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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	or the 2	2011 calendar year, or tax year beginning $f NOV 1$, $f 2011$ and ending	OCT 31, 2012
В	heck if	C Name of organization	D Employer identification number
_	Address	Chairbard Carata France B	
누	_change Name	Craighead County Farm Bureau	71 0057510
<u></u>	_change	Doing Business As	71-0257512
}	_ return Termin-	Number and street (or P 0 box if mail is not delivered to street address) P.O. Box 2397	uite E Telephone number 870-935-5533
-	-√ated ∏Amended	, 	270 470
\vdash	⊒retum ∏Applica-	City or town, state or country, and ZIP + 4 Jonesboro, AR 72402	
	Litión pending	F Name and address of principal officer: Dan Hosman	H(a) Is this a group return for affiliates? Yes X No
		same as C above	H(b) Are all affiliates included? Yes No
IT	ax-exen		527 If "No," attach a list. (see instructions)
		▶ www.arfb.com/craighead	H(c) Group exemption number ▶
K F	orm of or	ganization X Corporation Trust Association Other	Year of formation 1936 M State of legal domicile AR
		Summary	
e	1 Br	riefly describe the organization's mission or most significant activities: Agricult	ural Promotion
Activities & Governance			
ern	2 C	neck this box 🕨 📖 if the organization discontinued its operations or disposed of n	
λοέ		umber of voting members of the governing body (Part VI, line 1a)	3 32
8		umber of independent voting members of the governing body (Part VI, line 1b)	4 32 5 7
ties		otal number of individuals employed in calendar year 2011 (Part V, line 2a)	F.C.
ťìvi	ì	otal number of volunteers (estimate if necessary)	0.00
Ac		otal unrelated business revenue from Part VIII, column (C), line 12	$\begin{vmatrix} 7a & 242,241. \\ 7b & 0. \end{vmatrix}$
_	D N	et unrelated business taxable income from Form 990-7, line 34	Prior Year Current Year
•	8 C	ontributions and grants (Part VIII, line 1h) RECEIVED	0. O.
Revenue	!	rogram service revenue (Part VIII, line 2g)	81,069. 77,043.
eve		vogram service revenue (Part VIII, line 2g) vestment income (Part VIII, column (A), lines 3, 4, and 7d) 2 2 2013 ther revenue (Part VIII, column (A), lines 5, 6d 8c, 9c, 10c, and 11e)	143. 22,925.
α '	44 🔿	ther revenue (Part VIII, column (A), lines 5, 66, 8c, 9c, 10c, and 11e)	244,195. 251,159.
	12 To	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	325,407. 351,127.
	13 G	rants and similar amounts paid (Part IX, column (A), lines 33; N ,	0. 0.
	14 B	enefits paid to or for members (Part IX, column (A), line 4)	0. 0.
es	15 Sa	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	195,944. 207,520.
Expenses	l	ofessional fundraising fees (Part IX, column (A), line 11e)	0. 0.
Exp	i	otal fundraising expenses (Part IX, column (D), line 25)	120 669 125 046
_	l	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	120,668. 125,046. 316,612. 332,566.
	l	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,795. 18,561.
es	19 R	evenue less expenses. Subtract line 18 from line 12	Beginning of Current Year End of Year
Net Assets or Fund Balances	20 To	otal assets (Part X, line 16)	258,174. 275,072.
ASS d Ba		otal liabilities (Part X, line 26)	35,172. 33,509.
F	ļ	et assets or fund balances. Subtract line 21 from line 20	223,002. 241,563.
Pa	ırt II	Signature Block	
Unde	er penalti	es of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, and to the best of my knowledge and belief, it is
true,	correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prep	parer has any knowledge
		Signature of officer Staff Sibon	Date
Sigr		S ++ () 1 1 1	
Her	e	Type or print name and title	3-12-13
	— \ <u>*</u>		Date , Check PTIN
Paid		rint/Type preparer's name aria K. Bean Preparer's signature Bean CPA	
Prep	· ·	irm's name Thomas & Thomas LLP	Firm's EIN > 71-0271741
Use	<u> </u>	ırm's address 201 E. Markham, Suite 500	
		Little Rock, AR 72201	Phone no (501) 375-2025
May	the IRS	discuss this return with the preparer shown above? (see instructions)	X Yes No
1320	01 01-23-	LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2011)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		163	110
-	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
-	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
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	•	Ì	
	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	<u>11e</u>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ļ		١
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			1,,
	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
14a		14a	-	
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	l	1	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			X
	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	4-		Х
40	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	!	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	10		х
47	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	-	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		х
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''	<u> </u>	
10		18		x
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		\vdash	†
	complete Schedule G, Part III	19		x
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	†
	in 165 to mic 200, did the organization attach a copy of its addited inflation statements to this feturity		990	(2011)
		. 2,,,,,		, .,

		Ī	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		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	ł		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	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]		
	any tax-exempt bonds?	24c		
d	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	1		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	1		
	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	1		
	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		1	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
	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):			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00.		Х
	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		_^_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		х
••	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	24		х
	If "Yes," complete Schedule N, Part I	31_		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		Х
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		X
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity?	34		Х
250	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	338		
b	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
50	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	30		
J.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<u> </u>		- <u></u> -
	Note. All Form 990 filers are required to complete Schedule O	38	x	
	1. 1915 7 m 1 of the Cost ment and Todalista to Complete Cost	. ~		

-	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2 a	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 7			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	ļ	- 1	٠,,
	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 Accounts.	_ [1	v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	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		
рa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a	ļ	Х
	any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Oa		
b	were not tax deductible?	6b		
7	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 services provided to the payor?	7a	1	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		
	to file Form 8282?	_7c		
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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	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		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
_	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501 (c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
_	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a		12a	1	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	is the organization licensed to issue qualified health plans in more than one state?	13a		
	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			
C	Enter the amount of reserves on hand			سييس
	·	14a		X
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		ŀ

71-0257512 Form 990 (2011) Page 6 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 Section A. Governing Body and Management No Yes 32 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 32 b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 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 Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7ь Х persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? 8a X 8ь **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? Х 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. Х 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X 12c in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 14 14 Did the organization have a written document retention and destruction policy? 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? 15a a The organization's CEO, Executive Director, or top management official 15b **b** Other officers or key employees of the organization 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 arrangement with a X taxable entity during the year? 16a b 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 16b exempt status with respect to such arrangements? Section C. Disclosure None List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

72402

The Organization - 870-935-5533 P.O. Box 2397, Jonesboro, AR

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

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.

X 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	ю́ох	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	e e constant e e c		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations				
(1) Dan Hosman	0.50								0.	
President	0.50	X	<u> </u>	X		 	<u> </u>	0.		0.
(2) Scott Gibson	0.50	.,		.,			1		0.	0.
1st Vice President	0.50	X	<u> </u>	X	-		-	0.		<u> </u>
(3) Joshua Cureton	0.50	,	ł	v	ı	ļ	1	0.	0.	0.
2nd Vice President	0.50	X	 	X			 			·
(4) Kenny Qualls	0.50	١,,		v				0.	0.	0.
Secretary/Treasurer	0.50	X	├	X	-	├	├			<u> </u>
(5) Mark Bowers	0.50	,			į	İ		0.	0.	0.
Member	0.50	X	-	ļ		├	-	<u> </u>	0.	<u> </u>
(6) Jerome Boyd	0.50	J				1		0.	0.	0.
Member	0.50	X	\vdash		-	├-	ļ.—	<u> </u>	<u> </u>	
(7) Tony Bradley	0.50	x	Ì	l		İ		0.	0.	0.
Member	0.30	≏	\vdash	-	-	├	╁		0.	
(8) Eddie Burris	0.50	X]			0.	0.	0.
Member	0.30	 ^	\vdash	├	├	 	-			
(9) Joe Christian	0.50	X			1			0.	0.	0.
Member (10) Picker of Green	0.30	∤≏	├-	├	-		+	ļ .	<u>-</u> -	<u>~</u>
(10) Richard Coy Member	0.50	X						0.	0.	0.
(11) Michael Cureton	0.30	<u> </u>	-		-	 		† <u>-</u> -		
Member	0.50	X			İ			0.	0.	0.
(12) Barry Fielder	1 0.30		╁╌	╁	┢┈	†	\vdash			
Member	0.50	x		ĺ		İ	1	0.	0.	0.
(13) David Gairhan			T	1		T	1			
Member	0.50	X		Į]	0.	0.	0.
(14) Thomas Gairhan										
Member	0.50	X			ļ			0.	0.	0.
(15) Joe Gammill			1							
Member	0.50	X			1			0.	0.	0.
(16) Bob Griffin				o	1					
Member	0.50	X			1			0.	0.	0.
(17) Terry Hall										
Member	0.50	X			L	L	L	0.	0.	0.
100000 04 00 10										Form 000 (2011)

Form 990 (2011) Craid Part VII Section A. Officers, Direct	head County								71-0257 ees (continued)	<u> </u>	age
. (A) Name and title	(B) Average hours per week	(do box offic	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(describe hours for related organizations in Schedule O)	Individual trustae or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensa from th organizat and relat organizati	ie tion ted
(18) David Hodges								_			_
Member	0.50	X				<u> </u>		0.	0.		0
(19) Lennie Hogan	0.50							0	0		^
Member	0.50	Х				!		. 0.	0.		0
(20) Kevin Hoke	0.50								•		^
Member	0.50	X			<u> </u>	<u> </u>		0.	0.		0
(21) Don Hosman	0.50	,,						0	0.		^
Member	0.50	X	<u> </u>			ļ		0.			0
(22) Bill Humphrey	0.50	х						0.	0.		0
Member (02) Production	0.30	^	-			-		0.			
(23) David Hydrick Member	0.50	x				ĺ		0.	0.	ĺ	0
(24) James Peachey	0.30	 ^		\vdash		-	_				
Member	0.50	x						0.	0.		0
(25) James Pierce				\vdash	-	 	-				
Member	0.50	Х						0.	0.		0
(26) Max Render										·	
Member	0.50	X						0.	0.	Í	0
1b Sub-total		٠						0.	0.		0
c Total from continuation sheets to	Part VII, Section A					\blacktriangleright		0.	0.		0
d Total (add lines 1b and 1c)	,							0.	0.		0

	compensation from the organization				_
			Yes	No	
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on				_
	line 1a? If "Yes," complete Schedule J for such individual	3	ļ	X	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization				
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services				
	rendered to the organization? If "Yes," complete Schedule J for such person	5		X	_

Section B. Independent Contractors

(A) Name and business address	NONE	(B) Description of services	(C) Compensation

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Form 990 (2011) Craignea	a County	<u>y</u>	ra.	<u>cm</u>	В	TITE	<u>ea</u>	<u>u</u>	71-025	7512
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mplo	oyee	s, a	nd ł	ligh	est	Compensated Employ	rees (continued)	
(A) Name and title	(B) Average hours	Average Position hours (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual frustee or director	Institutional trust oc	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) Bill Shannon	0.50									
Member	0.50	X	ļ	<u> </u>	<u> </u>		_	0.	0.	0
28) John Sloan	0.50	J	ĺ			Ì	ĺ	0.	0.	C
(ember	0.50	<u> </u>	-		-	-	\vdash	0.	0.	
29) Jeffrey Tubbs Member	0.50	Y				l		0.	0.	C
30) Jim Tubbs	0.50	 ^ -	\vdash			\vdash	\vdash	· .		
Member	0.50	x				}]	0.	0.	(
(31) Justin Welch		† 				<u> </u>				
fember	0.50	X						0.	0.	(
		-				-				·
		-	_				-			
		-								
		_				-				
			-		-					
		ļ				_	<u>.</u>			
		-				_				
		-			<u> </u> 	_	-			
			_			-	_			
			-	<u> </u>						
					_	-				
otal to Part VII, Section A, line 1c	<u> </u>	٠	<u></u>	L	L	<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
nts its	1	а	Federated campaigns	1a		,			······································
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b					
S, G			Fundraising events	1c					
a His		d	Related organizations	1d					
S'E		e	Government grants (contribution	s) 1e					
rior		f	All other contributions, gifts, grants,	· ——					
E E			similar amounts not included above	11					
들		9	Noncash contributions included in lines 1a-	1f \$					
<u>ರೆ ಕ</u>			Total. Add lines 1a-1f						
.	_ •		, , , , , , , , , , , , , , , , , , , ,		Business Code				
8	2	а	Membership Dues		110000	77,043.	77,043.		
و چ		b							
en S		C							
ह्र ब		d							
Program Service Revenue		e							
۵		f	All other program service revenu	e					
		9	Total. Add lines 2a-2f		<u> </u>	77,043.			
Í	3		Investment income (including div	ıdends, ınter	est, and	100			105
			other similar amounts)		•	186.			186.
	4		Income from investment of tax-ex	kempt bond p	proceeds	2 006			2 006
	5		Royalties		•	3,006.	·····		3,006.
ĺ			_	(i) Real	(ii) Personal				
	6	_	Gross rents	2,400.					
			Less: rental expenses	0.		`	-		
			Rental income or (loss)	2,400.	·	2 400			2 400
1			Net rental income or (loss)	<u> </u>	D	2,400.			2,400.
	7	а		i) Securities	(ii) Other 50,082.				
			assets other than inventory		30,002.				
l		D	Less. cost or other basis		27,343.				
		_	and sales expenses	 .	22,739.				
			Gain or (loss) Net gain or (loss)		22,733.	22,739.		İ	22,739.
			Gross income from fundraising e	vente (not		227733.	***	-	227703.
une	Ü		including \$	of					
Other Reven			contributions reported on line 1c						
Œ			Part IV, line 18	,. 000 a					
륄		Ь	Less: direct expenses	b					
0			Net income or (loss) from fundral	sina events	•				
ŀ			Gross income from gaming activ	-		`	•		······································
}			Part IV, line 19	а	<u> </u>				
		b	Less: direct expenses	b					
ļ		С	Net income or (loss) from gaming	activities					
ŀ	10	а	Gross sales of inventory, less ret	urns					
ĺ			and allowances	а					
l		b	Less: cost of goods sold	b					
Į		c	Net income or (loss) from sales o	f Inventory	•				
ļ	_		Miscellaneous Revenue		Business Code				
	11	а		e Fees	524298	242,241.		242,241.	·
		b	Miscellaneous		900099	3,512.			3,512.
}		С							·
		d	All other revenue				**************************************		
		е	Total. Add lines 11a-11d		▶	245,753.			
	12		Total revenue. See instructions			351,127.	77,043.	242,241.	31,843.

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 thi	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				
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				
	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				<u> </u>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				<u> </u>
7	Other salaries and wages	187,536.			
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	4,255.			<u> </u>
10	Payroll taxes	15,729.			
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	600.			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				<u> </u>
g	Other				
12	Advertising and promotion	6,594.			
13	Office expenses	34,185.			
14	Information technology			ļ. <u> </u>	
15	Royalties	25 046			<u> </u>
16	Occupancy	35,246.			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	00 760			
19	Conferences, conventions, and meetings	32,763.			
20	Interest .			<u> </u>	
21	Payments to affiliates	10 476			
22	Depreciation, depletion, and amortization	10,476.			
23	Insurance				
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	Valle and Cafate	3,493.			
a b	Micellaneous	964.			
c	Membership Drive	725.			
d					
e					
25	Total functional expenses. Add lines 1 through 24e	332,566.			
26	Joint costs Complete this line only if the organization	<u> </u>			
_•	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>			
_					

Part X **Balance Sheet** (A) (B) End of year Beginning of year 267. 267. 1 Cash · non-interest-bearing 1 173,767. 144,974. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net Ō. 4,191. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other 509,372. 10a basis Complete Part VI of Schedule D 108,742. 408,334. 101,038. 10c 10b b Less: accumulated depreciation 11 Investments · publicly traded securities 11 12 12 Investments - other securities. See Part IV, line 11 13 13 Investments · program-related. See Part IV, line 11 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 275,072. 258,174. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 4,031. 3,711. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 31,461. 29,478. 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 iabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Schedule D 35,172. 33,509. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here

X and complete lines 30 through 34. 0. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 223,002. 241,563. 32 Retained earnings, endowment, accumulated income, or other funds 32 223,002. 241,563. 33 33 Total net assets or fund balances

275,072. Form **990** (2011)

258,174.

Total liabilities and net assets/fund balances

Form	1990 (2011) Craighead County Farm Bureau	71-025	7512	Pag	ge 12
Рa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
	•	1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>27.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			66.
3	Revenue less expenses. Subtract line 2 from line 1	3			61.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	223	3,0	02.
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	241	L , 5	63.
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		X_
ь	Were the organization's financial statements audited by an independent accountant?		2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	1 1		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		**********
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?		3a		X
b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or guidte, explain why in Schedule O and describe any steps taken to undergo such audits		3ь		l

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of organization

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

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

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

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

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

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

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

	Craighead County Farm Bureau		71-0257512
Pa	art I-A Complete if the organization is exempt under section 501(c) or is a secti	on 527 or	ganization.
1 2 3	Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political expenditures	▶ \$	
Pa	art I-B Complete if the organization is exempt under section 501(c)(3).		
	Enter the amount of any excise tax incurred by the organization under section 4955	▶\$	
	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		Yes No
4a	a Was a correction made?		Yes No
<u></u>	b If "Yes," describe in Part IV.		
Pa	art I-C Complete if the organization is exempt under section 501(c), except sec		;)(3)
2	Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$;	
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	L c	
А	Did the filing organization file Form 1120-POL for this year?	•	Yes No.
	Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. A contributions received that were promptly and directly delivered to a separate political organization, such political action committee (PAC). If additional space is needed, provide information in Part IV.	ulso enter the	e amount of political
	(a) Name (b) Address (c) EIN (d) Amount filing organ funds. If none	ization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2011

	edule C (Form 990 or 990 EZ) 2011					71-	0257512 Page 2
Pa	rt II-A Complete if the org			mpt under sectio	n 501(c)(3) and fil	ed Form 5768	
	(election under sec	tion 50	1(h)).				
A C	heck 🕨 🔛 if the filing organizat	tion belon	igs to an affi	liated group (and list ii	n Part IV each affiliated	group member's na	me, address, EIN,
	expenses, and shar	e of exces	ss lobbying	expenditures).			
<u>B</u> C	heck 🕨 🔛 if the filing organizat	tion check	ked box A ar	nd "limited control" pro	ovisions apply.	 	
			bying Expension	nditures ints paid or incurred.) .	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to influ	ence pub	olic opinion (grass roots lobbying)			
	Total lobbying expenditures to influ						
c	Total lobbying expenditures (add lii		_	-, (g,			
d	Other exempt purpose expenditure		- /-/				
е	Total exempt purpose expenditures		es 1c and 1c	1)			
	Lobbying nontaxable amount. Ente			•	h columns.	·	
	If the amount on line 1e, column (a) o			bying nontaxable am			
	Not over \$500,000			the amount on line 1e			
	Over \$500,000 but not over \$1,000	0.000		0 plus 15% of the exc			
	Over \$1,000,000 but not over \$1,5			0 plus 10% of the exc			
	Over \$1,500,000 but not over \$17,	000,000		0 plus 5% of the exce			
Over \$17,000,000			\$1,000,0	000.			
9	Grassroots nontaxable amount (en	ter 25% c	of line 1f)				
h	Subtract line 1g from line 1a. If zero	or less, e	enter -0-				
i	Subtract line 1f from line 1c. If zero	or less, e	enter -0-				<u> </u>
j	If there is an amount other than zer	o on eithe	er line 1h or	line 11, did the organiz	ation file Form 4720		
	reporting section 4911 tax for this	year?				· · · · · · · · · · · · · · · · · · ·	Yes No
			at made a s		Section 501(h) n do not have to comp es 2a through 2f on pa		
		Lobi	bying 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))		••••••				
<u>c</u>	Total lobbying expenditures						
d	Grassroots nontaxable amount						
_	Grassroots ceiling amount (150% of line 2d, column (e))						
	Grassroots Johnwing expenditures						

Schedule C (Form 990 or 990-EZ) 2011

(b)

Schedule C (Form 990 or 990-EZ) 2011 Craighead County Farm Bureau 71-0257512 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	h "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed description		(a)		(b)		
4 Duman Abannasa akal Abin Mini	of the lobbying activity.			Ame	ount		
	ization attempt to influence foreign, national, state or mpt to influence public opinion on a legislative matter				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
b Paid staff or management (include	compensation in expenses reported on lines 1c through 1i)?						
c Media advertisements?							
d Mailings to members, legislators, or			ļ				
e Publications, or published or broad			· · · · · · · · · · · · · · · · · · ·	-			
f Grants to other organizations for lo			<u> </u>				
_	r staffs, government officials, or a legislative body?						
·	conventions, speeches, lectures, or any similar means?						
i Other activities?			 				
j Total. Add lines 1c through 1:	organization to be not described in section 501(c)(3)?		†				
b If "Yes," enter the amount of any ta	-	, ,,,,,					
	ax incurred by organization managers under section 4912						
	section 4912 tax, did it file Form 4720 for this year?		1				
Part III-A Complete if the org 501(c)(6).	anization is exempt under section 501(c)(4), sec	tion 501(c)(5), or se	ection			
				Yes	No		
1 Were substantially all (90% or more	e) dues received nondeductible by members?		1	Х			
	ouse 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?				X		
answered "Yes."	er (a) BOTH Part III-A, lines 1 and 2, are answer	ed "No" O	R (b) Part	i III-A, lin	ie 3, is		
1 Dues, assessments and similar am		litical					
2 Section 162(e) nondeductible lobby expenses for which the section 5	ying and political expenditures (do not include amounts of po	iiticai					
a Current year	er (i) tax was paidj.		2a]			
b Carryover from last year			2b				
c Total			2c				
	tion 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4 If notices were sent and the amour	nt on line 2c exceeds the amount on line 3, what portion of the ryover to the reasonable estimate of nondeductible lobbying ar	excess					
			5				
expenditure next year?	olitical expenditures (see instructions)			I			

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

	Craignead County F		11-025/512
Pa			Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lir		
		(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	n writing that the assets held in donor advised fur	nds
	are the organization's property, subject to the organization's	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	only
	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	til Conservation Easements. Complete if the o	rganization answered "Yes" to Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization	ation (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of an historica	illy important land area
	Protection of natural habitat	Preservation of a certified h	sistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	dified conservation contribution in the form of a co	onservation easement on the last
	day of the tax year.		<u></u>
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		26
С	Number of conservation easements on a certified historic st	2c	
d	Number of conservation easements included in (c) acquired	d after 8/17/06, and not on a historic structure	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	released, extinguished, or terminated by the orga	nization during the tax
_	year ▶		
4	Number of states where property subject to conservation e		
5	Does the organization have a written policy regarding the po		Yes No
_	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about a service 470(h)(4)(D)(h)	ove satisfy the requirements of section 170(n)(4)(Yes No
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conserva		
	include, if applicable, the text of the footnote to the organization	ation's linancial statements that describes the or	ganization's accounting for
Da	conservation easements t III Organizations Maintaining Collections	of Art Historical Treasures or Other	Similar Assets
I G	Complete if the organization answered "Yes" to Forn		Olimai Assets.
1a	If the organization elected, as permitted under SFAS 116 (A		and balance sheet works of art
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that desc		, posito corvido, provido, in r are xiv,
ь	If the organization elected, as permitted under SFAS 116 (A		halance sheet works of art, historical
Ū	treasures, or other similar assets held for public exhibition,		
	relating to these items:	Control of Public St I tol Milation of Public St.	p. eeee
	(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 tr	reasures, or other similar assets for financial gain	
_	the following amounts required to be reported under SFAS	_	, p
а	Revenues included in Form 990, Part VIII, line 1	. To y to a body foliating to those items.	▶ \$
ь	Assets included in Form 990, Part X		▶ \$
_	· · · · · · · · · · · · · · · · · · ·		•

		ad County							5/512		
Par	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, o	<u>r Other</u>	Simil	<u>ar Asse</u>	ts (continu	ued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	are a sigi	nificant	use of its	collection i	items	
	(check all that apply):										
а	Public exhibition	C	ı 🗀	Loan or exc	hange program	ns					
b	Scholarly research	•		Other		_					
c	Preservation for future generations										
4	Provide a description of the organization's co	ellections and explain	ın how tl	ney further t	he organizatio	n's exem	ot purpe	ose in Par	t XIV.		
5	During the year, did the organization solicit or										
	to be sold to raise funds rather than to be ma								Yes	☐ No	
Par	t IV Escrow and Custodial Arran					Yes" to Fo	orm 990), Part IV.	line 9. or		
	reported an amount on Form 990, Par			ū				•	.,.		
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other ass	ets not in	cluded				
-	on Form 990, Part X?		J. J. J. 10.				0.0000	Γ	Yes	No	
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	Mowing	table:				. —			
•	ii roo, oxplain the altangement in rait XIV	and domplete the te	Jiiowiiig	table.					Amount		
С	Beginning balance						1c		Airioditt		
ď	Additions during the year						1d				
e	Distributions during the year						1e				
4	Ending balance						1f				
20	•	000 Davi V lina	010				<u> </u>	· 	Yes	□ No	
2a	Did the organization include an amount on Fo		217					L_	」 tes	NO	
Par	If 'Yes,' explain the arrangement in Part XIV.			"Ves" to Co	000 Part I	/ line 10					
FOI	† V Endowment Funds. Complete if								(.) 5	ann bank	
	<u></u>	(a) Current year	(b) F	rior year	(c) Two years	раск (а	inree y	ears back	(e) Four y	ears back	
1a	Beginning of year balance		-					·· ·			
b	Contributions	·- <u>-</u>			ļ. ———				ļ		
С	Net investment earnings, gains, and losses								<u> </u>	******	
d	Grants or scholarships										
e	Other expenditures for facilities		,		J	}			}		
	and programs			· -							
f	Administrative expenses								} 	********	
9	End of year balance		ļ		l <u>.</u>				<u> </u>		
2	Provide the estimated percentage of the curr	ent year end baland	ce (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	ld equal 100%.									
За	Are there endowment funds not in the posse	ssion of the organiz	ation the	at are held a	ind administer	ed for the	organi	zation	_		
	by:								Y	es No	
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
ь	If "Yes" to 3a(ii), are the related organizations	listed as required o	on Sche	dule R?					3b		
4	Describe in Part XIV the intended uses of the	organization's end	owment	funds.							
Par	t VI Land, Buildings, and Equipm	ent. See Form 99	0, Part X	, line 10.							
	Description of property	(a) Cost or o			or other	(c) Acc	umulate	ed	(d) Book	value	
		basis (investi			(other)		ciation		- •		
1a	Land				8,200.				8	,200.	
b	Buildings				6,465.	2(6,5	11.		,954.	
_	Leasehold improvements									·	
d	Equipment	·		20	9,233.	19	6,7	76.	12	,457.	
_	Other				5,474.		5,0			427.	
	Add lines 1a through 1e. (Column (d) must ex	gual Form 990 Part	Y colu				- / -		101		

	dule D (Form 990) 2011 Craighead County Farm Bure				57512 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finan	cial Stat	ements	
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 ar	nd 9	10		
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	ents 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:				
а	Net unrealized gains on investments	2a		_	
b	Donated services and use of facilities	2b			
С	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:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIV.)	4b		_	
C	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	
Pa	t XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expe	enses pe	r Return	
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			
а	Donated services and use of facilities	2a		-	
b	Prior year adjustments	2b		-	
C	Other losses .	2c		-	
d	Other (Describe in Part XIV.)	2d		\dashv \downarrow	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	•		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
р	Other (Describe in Part XIV.)	4b		┥.	
c	Add lines 4a and 4b			4c	
Bo	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
	t XIV Supplemental Information	III. leans de seud de De	and IV. Iva an	dh and Oh. I	Dark V. June A. Dark
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part I				
X, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp	plete this part to pro	ovide any a	dditional into	rmation.
					
					
		-			

SCHEDULE 0 (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.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Craighead County Farm Bureau

Employer identification number 71-0257512

Form 990, Part VI, Section A, line 2: Mark Bowers & Joe Christian -
family relationship
Michael Cureton & Josh Cureton - family relationship
David Gairhan & Thomas Gairhan - family relationship
Scott Gibson & David Hodges - family relationship
Don Hosman & Dan Hosman - family relationship
Form 990, Part VI, Section A, line 6: The Organization is a mutual
benefit organization with members.
Form 990, Part VI, Section A, line 7a: The board is elected annually by
the general membership. Officers are elected by the board.
Form 990, Part VI, Section A, line 7b: Election of voting delegates at
annual convention are approved by membership at annual meeting.
Form 990, Part VI, Section B, line 11: The 990 is reviewed by the
President, Secretary, and Treasurer.
Form 990, Part VI, Section B, Line 12c: The conflict of interest policy in
place requires officers to disclose annually situations which may give rise
to conflicts of interest. Any board member refusing to sign will be
removed from the board.
Form 990, Part VI, Section B, Line 15: The Organization does not have
compensated officers or management officials. HA For Paragraph Reduction Act Nation and the Instructions for Form 990 or 990-F7 (2011)

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization Craighead County Farm Bureau	Employer identification number 71-0257512
Form 990, Part VI, Section C, Line 19: These documents ar	e not available
to the public.	
	
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