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Form **990**

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.

2011
Open to Public Inspection

/4 For the 2011 calendar year, or tax year beginning NOV 1. 2011 and ending OCT 31, 2012 Check if applicable C Name of organization D Employer identification number Address change Pope County Farm Bureau 71-0272931 Doing Business As]initial return Number and street (or P 0 box if mail is not delivered to street address) Room/suite E Telephone number Termin-479-968-1361 P.O. Drawer 10400 Amended return City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion Russellville, AR 71812 H(a) Is this a group return pending Yes X No F Name and address of principal officer: Gary Rowlands for affiliates? same as C above H(b) Are all affiliates included? Yes Tax-exempt status: \square 501(c)(3) \square 501(c) () ◀ (insert no) 4947(a)(1) or If "No." attach a list. (see instructions) J Website: ▶ www.arfb.com/pope H(c) Group exemption number ▶ K Form of organization X Corporation Other > L Year of formation 1956 M State of legal domicile AR Association Part I Summary Briefly describe the organization's mission or most significant activities: Agricultural Promotion Activities & Governance Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 24 Number of voting members of the governing body (Part VI, line 1a) 24 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 37 6 6 Total number of volunteers (estimate if necessary) 139,1 35. 7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 SCANNED SEP 2 6 2013 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 0. 0 Contributions and grants (Part VIII, line 1h) 70,486. 68,259. Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 47, and 7,d) 734 Ŏ Other revenue (Part VIII, column (A), lines 5, 6d, 80, 9c, 10c, and 14e) 143,575 152,700. 214,795 ,681 12 Total revenue - add lines 8 through 11 (must equal Part-VIII, column (A), line 12 0. Grants and similar amounts paid (Part IX, column (A), lines (3)) 0 Ō. Ö. Benefits paid to or for members (Part IX, column (A), line 4) 77,051 74,829. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 116,160. 121,669. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 190,989. 198,720. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 16,075. 30,692. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 906,891 907,601. 20 Total assets (Part X, line 16) 384,509. 354,527. 21 Total liabilities (Part X, line 26) ξĔ 553,074. 522,382. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury/1 declare that Lyave examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and come ete Decl eration of prepare (other than officer) is based on all information of which preparer has any knowledge Sign Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name P00941762 Paid Maria K. Bean Firm's name Thomas & Thomas 71-0271741 Preparer LLP Firm's EIN Use Only 201 E. Markham, Suite Firm's address Little Rock, AR 72201 501) 375-2025 May the IRS discuss this return with the preparer shown above? (see instructions) Yes ___ 132001 01-23-12 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2011)

	n 990 (2011) Pope County Farm Bureau	/1-02/2931	Page 2
Pâ	Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission:		
`	Agricultural Promotion		
_	_		
2	Did the organization undertake any significant program services during the year which were not listed on		reen
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	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 it	measured by expenses	3.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of g	rants and allocations t	o
	others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$)
	County Farm Bureau work is general in nature, helping fa		
	achieve educational improvements, economic opportunity,	and social	
	advancement.		
4b	(Code) (Expenses \$	e \$	
	/ Coperious V / Coperious V / Coperious V		
			<u> </u>
			
			
			
4c	(Code) (Expenses \$,\$)
			
			
			_
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u> _	Total program service expenses		
		Form 9 9	90 (2011)

Form 990 (2011) Pope 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_	ļ	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		X_
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		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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_		X
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_		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			.,
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			v
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_	_	<u> X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		:	v
	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, 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,		X	
	Part VI	11a		
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	445		Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44.		Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
а	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	11d		Х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11e		$-\frac{x}{X}$
e	Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X	ı ie		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
140	Schedule D, Parts XI, XII, and XIII	12a		Х
h	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>x</u>
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		-	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_ <u>X</u> _
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		Ţ	_
	1c and 8a? If "Yes," complete Schedule G, Part II	18		_ <u>X_</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form !	990 (2	2011)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	1	162	140
_;	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		Х
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			
	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	ì		
	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			
	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			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ĺ		
	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):	00-		Х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<u> X</u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	200		
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		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			 -
50	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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	-		
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	1	X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		,,	
	Note. All Form 990 filers are required to complete Schedule O	38_	X	

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	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	4 .		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
	(gambling) winnings to prize winners?	1c	X	ļ
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	1	1,	
ь	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)	_	v	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b_	_^	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			X
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			х
	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		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		Х
	any contributions that were not tax deductible?	- Oa		
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6ь		
7	were not tax deductible? 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		
	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			
C	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	1	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			-11-17-1
	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_	_]	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	is the organization licensed to issue qualified health plans in more than one state?	13a	·	
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

71-0272931 Pope County Farm Bureau Form 990 (2011) 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 24 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 24 **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 X 2 officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X 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 X 7b persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? X 8b **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 Х 10a Did the organization have local chapters, branches, or affiliates? 10a 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? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х 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 12c in Schedule O how this was done 13 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 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 16a taxable entity during the year? 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 17 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 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:

71812

The Organization - 479-968-1361 P.O. Drawer 10400, Russellville,

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Pope County Farm Bureau

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.

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	box	not c unle	Pos heck ss pe	more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional frustize	Officer	Key emptoyee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Gary Rowlands	0.50									0
President	0.50	X		X	_	_		0.	0.	0.
(2) Jeff Small	0.50	х		х				0.	0.	0.
Vice President	0.50	^		Λ	_	-	 	0.	0.	
(3) Jason Drew	0.50	X		Х				0.	0.	0.
Secretary/Treasurer (4) Craig Bailey	0.30			Λ			_		- 0.	
Member	0.50	X						0.	0.	0.
(5) Sue Berkemeyer					-	 				
Member	0.50	Х						0.	0.	0.
(6) Jim Bocksnick										
Member	0.50	X						0.	0.	0.
(7) Lisa Bocksnick										
Member	0.50	Х						0.	0.	0.
(8) Randy Clark		!							_	•
Member	0.50	X						0.	0.	0.
(9) Don Guess	0.50	X						0.	0.	0.
Member	0.50	^								<u> </u>
(10) Kenneth Hayden Member	0.50	Х						0.	0.	0.
(11) Milton Howell	0.30	-			-		-			
Member	0.50	$ \mathbf{x} $						0.	0.	0.
(12) Ida Ruth Jones										
Member	0.50	X						0.	0.	0.
(13) Tom Jones				-						
Member	0.50	X						0.	0.	0.
(14) Lance Martin										
Member	0.50	X	_					0.	0.	<u>0.</u>
(15) Charles Metz	0 50	v						0.	0.	0
Member (16) T. A. Water	0.50	X	_	-		_		"		0.
(16) T.A. Metz Member	0.50	x						o .	0.	0.
(17) David Oates		<u> </u>	-							
Member	0.50	х						0.	0.	0.
		ـــــــ						·		- 000

•	(A)	(B)			(C)			(D)	(E)	(E)			
	Name and title	Average	///	Position (do not check more than one					Reportable	Reportable		E	stimate	ed
		hours per	kod	, unie	ss pe	erson	ıs bot	th an	compensation	compensatio	n	ar	nount	of
		week		cer ar	id a c	Irect	or/trus	tee)	from	from related			other	
		(describe hours for	director		ļ		L	ļ	the	organizations			pensa	
		related	5	8			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	,C)		rom th janizat	
		organizations	agg.	nal trustee		8	TD ET		(44-27 1099-141130)			-	d relat	
		ın Schedule		trona		l ge	St co	E					anızatı	
		O)	Indiwdual	Institution	Officer	Key emptoyee	Highest compensated employee	F						
	Jay Price	0.50	v						0.		0.			^
Membe	Steven Sumners	0.30	^	├	-	 -	1				•			0.
Membe		0.50	X						0.		0.			0.
	Dustin Tackett	0.30	1	├	 		<u> </u>							
Membe		0.50	X				ļ		0.		0.			0.
(21)	Chris Vincent													
Membe	er	0.50	X			_			0.		0.			0.
(22)	Paul Weir					ĺ								
Membe		0.50	X			_	<u> </u>	<u> </u>	0.		0.			0.
	Roger White	0.50												^
Membe		0.50	X	-	<u> </u>			<u> </u>	0.		0.			0.
(24) Membe	Randy Young	0.50	X						0.		0.			0.
			_	_			_							
1b	Sub-total			<u> </u>	···-	L			0.		0.			0.
c ·	Total from continuation sheets to Part	VII. Section A					\blacktriangleright		0.		0.			0.
	Total (add lines 1b and 1c)	•					\blacktriangleright		0.		0.			0.
	Total number of individuals (including bu	not limited to th	ose	liste	ed al	oove	e) wh	no re	eceived more than \$100	000 of reportable	e			
	compensation from the organization													0
_											Γ		Yes	No
	Did the organization list any former offici ine 1a? <i>If "Yes," complete Schedule J fo</i>	•	uste	e, ke	y er	npic	yee	or I	highest compensated er	nployee on	İ	3		Х
	For any individual listed on line 1a, is the		le co	mn	enes	ation	anc	d oth	ner compensation from t	he organization	ŀ			
	and related organizations greater than \$									no organization		4		X
	Old any person listed on line 1a receive of			-						dual for services				
	rendered to the organization? If "Yes," co	mplete Schedul	e J f	or su	ıch	pers	on					5		<u>X</u>
Secti	on B. Independent Contractors												_	
	Complete this table for your five highest	•									pensa	ation f	rom	
1	the organization. Report compensation for (A)	or the calendar y	ear e	<u>endı</u>	ng w	<u>/ith (</u>	or w	<u>ithin</u>		ear.	_			
	Name and busine	ss address	NC	NE	2				(B) Description of se	ervices	C	(C ompe	<i>rı</i> nsatıcı	n
							•					-		
•								_	<u> </u>					
								1		1				
					_			+					 -	
							. <u>-</u>							
								+						
	Total number of Independent contractors													

1.6	21 6 0	m Statement of Nevel	Tue					(5)
*					(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	1	a Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues	1b					
S, G		c Fundraising events	1c					
ift.		d Related organizations	1d					
S,E		e Government grants (contribut	-					
ion Sign		f All other contributions, gifts, gran						
the		similar amounts not included abo	-					
dei.		Noncash contributions included in lines	1a-1f \$					
a Co		h Total. Add lines 1a-1f		•			•	
				Business Code				
e l	2	a Membership Dues	}	110000	68,259.	68,259.	j	j
ارة كِ		b						
Program Service Revenue		c				·		· · · · · · · · · · · · · · · · · · ·
E S		d					- 	
<u>8</u>		e						
<u>4</u>		f All other program service reve	nue			······		
	١ ,	g Total. Add lines 2a-2f		•	68,259.			
	3	Investment income (including	dividends, intere	est, and				<u></u>
		other similar amounts)		•	722.			722.
ł	4	Income from investment of tax	c-exempt bond p	oroceeds ►				
ļ	5	Royalties		>	2,715.			2,715.
		·	(ı) Real	(II) Personal			1111	· 111
	6	a Gross rents	8,400.					
ŀ		b Less: rental expenses	0.					
		c Rental income or (loss)	8,400.					
ĺ	,	d Net rental income or (loss)	<u> </u>	>	8,400.			8,400.
		a Gross amount from sales of	(i) Securities	(II) Other	•	······		
	•	assets other than inventory	Weggeringe	117,511.01				
	ı	Less: cost or other basis						
		and sales expenses						
j		Gain or (loss)						
1		d Net gain or (loss)		•	Ī			
			events (not					
ğ		8 a Gross income from fundraising events (not including \$ of						
e e		contributions reported on line			1			
Other Revenue		Part IV, line 18	a					
휽	1	Less: direct expenses	b					
0		Net income or (loss) from fund	_					,
ł		Gross income from gaming ac	-			***************************************		······································
}	- '	Part IV, line 19	а	[
		Less: direct expenses	b					
		Net income or (loss) from gami	_	—	Ì			
ı		Gross sales of inventory, less i						······································
		and allowances	а		ĺ			
	ı	Less: cost of goods sold	b		ŀ			
ĺ		Net income or (loss) from sales		•	Í			
Ī		Miscellaneous Revenue		Business Code				
ļ	11 a	T		524298	139,135.		139,135.	
	ŀ	Miscellaneous		900099	2,450.		•	2,450.
- [All other revenue						
	•	Total. Add lines 11a-11d	•	•	141,585.			
_	12_	Total revenue. See instructions		▶ 「	221,681.	68,259.	139,135.	14,287.
12200						· · · · · · · · · · · · · · · · · · ·		

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	nse 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)				
7	Other salaries and wages	67,147.			
8	Pension plan accruals and contributions (include			1	
	section 401(k) and section 403(b) employer contributions)	1,620.			
9	Other employee benefits				
10	Payroll taxes	6,062.		<u> </u>	
11	Fees for services (non-employees):				
а	Management	<u> </u>			
b	Legal				
C	Accounting	600.			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17			·	
f	Investment management fees				
9	Other	1 060			
12	Advertising and promotion	1,862. 15,040.			
13	Office expenses	15,040.	<u> </u>		
14	Information technology				
15	Royalties	22 406			
16	Occupancy	33,486.		 	
17	Travel				-
18	Payments of travel or entertainment expenses	ĺ			
	for any federal, state, or local public officials	12 220			· ·
19	Conferences, conventions, and meetings	13,339. 23,314.		<u> </u>	
20	Interest	23,314.			
21	Payments to affiliates	23,156.			
22	Depreciation, depletion, and amortization	870.			
23	Insurance Character avances not covered	070.			
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 0) Youth and Safety	4,103.			
a b	Miscellaneous	390.			
_		3,0.			
c d					 _
	All other expenses				
25 25	Total functional expenses. Add lines 1 through 24e	190,989.			
<u>25</u> 26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here ► If following SOP 98-2 (ASC 958-720)			†	

Part X Balance Sheet (B) (A) Beginning of year End of year 34,858. 40,111. 1 Cash - non-interest-bearing 1 80,958. 100,246. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 977. 302. Accounts receivable, net 4 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 employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 8 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 912,344. basis. Complete Part VI of Schedule D 10a 790,098. 145,402. 766,942. 10c **b** Less: accumulated depreciation 10b Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 906,891. 907,601. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,101.850. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 20,054. 20,755. 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 -iabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 362,904. 333,372. Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 384,509. 354,527. 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 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here

X
and complete lines 30 through 34. 0. Capital stock or trust principal, or current funds 30 31 0. 31 Paid-in or capital surplus, or land, building, or equipment fund 522,382. 522,382. 553,074. Retained earnings, endowment, accumulated income, or other funds 32 553,074. 33 33 Total net assets or fund balances 906,891. 907,601. Total liabilities and net assets/fund balances

Form **990** (2011)

Form	990 (2011) Pope County Farm Bureau	71-027	2931	Pa	ge 12	
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
٠Ì	Total revenue (must equal Part VIII, column (A), line 12)	1			81.	
2	Total expenses (must equal Part IX, column (A), line 25)	2			89.	
3	Revenue less expenses. Subtract line 2 from line 1	3	3(0,6	92.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	522	2,3	82.	
5	Other changes in net assets or fund balances (explain in Schedule O)	5			$\frac{0.}{74.}$	
6						
	XII Financial Statements and Reporting					
_	Check if Schedule O contains a response to any question in this Part XII					
				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	0.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х	
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 audit,				
	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.			***************************************	
	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
3a .	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ale Audit				
	Act and OMB Circular A-133?	.g	3a		X	
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit	1 2-1			
	or guidte, explain why in Schedule O and describe any stone taken to undergo such guidte.		36			

Form **990** (2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2011

Open to Public Inspection

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

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- 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) organization	tions: Complete Part III.		Emp	loyer identification number
	•	ounty Farm Bureau	1		71-0272931
P		ganization is exempt und		or is a section 527 o	
2	Provide a description of the organize Political expenditures Volunteer hours	zation's direct and indirect politic	cal campaign activities	s in Part IV. ▶\$	
Pŧ	ert I-B Complete if the org	ganization is exempt und	der section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶ \$	
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	5 ▶\$	
	If the organization incurred a section	in 4955 tax, did it file Form 4720	for this year?		Yes No
	a Was a correction made?				L Yes No
	b If "Yes," describe in Part IV. art I-C Complete if the org	ganization is exempt und	lor coction 501/o	vocat section 501/	0)/3)
1 2 3	Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and er made payments. For each organization tributions received that were propolitical action committee (PAC). If	d by the filing organization for se aization's funds contributed to ot a Add lines 1 and 2. Enter here a 1120-POL for this year? Inployer identification number (Elation listed, enter the amount pai omptly and directly delivered to	ther organizations for stand on Form 1120-POI N) of all section 527 pd from the filing organ a separate political organ.	ction activities section 527	Yes No th the filing organization a amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
		1	1	1	I

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 P	ope	County	Farm Burea	ıu	71-0	0272931 Page 2
Part II-A Complete if the orga			mpt under section	on 501(c)(3) and fil	ed Form 5768	
(election under sect	ion 501	(h)).	·		_ 	
A Check ► ☐ if the filing organization	on belong	gs to an aff	iliated group (and list ii	n Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share			•			
B Check L If the filing organization	on check	ed box <u>A</u> a	nd "limited control" pre	ovisions apply.		·
		ying Expe eans amoi	nditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
4 a Takal lalahan ang ang alikuma ka saftu						
1a Total lobbying expenditures to influe						
b Total lobbying expenditures to influe			ay (direct lobbying)			
c Total lobbying expenditures (add line		(טונ				
d Other exempt purpose expenditurese Total exempt purpose expenditures		0 10 and 1	4/			
, , , ,	•		•	h aalumaa		
f Lobbying nontaxable amount. Enter						
If the amount on line 1e, column (a) or	(D) IS:		bying nontaxable am the amount on line 1e			
Not over \$500,000						
Over \$500,000 but not over \$1,000,	cess over \$500,000.					
Over \$1,000,000 but not over \$1,500	ess over \$1,000,000.					
Over \$1,500,000 but not over \$17,00	ess over \$1,500,000.					
Over \$17,000,000		\$1,000,	000.			
						<u> </u>
g Grassroots nontaxable amount (ente		•		}		
h Subtract line 1g from line 1a. If zero				}		
i Subtract line 1f from line 1c. If zero c	•				·	<u></u>
j If there is an amount other than zero		r line 1h or	line 11, did the organiz	ation file Form 4720	1	
reporting section 4911 tax for this ye	_					Yes No
(Comp. organizat			eraging Period Under		late all of the five	
				n do not have to comp es 2a through 2f on pa		
			nditures During 4-Yea			
		ying Exper	iditures During 4- rea	Averaging Period	· -	T
Calendar year (or fiscal year beginning in)	(a) 2	800	(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))						
	······································					<u> </u>
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990 EZ) 2011 Pope County Farm Bureau 71-027293 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)).

Ror each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)	
		Yes	No	Amo	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?				
d	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	t III-A Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	on 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	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politi	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
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 exc	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	oolitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	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; Part I-C,	art II-A; and F	art II-B, lin	e 1. Also, d	omplete
hıs p	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

Pope County Farm Bureau

Employer identification number 71-0272931

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds 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 advised	funds			
	are the organization's property, subject to the organization's	-	Yes No			
6	Did the organization inform all grantees, donors, and donor a		ed only			
	for charitable purposes and not for the benefit of the donor of					
	impermissible private benefit?	, , , , , , , , , , , , , , , , , , , ,	Yes No			
Pa	rt II Conservation Easements. Complete if the org	panization answered "Yes" to Form 990. Part				
1	Purpose(s) of conservation easements held by the organizati					
	Preservation of land for public use (e.g., recreation or e		cally important land area			
	Protection of natural habitat	Preservation of a certified				
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied 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			
c	Number of conservation easements on a certified historic str	2c				
d						
Ŭ	listed in the National Register	arter of 17700, and not on a motorio structure	2 _d			
3	Number of conservation easements modified, transferred, rel	eased extinguished or terminated by the ord	<u> </u>			
	year ▶	ousse, oximgenerse, or terrimitates sy the org	gamzanon coming mo tax			
4	Number of states where property subject to conservation eas	sement is located				
5	Does the organization have a written policy regarding the per					
•	violations, and enforcement of the conservation easements if		Yes No			
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) above		· · · · · · · · · · · · · · · · · · ·			
•	and section 170(h)(4)(B)(ii)?	o dationy the requirements of accion are quity	Yes No			
9		on easements in its revenue and expense sta				
Ū	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for					
	conservation easements.	ion a manda statements that describes the	organization 3 accounting to			
Pa	rt III Organizations Maintaining Collections of	Art. Historical Treasures, or Othe	r Similar Assets.			
<u> </u>	Complete if the organization answered "Yes" to Form					
	If the organization elected, as permitted under SFAS 116 (AS		and balance sheet works of art			
	historical treasures, or other similar assets held for public exh					
	the text of the footnote to its financial statements that descri		o. poolio co , p , ,			
h	If the organization elected, as permitted under SFAS 116 (AS		t balance sheet works of art, historical			
	treasures, or other similar assets held for public exhibition, ec					
	relating to these items:	deation, or research in fortherance or public	service, provide the following amounts			
	(i) Revenues included in Form 990, Part VIII, line 1		> \$			
	(ii) Assets included in Form 990, Part X		S S S S S S S S S S			
2	If the organization received or held works of art, historical treations	seurae or other similar assets for financial asi	n provide			
~	the following amounts required to be reported under SFAS 1:		n, provide			
а	Revenues included in Form 990, Part VIII, line 1	To place items.	> ¢			
	Assets included in Form 990, Part X		► \$ ► \$			
	riodeta moladou ili i olili ooo, i alt A		- Ψ			

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Pa	rt III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Other	Simil	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, access	on, and other recor	ds, chec	k any of the	following that	t are a sig	nificant	use of its	collection	items
	(check all that apply):								•	
۰`a	Public exhibition		d 🔲	Loan or exc	hange progra	ams				
b	Scholarly research	•	e 🔲	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın how t	hey further t	he organizati	on's exem	pt purp	ose in Par	t XIV.	
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	sures, or oth	er sımılar a	ssets			
	to be sold to raise funds rather than to be many	aintained as part of	the orga	anization's co	ollection?				Yes	No_
Pa	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other as	sets not in	cluded			
	on Form 990, Part X?		-						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table:					_	
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e	<u> </u>		
f	Ending balance						1f	L		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?					[Yes	No
ь	If "Yes," explain the arrangement in Part XIV.									
Pa	t V Endowment Funds. Complete r	f the organization ar	nswered	"Yes" to Fo	rm 990, Part	IV, line 10.				
		(a) Current year	(b) F	rior year	(c) Two year	s back (d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance								*******	***************************************
b	Contributions									
С	Net investment earnings, gains, and losses								**********	
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 curr	rent year end baland	ce (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	nd administe	red for the	organiz	ation	_	
	by:								Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	on Sched	dule R?					3b	
4	Describe in Part XIV the intended uses of the									
Pai	t VI Land, Buildings, and Equipm	ent. See Form 990), Part X	, line 10.						
	Description of property	(a) Cost or o			or other	(c) Acc		ed	(d) Book v	alue
		basis (investr	nent)		(other)	depre	ciation		0.5.5	055
1a	Land				3,257.				253	,257.
b	Buildings			56	6,273.	8	39,60	bU.	4/6	613.
C	Leasehold improvements				6 730		0 7			046
d	Equipment				6,730.		8,7			946.
	Other				6,084.		6,9	28.		126.
Total	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990 Part	X. colur	nn (B), line 1	O(c).)				766	,942.

Schedule D (Form 990) 2011

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

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

(2)(3) (4) (5) (6) (7) (8)(9) (10)

(3) Other (A) (B) (C) (D) (E) (F) (G) (H) **(l)**

> (1) (2)(3)(4) (5) (6) (7) (8) (9) (10)

> (1) (2)(3) (4) (5) (6)(7) (8) (9) (10)

	dule D (Form 990) 2011 Pope County Farm Bureau			71-02729	31 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fir	ancial State	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		
٠Ì	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	- <u></u>	
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		
Pai	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Re	venue per l	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		-	
b	Donated services and use of facilities	2b		 	
C	Recoveries of prior year grants	2c]	
ď	Other (Describe in Part XIV.)	2d		4	
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			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		4 1	
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.)	14/34b F-		5	
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents with Ex	rpenses per		
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			
a	Donated services and use of facilities	2a		-	
Ь	Prior year adjustments	2b		4 1	
C	Other losses	2c		-	
d	Other (Describe in Part XIV.)	_2d		-	
	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:	1.4-1			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
	Other (Describe in Part XIV.) Add lines 4a and 4b	46		1.1	
				4c 5	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) † XIV Supplemental Information			131	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	l lines 1s and 4	· Port IV lines 1	Ib and 2b: Bort V	line 4: Port
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp				
3, 111 13	5 2, 1 art Al, lille 0, 1 art All, lilles 20 and 40, and 1 art All, lilles 20 and 40. Also comp	iete tilis part to	provide any ad		11.
					
		•		•	

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

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

Internal Revenue Service **Employer identification number** Name of the organization 71-0272931 Pope County Farm Bureau Form 990, Part VI, Section A, line 2: Jim Bocksnick, and Lisa Bocksnick family relationship Ida Ruth Jones and Tom Jones - family relationship T.A. Metz and Charles Metz - family relationship Form 990, Part VI, Section A, line 6: The Organization is a mutual benefit organization with members. Form 990, Part VI, Section A, line 7a: The board is elected annually by the general membership. Officers are elected by the board. Form 990, Part VI, Section A, line 7b: Policy resolutions are subject to member approval. Form 990, Part VI, Section B, line 11: The 990 is reviewed by the Audit Committee, which meets every quarter. Form 990, Part VI, Section B, line 12: The policy is reviewed annually and the County operates on the honor system. Form 990, Part VI, Section B, Line 15: The Organization does not have compensated officers or management officials. Form 990, Part VI, Section C, Line 19: These documents are not available to the public.