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SCANNED JUN 2 6 2013!

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.

OMB No 1545-0047 Open to Public Inspection

A	For th	e 2011 calendar year, or tax year beginning NOV 1, 2011 and	ending O	CT 31, 2012						
В	Check i	C Name of organization		D Employer identific	ation number					
Γ	Add	Conway County Farm Bureau								
Ē	NamNam		71-0281591							
	Initia retur	Number and street (or P 0 box if mail is not delivered to street address)	E Telephone number							
	Term ated	1.0. BOX 040	· · · · · · · · · · · · · · · · · · ·							
	Ame	of City or town, state or country, and ZIP + 4		G Gross receipts \$	212,848.					
L	Appi tion pend	MOTITICON, AN 72110		H(a) is this a group re						
	pone	F Name and address of principal officer: Gary Kaulillan		for affiliates?	Yes X No					
_		same as C above		H(b) Are all affiliates incl						
		tempt status:501(c)(3) X 501(c) (5) ◀ (insert no) 4947(a)(1) c	or 527	i	ist. (see instructions)					
		ite: ► www.arfb.com/conway forganization X Corporation Trust Association Other ►	1. 1/	H(c) Group exemption						
	art I	forganization X Corporation Trust Association Other ► Summary	L Year	of formation 1900 M	State of legal domicile AR					
	1.	Briefly describe the organization's mission or most significant activities: Agric	ultur	al Promotion						
Activíties & Governance	'	bliefly describe the organization's mission of most significant activities.	Jurcur	ur rromotror	•					
E	2	Check this box If the organization discontinued its operations or dispose	sed of more	than 25% of its net as:	sets.					
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	24					
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	24					
es	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	5					
<u>Z</u> į	6	Total number of volunteers (estimate if necessary)		6	36					
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	120,310.					
	b	Net unrelated business taxable income from Form 990-1, Pine 34 EIVED	,\	7b	<u>-29,688.</u>					
Revenue		2012		Prior Year	Current Year					
	8	Contributions and grants (Part VIII, line 1h)	ا الأن الأن	0.	0.					
Ven	9		X	50,218.	49,120.					
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 70, CDEN 117	1 -	158,754.	$\frac{1,269}{162,459}$.					
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 10c)		210,967.	212,848.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	212,040.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
v	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		99,149.	93,037.					
Jse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
Expenses	Ь	Total fundraising expenses (Part IX, column (D), line 25)	0.							
ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		109,507.	109,494.					
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		208,656.	202,531.					
	19	Revenue less expenses. Subtract line 18 from line 12		2,311.	10,317.					
Net Assets or	<u>{</u>		Beg	inning of Current Year	End of Year					
Sset	20	Total assets (Part X, line 16)	<u> </u>	425,775.	436,080.					
E S	21	Total liabilities (Part X, line 26)	_	22,467.	22,455.					
	22 art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		403,308.	413,625.					
		alties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ante and to the heet of my	knowledge and belief it is					
		thes of perjuly, i declare that i have examined this return, including accompanying scriedules at, and complete Declaration of preparer (other than officer) is based, on all information of whi		•	knowledge and belief, it is					
	,, 00110	Lary how tresdent	on properor	inds diff kilotifoligo						
Sig	ın	Signature of officer		Date						
He		GARY KAUFMAN PRESIDES	UT U	5-20	-2013					
		Type or print name and title								
		Print/Type preparer's name Preparer's signatu/e		ate Check	PTIN					
Pai		Maria K. Bean Main & Klan, CP	A L	3//3 If self-employed						
	parer	Firm's name Thomas & Thomas LLP		Firm's EIN	71-0271741					
Use	Only	Firm's address 201 E. Markham, Suite 500			01. 275 0005					
		Little Rock, AR 72201		Phone no (5	01) 375-2025					
<u>Ma</u>	y the l	RS discuss this return with the preparer shown above? (see instructions)			X Yes No					
100	201 01 1	12. 12. LHA For Pananyork Paduation Act Notice soo the sanarate instruction	nc		Earm 990 (2011)					

	1990 (2011) Conway County Farm Bureau	71-0281591	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission:		
	Agricultural Promotion		
_	Do late and the second		
2	Did the organization undertake any significant program services during the year which were not listed on		s X No
	the prior Form 990 or 990-EZ?		S LA 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?	Ye	s 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	measured by expens	es.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	rants and allocations	s to
	others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$	e \$)
-	County Farm Bureau work is general in nature, helping fa		S
	achieve educational improvements, economic opportunity,	and social	
	advancement.		
			·
4b	(Code) (Expenses \$	- \$)
		········	
4c	(Code) (Expenses \$	- S)
		- -	
4d	Other program services (Describe in Schedule O.)		
. •		١	
	(Expenses \$ including grants of \$) (Revenue \$	 	

Form 990 (2011) Conway 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)?			v
_	If "Yes," complete Schedule A	1	<u> </u>	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	 	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			Х
_	public office? If "Yes," complete Schedule C, Part I	3		Λ
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	5	x	
6	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	3		
U	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		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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	<u> </u>		
	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.	1		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments · other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		1	
	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		ļ	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			17
_	Schedule D, Parts XI, XII, and XIII	12a		X
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
	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	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		1	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		 -
	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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	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		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form 9	990 (2	2011)

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			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	ļ	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 2º If "Yes," complete Schedule I, Parts I and III	22	ļ	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		l	v
	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		1	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	l		v
	Schedule K. If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	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			
00	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	00		Х
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ <u> </u>	Λ.
21	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		x
28	of any of these persons? If "Yes," complete Schedule L, Part III	21		
20	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		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
U	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
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 more than \$25,000 in horroast contributions: If Tes, complete schedule in	25		
•	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	- 30		
•	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	<u> </u>		
-	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		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	Х	

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Form 990 (2011) Conway County Farm Bureau
Part V Statements Regarding Other IRS Filings and Tax Compliance

	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			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			ĺ
С				İ
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filled for the calendar year ending with or within the year covered by this return 2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	Х	l
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	- ALIVERTON		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3а	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
ь	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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		Х
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		·	
	were not tax deductible?	6ь		ı
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			1
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			:
е	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		
g	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		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
а	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			
1	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders		1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1	
ο-	amounts due or received from them.)	40-	1	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
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.			
D	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 13b		1	
		140		Х
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes " has it filed a Form 730 to report these payments? If "No " provide an evaluation in Schedule O	14a 14b		
0	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	170	لبيب	

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

	Check if Schedule O contains a response to any question in this Part VI				X	
Sec	tion A. Governing Body and Management			_		
				Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 2	24			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b 2	24			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship of	vith any other				
	officer, director, trustee, or key employee?		2	X	<u></u>	
3	Did the organization delegate control over management duties customarily performed by or under the	direct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?		_3	l	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990) was filed?	_4	ļ	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's asset	s?	5	ļ	X	
6	Did the organization have members or stockholders?		_6_	X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app	oint one or		,	ĺ	
	more members of the governing body?		7a	X		
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ckholders, or				
	persons other than the governing body?		7ь	X	<u> </u>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year t	y the following	İ			
а	The governing body?		8a	X		
b	Each committee with authority to act on behalf of the governing body?		8b	X		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code.)				
				Yes	No	
	Did the organization have local chapters, branches, or affiliates?		10a		<u>X</u>	
b	If "Yes," did the organization have written policies and procedures governing the activities of such char	oters, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b			
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?					
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X		
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to		12b	Х		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,	" describe		,		
40	In Schedule O how this was done		12c	X	- V	
13	Did the organization have a written whistleblower policy?		13	Х	<u>X</u>	
14 15	Did the organization have a written document retention and destruction policy?		14	^		
15	Did the process for determining compensation of the following persons include a review and approval by	y independent				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		45-		v	
	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization		15a 15b		$\frac{X}{X}$	
•	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		130			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nt with a				
	taxable entity during the year?	ii iiiii u	16a	1	X	
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate i	ts participation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization					
	exempt status with respect to such arrangements?		16b			
Sect	ion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶AR					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (S	ection 501(c)(3)s only) availab	le		
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict	ct of interest policy, a	ind finan	cıal		
	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 organiz	ation: 🕨	·		
	The Organization - 501-354-0101					
	P.O. Box 648, Morrilton, AR 72110					

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	(C) Position check more than one less person is both an 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 trustee or director	Institutional trustæe	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Gary Kaufman	0.50									
President	0.50	X		X	<u> </u>		<u> </u>	0.	0.	0.
(2) Bart Stobaugh	0.50	,,							^	_
Vice President	0.50	X		X		ļ	ļ	0.	0.	0.
(3) Randy Voss	0.50	v		l ,			ŀ	0.	^	0.
Secretary/Treasurer	0.50	X		X	-		-	0.	0.	0.
(4) Herman Brents	0.50	x	:					0.	0.	0.
Member Calduali	0.50	^						0.	0.	
(5) Harry Caldwell Member	0.50	X						0.	0.	0.
(6) Hall Calhoun	0.50	<u> </u>		 		_	_			
Member	0.50	X						0.	0.	0.
(7) Robert Carruthers	0.00					\vdash				
Member	0.50	X						0.	0.	0.
(8) Leonard Compton										
Member	0.50	Х						0.	0.	0.
(9) Don Depriest										
Member	0.50	X						0.	0.	0.
(10) Charles Gray										
Member	0.50	Х						0.	0.	0.
(11) William Gray										
Member	0.50	X						0.	0.	0.
(12) David Gregory										
Member	0.50	X						0.	0.	0.
(13) Todd Hart										•
Member	0.50	Х						0.	0.	0.
(14) Randy Hayes	0.50	.,							0	0
Member	0.50	X						0.	0.	0.
(15) Johnny Hoyt	0.50	v							0	0
Member Member	0.50	Α.		-				0.	0.	0.
(16) William Martin	0.50	$ \mathbf{v} $						0.	0.	0.
Member (17) John Maus	0.50	^					—	0.	.	
Member	0.50	Х						0.	0.	0.
ислимет.	0.50	41				Ц.			•	Farm 000 (0011)

Part VII Section A. Officers, Directo	(B)	mpi	oyee		<u>na i</u> C)	пigr	esi	1		T	(E)	
(A) Name and title	Average hours per	Position (do not check more than one box, unless person is both a officer and a director/trustee				than Is bot	h an	(D) Reportable compensation	(E) Reportable compensation	1	(F) stimate mount	
	week (describe hours for related organizations in Schedule O)	stee or director	institutional fusible	Officer		Highest compensated highest compensated children		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	or	other npensa from th ganizat nd relat janizati	ation ie tion ted
(18) Billy Mitchell Member	0.50	x						0.	0.			0.
(19) Nick Moore Member	0.50	х						0.	0.			0 .
(20) Barry Stobaugh			-									
Member (21) Robert Stobaugh	0.50	Х				ļ.—		0.	0.	 		0
Member	0.50	Х			-	_		0.	0.	<u> </u>		0.
(22) Tommy Thompson Member	0.50	x						0.	0.			0 .
(23) Steve Trafford Member	0.50	Х						0.	0.			0 .
(24) Rocky Vess Member	0.50	х						0.	0.			0.
						L						
1b Sub-total c Total from continuation sheets to P d Total (add lines 1b and 1c)	art VII, Section A					>		0.	0. 0. 0.			0.
Total number of individuals (including compensation from the organization.)		nose	liste	ed at	oove	e) wh	no re	<u> </u>		1		
											Yes	No
3 Did the organization list any former of line 1a? If "Yes," complete Schedule.			e, ke	y en	nplo	yee,	or	highest compensated en	nployee on	3		Х
4 For any individual listed on line 1a, is and related organizations greater than	•								ne organization	4		Х
5 Did any person listed on line 1a receive	ve or accrue compe	nsat	ion f	rom	any	unr			dual for services			
rendered to the organization? If "Yes, Section B. Independent Contractors	" complete Schedul	<u>e J f</u>	or su	ıch j	oers	on				5	i l	X
1 Complete this table for your five higher	•									ation	from	
the organization. Report compensation (# Name and bus	N)				<u>/itn c</u>	or w	Itnir	the organization's tax year. (B) Description of se		() Compe	C) ensatio	
Name and ous	illess address	MC	ONE	دا				Description of se	il vices	Joinpe	- Salloi	1
			·									
											~# ;	
 Total number of independent contract \$100,000 of compensation from the contract 	·	ot lir	nited	of to	thos C		ted	above) who received mo	ore than			

Statement of Revenue Part VIII (D) (B) (C) (A) Revenue Unrelated Related or Total revenue excluded from exempt function business tax under sections 512, revenue revenue 513, or 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues 1c c Fundraising events d Related organizations 1d 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1f Q Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f **Business Code** 49,120. 2 a Membership Dues 110000 49,120. Program Service Revenue f All other program service revenue 49,120. \triangleright g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,269. 1,269. other similar amounts) 4 Income from investment of tax-exempt bond proceeds \triangleright 1,234. 1,234. Royalties (ı) Real (II) Personal 39,153. 6 a Gross rents 0. **b** Less: rental expenses 39,153. c Rental income or (loss) 39,153. 39,153. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) \triangleright 8 a Gross income from fundraising events (not Other Revenue including \$ of contributions reported on line 1c). See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses þ c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 120,310. 120,310. 11 a Insurance Service Fees 524298 b Miscellaneous Income 900099 1,762. 1,762. d All other revenue 122,072. e Total. Add lines 11a-11d 120,310. 212,848. 49,120. 43,418. Total revenue. See instructions

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 response to any question in this 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						
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	82,965.	· · ·				
8	Pension plan accruals and contributions (include	_					
	section 401(k) and section 403(b) employer contributions)	3,013.	<u> </u>				
9	Other employee benefits						
10	Payroll taxes	7,059.					
11	Fees for services (non-employees):						
а	Management						
b	Legal	600	· · · · · · · · · · · · · · · · · · ·				
C	Accounting	600.					
d	Lobbying						
e	Professional fundraising services See Part IV, line 17						
f	Investment management fees						
9	Other	6,798.					
12	Advertising and promotion	19,311.					
13	Office expenses	17/311.					
14 15	Information technology						
16	Royalties Occupancy	27,297.					
17	Travel	288.					
18	Payments of travel or entertainment expenses						
	for any federal, state, or local public officials						
19	Conferences, conventions, and meetings	22,304.					
20	Interest						
21	Payments to affiliates						
22	Depreciation, depletion, and amortization	18,911.					
23	Insurance	606.					
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)	į					
	amount, list line 24e expenses on Schedule 0)						
а	Youth and Safety	12,380.					
b	Miscellaneous	999.					
C							
d	All All and an analysis						
	All other expenses Add less 1 through 24s	202,531.					
25	Total functional expenses. Add lines 1 through 24e	202,331.		 			
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 following SOP 98-2 (ASC 958-720)			Ì			

Part X **Balance Sheet** (A) Beginning of year End of year 1 Cash - non-interest-bearing 1 2 243,294. 272,336. 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 Assets Notes and loans receivable, net 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 459,716. basis. Complete Part VI of Schedule D 10a 295,982. 182,471. 163,734. b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 10. 15 425,775. 436,080. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 1,605. Accounts payable and accrued expenses 17 18 Grants payable 18 19 20,862. 20,527. Deferred revenue 19 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 of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 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 Schedule D 25 Total liabilities. Add lines 17 through 25 22,467. 22,455. 26 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 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. 30 Capital stock or trust principal, or current funds 0. 30 Paid-in or capital surplus, or land, building, or equipment fund 31 0. 31 403,308. 413,625. 32 Retained earnings, endowment, accumulated income, or other funds 32 403,308. 413,625. 33 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 436,080. 34

Form **990** (2011)

orm	990 (2011)	Conway County Farm Bureau	71-	0281591	Pag	ge 12
1.1		onciliation of Net Assets			-	
	Chec	s if Schedule O contains a response to any question in this Part XI				
1	Total reven	ue (must equal Part VIII, column (A), line 12)	1			48.
2	Total exper	ses (must equal Part IX, column (A), line 25)	2	20:	2,5	31.
3	Revenue le	ss expenses. Subtract line 2 from line 1	3	1	0,3	17.
4	Net assets	or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	40	3,3	08.
5	Other chan	ges 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	41	3,6	25.
Par		ncial Statements and Reporting				
		c 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				
		zation changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a		ganization's financial statements compiled or reviewed by an independent accountant?		2a		X
b		ganization's financial statements audited by an independent accountant?		2b		X
c	If "Yes" to I	ne 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
		ompilation of its financial statements and selection of an independent accountant?		2c		
		zation changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
d	-	ne 2a or 2b, check a box below to indicate whether the financial statements for the year were issue				
	separate ba	sis, consolidated basis, or both:				
		ate basis Consolidated basis Both consolidated and separate basis				
За		of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dıt i		
		B Circular A-133?	-	3a		X
b	If "Yes," did	the organization undergo the required audit or audits? If the organization did not undergo the requ	iired aud	dit		
		splain why in Schedule O and describe any steps taken to undergo such audits.		3b		<u></u>

Form **990** (2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► See separate instructions.

(c) and section 527 **2011**

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Nan	me of organization	Empl	loyer identification number
	Conway County Farm Bureau	1	71-0281591
Pa	art I-A Complete if the organization is exempt under section 501(c) or is a section	on 527 o	rganization.
2	Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political expenditures Volunteer hours	▶ \$	
Pa	art I-B Complete if the organization is exempt under section 501(c)(3).		
1	Enter the amount of any excise tax incurred by the organization under section 4955	▶\$	
2	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
	a Was a correction made?		Yes No
b	b If "Yes," describe in Part IV.		
Pa	art I-C Complete if the organization is exempt under section 501(c), except sect	ion 501(c)(3).
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶\$	
2	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	▶\$	
4	Did the filing organization file Form 1120-POL for this year?		Yes No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. All contributions received that were promptly and directly delivered to a separate political organization, such a political action committee (PAC). If additional space is needed, provide information in Part IV.	so enter th	ne amount of political
	(a) Name (b) Address (c) EIN (d) Amount p filing organit funds. If none	zation'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

Schedule C (Form 990 or 990-EZ) 2011	Conwa	y Cour	ty Farm Bu	reau	71-	0281591 Page 2
Part II-A Complete if the or	rganizati	on is exe	mpt under secti	on 501(c)(3) and fil		
(election under se	ction 50	1(h)).				
A Check ▶ ☐ If the filing organiz	zation belor	gs to an aff	iliated group (and list	in Part IV each affiliated	group member's na	me, address, EIN,
expenses, and sh	are of exce	ss lobbying	expenditures)			
B Check If the filing organize	zation chec	ked box A a	nd "limited control" p	rovisions apply.	· · · · · · · · · · · · · · · · · · ·	
Lin	nits on Lob	bying Expe	nditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expe	nditures" n	neans amoi	unts paid or incurred	i.)	totals	totals
1a Total lobbying expenditures to in	fluence put	olic opinion	(grass roots lobbying)			
b Total lobbying expenditures to in	fluence a le	gislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add	l lines 1a an	d 1b)				
d Other exempt purpose expenditu	ıres					
e Total exempt purpose expenditu	res (add line	es 1c and 1c	d)			
f Lobbying nontaxable amount. Er				oth columns.		
If the amount on line 1e, column (a)	or (b) is:	The lob	bying nontaxable an	nount is:		
Not over \$500,000		20% of	the amount on line 1	e.		
Over \$500,000 but not over \$1,0	00,000	\$100,00	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1	,500,000	\$175.00	00 plus 10% of the ex	cess over \$1,000,000		
Over \$1,500,000 but not over \$1				ess over \$1,500,000.		
Over \$17,000,000		\$1,000,				
				· ··		
g Grassroots nontaxable amount (e	enter 25% o	of line 1f)				
h Subtract line 1g from line 1a If ze		•				
i Subtract line 1f from line 1c If ze	•					
j If there is an amount other than a	•		line 1), did the organi	zation file Form 4720		
reporting section 4911 tax for thi			o ti, olo tilo olgani.			Yes No
		4-Year Ave	eraging Period Unde	r Section 501(h)		
(Some organ	izations the			on do not have to comp	lete all of the five	
c	olumns be	low. See th	e instructions for lin	es 2a through 2f on pa	ge 4.)	
	Lobi	oying Expe	nditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
On Labour and the Lite						
2a Lobbying nontaxable amount	 			-	·····	
b Lobbying ceiling amount	1					
(150% of line 2a, column(e))	 					
Track to the						
c Total lobbying expenditures	+					
d Grassroots nontaxable amount						
e Grassroots ceiling amount		············				
(150% of line 2d, column (e))			1			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
f Grassroots lobbying expenditures	s					

(a)

No

(b)

Amount

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description

of the lobbying activity.

Schedule C (Form 990 or 990 EZ) 2011 Conway County Farm Bureau 71-028159 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)).

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:				
	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
-	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?	-			
	Grants to other organizations for lobbying purposes?				
_	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				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912		}		
	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? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	on 501(a)(5)	07.50	otion	<u></u>
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	OH 50 1 (C)(S)	, or se		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	<u>X</u>	
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? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).		3		X
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	l "No" OR (I		III-A, lin	e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures).	cai			
_	expenses for which the section 527(f) tax was paid).		20		
	Current year		2a 2b		
	Carryover from last year		2c	.	
_	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	· - ·	
3	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	case	-		
4	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?	political	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; Poart for any additional information.	art II-A; and Pa	irt II-B, lin	e 1. Also, o	omplete:

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

Conway County Farm Bureau

Employer identification number 71-0281591

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	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?	doi:10. do:100.; 0. 10. di.; 0.110. po; poso oo.	Yes No
Pa	t I Conservation Easements. Complete if the org	panization answered "Yes" to Form 990. Part	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		ically important land area
	Protection of natural habitat	Preservation of a certifie	
	Preservation of open space	- I soorvation of a sorting	
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form of	a conservation easement on the last
_	day of the tax year.		a condentation casemont on the last
	day of the tax your.		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	ucture included in (a)	2c
	Number of conservation easements included in (c) acquired	• •	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased extinguished or terminated by the or	<u> </u>
•	year	based, extinguished, or terminated by the or	gainzation during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements i	- · · · · · · · · · · · · · · · · · · ·	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)?	to ballery the requirements of boolies, require	Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expense sta	 ···
•	include, if applicable, the text of the footnote to the organization		
	conservation easements.	non o imanola, otatomo, no trat coconece uno	organization o accounting to
Pa	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or Other	er Similar Assets.
	Complete if the organization answered "Yes" to Form	-	
1a	If the organization elected, as permitted under SFAS 116 (AS		t and balance sheet works of art.
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		d balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	, , , , , , , , , , , , , , , , , , ,	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treations	asures, or other similar assets for financial da	
_	the following amounts required to be reported under SFAS 1		, p. 01100
а	Revenues included in Form 990, Part VIII, line 1	to vice out rotating to those items.	▶ \$
	Assets included in Form 990, Part X		► \$ ► \$
~	, leading in a dring of the transfer of the tr		· •

		County Far							<u>81591</u>	
Pa	rt III Organizations Maintaining C	ollections of A	rt, His	storical T	reasures,	or Other	Simila	r Asse	ts (continu	ued)
3	Using the organization's acquisition, accessi	on, and other recor	ds, che	ck any of the	e following the	at are a sig	nificant us	se of its	collection i	items
	(check all that apply):									
а	Public exhibition		d \square	Loan or ex	change progr	ams				
b	Scholarly research		e 🗀	Other						
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	un how t	they further	the organizat	ion's exem	pt purpos	e in Par	t XIV.	
5	During the year, did the organization solicit o									
	to be sold to raise funds rather than to be ma								Yes	☐ No
Pa	Escrow and Custodial Arran reported an amount on Form 990, Par	gements. Comp				"Yes" to F	orm 990,	Part IV,	line 9, or	
12	Is the organization an agent, trustee, custodi		diani fai	r contributio	no or other or	noto not in				
10	on Form 990, Part X?	an or other interme	clary loi	CONTINUUTIO	ns or other as	ssets not ir	iciuaea		Yes	□ No
_			. 11	Aulala					」 Yes	L NO
D	If "Yes," explain the arrangement in Part XIV	and complete the t	ollowing	table:						
	Danis and Incl.							 	Amount	
Ç	Beginning balance						1c			
a	Additions during the year						1d			
e	Distributions during the year						1e			
1	Ending balance						1f		7	
	Did the organization include an amount on Fo		e 21?					L	Yes	L No
	if "Yes," explain the arrangement in Part XIV.				200 D 1	0/1 40		•		
Pa	TV Endowment Funds. Complete if				T					
		(a) Current year	(b) I	Prior year	(c) Two yea	rs back (d) Three yea	ars back	(e) Four ye	ears back
1a	Beginning of year balance		ļ						***************************************	***************************************
b	Contributions		 -		<u> </u>					
C	Net investment earnings, gains, and losses		ļ		 					**********
d	Grants or scholarships		ļ		ļ					
е	Other expenditures for facilities									
	and programs		ļ <u> </u>							
f	Administrative expenses		<u> </u>		<u> </u>					
9	End of year balance		L		<u> </u>					
2	Provide the estimated percentage of the curr	ent year end baland	ce (line 1	1g, column (a)) held as.					
а	Board designated or quasi-endowment		%							
b	Permanent endowment ▶	%								
C	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should equal 100%.									
3a	Are there endowment funds not in the posses	ssion of the organiz	ation th	at are held a	and administe	red for the	organizat	tion		
	by.								Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	listed as required of	on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Land, Buildings, and Equipm	ent. See Form 990	0, Part X	(, line 10.						
	Description of property	(a) Cost or o	other	(b) Cos	t or other	(c) Acc	umulated		(d) Book v	alue
		basis (investi	ment)	basis	(other)	depre	eciation			
1a	Land			1	4,988.				14,	,988.
b	Buildings			29	6,482.	18	34,46	6.	112	016.
С	Leasehold improvements									
d	Equipment			6	6,935.	6	3,14	1.		794.
е	Other				311.		18,37		32,	936.
	Add lines 1a through 1e (Column (d) must ed	gual Form 990. Part	X. colui	mn (B), line	10(c).)				163	734.

Schedule D (Form 990) 2011

(a) Description of security or category (including name of security)	(b) Book value		od of valuation: of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)	 		
(D)			
(E)			
(F) (G)			
(H)			
(1)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12) ▶		······································	······································
Part VIII Investments - Program Related.			
(a) Description of investment type	(b) Book value		od of valuation: of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ▶ Part IX Other Assets. See Form 990, Part X, II			
	a) Description		(b) Book value
(1)		······································	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
「otal. (Column (b) must equal Form 990, Part X, col (B) I			>
Part X Other Liabilities. See Form 990, Part			
(a) Description of liability	(b)	Book value	
(1) Federal income taxes			
(2)			,
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(40)	1		
(10)			

Sche	dule D (Form 990) 2011 Conway County Farm Bureau			71-0	281591 _F	Page 4
Pa	rt 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 and	19	10			
Pa	t XII Reconciliation of Revenue per Audited Financial Statemer	nts With Reve	nue 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:					
а	Net unrealized gains on investments	2a				
ь	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				
ь	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 Stateme	nts With Expe	nses per	<u>r Returr</u>	<u> </u>	
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		1		
а	Donated services and use of facilities	2a		4		
b	Prior year adjustments	2b		4		
C	Other losses	2c		4		
d	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 IX, line 25, but not on line 1:	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-		
	Other (Describe in Part XIV)	4b [,	-		
_	Add lines 4a and 4b			4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	·····		5		
	t XIV Supplemental Information	base de serie de D		(h 0'	Dod When t	
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,					Part
X, line	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comple	ete this part to pro	vide any ad	iditional in	tormation.	
			····			
		· · · · · · · · · · · · · · · · · · ·				

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury

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

Name of the organization

Conway County Farm Bureau

Employer identification number 71-0281591

Form 990, Part VI, Section A, line 2: Barry Stobaugh and Robert Stobaugh					
- family relationship					
Barry Stobaugh, Robert Stobaugh, and Bart Stobaugh - business relationship					
Robert Carruthers and John Maus - business relationship					
Form 990, Part VI, Section A, line 6: The organization is a mutual					
benefit organization with members.					
Form 990, Part VI, Section A, line 7a: The board is elected annually by					
the general membership. Officers are elected by the board.					
Form 990, Part VI, Section A, line 7b: Policy resolutions are subject to					
member approval.					
Form 990, Part VI, Section B, line 11: Board President reviews and signs					
the 990. The county secretary then reviews and mails it.					
Form 990, Part VI, Section B, Line 12c: Compliance issues are reported at					
board meetings.					
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.					