III Organizations Maintaining Col	lections of A	Art, His	torical Tr	easures, o	r Other	<u>Similaı</u>	r Asset	ts (contini	Jed)
3	Using the organization's acquisition, accession,	and other recor	ds, ched	k any of the	following that	are a sign	ificant us	se of its o	collection i	tems
	(check all that apply):									
а	Public exhibition		d 🗀	Loan or exc	hange progra	ms				
b	Scholarly research		е 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's colle	ctions and expla	ain how t	hey further t	he organizatio	n's exemp	t purpos	e in Part	XIV.	
5	During the year, did the organization solicit or re	eceive donations	of art, h	nstorical trea	sures, or othe	r sımılar as	ssets		_	
	to be sold to raise funds rather than to be main	tained as part of	the orga	anization's co	ollection?				Yes	No_
Par	Escrow and Custodial Arrange reported an amount on Form 990, Part X		olete if th	e organizatio	on answered "	Yes" to Fo	rm 990,	Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custodian	or other interme	ediary for	r contribution	s or other ass	sets not inc	cluded			_
	on Form 990, Part X?								Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV an	d complete the t	following	table:						
		•							Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						11			
2a	Did the organization include an amount on Form	n 990, Part X, lin	e 21?						Yes	☐ No
	If "Yes," explain the arrangement in Part XIV.									
Par	t V Endowment Funds. Complete if the	ne organization a	answered	d "Yes" to Fo	rm 990, Part I	V, line 10.				
		a) Current year	(b)	Prior year	(c) Two years	s back (d)	Three ye	ars back	(e) Four y	ears back
1a	Beginning of year balance								*****	····
ь	Contributions									
c	Net investment earnings, gains, and losses				<u> </u>					
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance				<u> </u>					
2	Provide the estimated percentage of the current	nt year end balar	nce (line	1g, 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 should	equal 100%.								
За	Are there endowment funds not in the possess	ion of the organ	ızatıon th	nat are held a	and administer	red for the	organiza	ition	_	
	by:									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations li								3ь	
4	Describe in Part XIV the intended uses of the o									
Par	Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.									
	Description of property	(a) Cost or			t or other		umulated	,	(d) Book	value
		basis (inves	tment)		(other)	aepre	eciation		22	167
1a	Land				32,467.		A 00			,467.
	Buildings			32	29,051.	16	54,86	3.	104	,188.
	Leasehold improvements				205		70 67	2	1 2	622
	Equipment				2,295.	-	78,67 3,46			,622. ,565.
	Other Control of Contr	-1.5 200. 5		•			5,40	3 .		,842.
ı otal	l, Add lines 1a through 1e. (Column (d) must equ	ıaı rorm 990. Pa	rt A, COIL	ırnn (២), IINA	/ U(C) /		_	- 1	- L _ /	, - 12 .

	dule D (Form 990) 2011 Arkansas County Farm Bureau			71-023	0987 Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finar	cial Sta	tements	
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		
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Reve	nue per	Return	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 . 1			
а	Net unrealized gains on investments	2a			
Ь	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d		-	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 . 1		1 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b		\dashv \downarrow	
C	Add lines 4a and 4b			4c 5	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) † XIII Reconciliation of Expenses per Audited Financial Statement	ente With Eyn	nege ne		
		ents with Expe	silaca pe	1 Neturn	
1	Total expenses and losses per audited financial statements				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a			
a	Donated services and use of facilities	2b		\dashv \mid	
0	Prior year adjustments	2c		\dashv \mid	
G -4	Other losses Other (Describe in Part XIV.)	2d			
d	Add lines 2a through 2d	20			
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
h	Other (Describe in Part XIV.)	4b		7	
c	Add lines 4a and 4b		· ·	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
Pa	t XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp				
		·			
		····		····	
				_	_

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 Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Arkansas County Farm Bureau

Employer identification number 71-0230987

Form 990, Part VI, Section A, line 2: Derek Bohanan and Monty Bohanan -
family relationship and business relationship
Jody Holzhauer and Mike Dodson - family relationship and business
relationship
Webster Hillman, Walter Hillman, David Hillman, Jonathan Hillman, and Ryan
Hillman - family relationship and business relationship
John Tarkington and Sam Tarkington - family relationship and business
relationship
Jerry Rodgers and Brandon Rodgers - family relationship and business
relationship
Floyd Dabbs, Terry Dabbs, and Trent Dabbs - family relationship and
business relationship
Billy Long, Heath Long and Wes Long - family relationship and business
relationship
Hank Bueker and Heath Long - business relationship
Form 990, Part VI, Section A, line 6: The Organization is a mutual
benefit organization with members.
Form 990, Part VI, Section A, line 7a: The board is elected annually by
the general membership. Officers are elected by the board.
Form 990, Part VI, Section A, line 7b: Policy resolutions are subject to
member approval.

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization . Arkansas County Farm Bureau	Employer identification number 71-0230987
manager and Board President for review. Upon approval, it	is signed by the
Board President.	
Form 990, Part VI, Section B, Line 12c: As issues arise t	hat may lead to
conflicts of interest, they are informally discussed by t	he board.
Form 990, Part VI, Section B, Line 15: The Organization d	oes not have
compensated officers or management officials.	
Form 990, Part VI, Section C, Line 19: These documents ar	e not available
to the public.	
	