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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

		ne Treasury e Service ►The	e organization may ha	ve to use a copy of	this return to sa	atisfy state	reporting r	requirements	ln:	spection
A	For the	2012 calendar year,	or tax year beginnir	g		, and	ending			
<u>B</u> (Check if	pplicable C Name of c	organization ST LA	NDRY PARISH F	ARM BUREA	AU, INC		D Employer	dentification nu	ımber
	Address	hange Doing Bus	siness As				·	72-0501811		
	Name ch	inge Number a	and street (or P O box if n	nail is not delivered to	street address)	Room/suite		E Telephone	number	
	nitial reti	m POBOX	95004				[(337) 948- <u>8</u> 2	259	
П	erminat	d City, town	or post office, state, and	ZIP code						
	Amende	return BATON R	OUGE		LA	70895	-9004	G Gross receip	pts \$	471,58
	Application	n pending F Name and	d address of principal offic	er			H(a) Is th	nis a group returi	n for affiliates?	Yes X N
							H(b) Are	all affiliates incli	uded?	Yes N
1 Ta	ax-exem	ot status 501(c	c)(3) X 501(c) (5) ((insert no)	4947(a)(1)	or 527	If "N	No," attach a list	(see instruction	s)
	/ebsite		3,(3) (3) (, , , , , , , , , , , , , , , , , , , ,				up exemption nu	ımbar 🕨	
			1							
			oration Tost	T	her ▶	LY	ear of forma	tion 1954	M State of leg	jal domicile L
Р	art	Summary	heu							
	1	•	e organization's mis	100	ificant activiti	es <u>FO</u>	RMED FOR	R THE PROM	OTION AND F	PROTECTION
•	ĺ	OF AGRICULTUR	E	-g-2013 Ö						
30				S						
Activities & Governance	1		- OGDE							
300	2	Check this box ▶		bridiscontinued						
~	3		nembers of the gov						3	<u>1</u>
ties	4	•	ndent voting membe	•			b)		4	1
ţ.	5		dividuals employed	•	2012 (Part V,	line 2a)	•		5	
¥	6		lunteers (estimate i					· ·	6	1
	7a		siness revenue fron					<u> </u>	7a	248,19
	b	Net unrelated busi	ness taxable incom	e from Form 990-	-1, line 34				7b	80,81
		0		- 46)				Prior Year		urrent Year
e	8		grants (Part VIII, lin				 	172	0	49,92
Revenue	9		evenue (Part VIII, lir				-	173,:		171,78
å	10		e (Part VIII, column					-138,		83
	11 12	•	rt VIII, column (A), I lines 8 through 11 (m			-		264, 299,		230,71 453,24
	13		amounts paid (Parl			<u> </u>	 	255,	0	400,24
	14		for members (Part		•			2	151	2,08
	15	•	ensation, employee b		-			129,		142,34
ses	16a		aising fees (Part IX,			0 10,	-	120,	0	172,07
Expenses	b		xpenses (Part IX, c	, , ,	•		0			
Ä	17	-	art IX, column (A),					223,	973	276,67
	18		dd lines 13-17 (mus					355,		421,10
	19	•	enses Subtract line	•			<u> </u>	-56.		32,14
or Ces		· · · · · · · · · · · · · · · · · · ·					Beginni	ng of Current Y	ear E	nd of Year
Net Assets or Fund Balances	20	Total assets (Part 2	X, line 16)					1,113,4	403	962,03
t As	21	Total liabilities (Pai	rt X, line 26)					492,	325	308,71
N P	22	Net assets or fund	balances. Subtract	line 21 from line	20	<u> </u>		621,	078	653,32
Pa	rt II	Signature Bl	lock							
			at I have examined this re							
ano b	eller, it i	true, correct, and compl	ete Reclaration of prepar	er (other than officer)	is based on all in	prmation of v	vnich prepar	er has any know	vledge	
Sig	n	- Contifoz	POPUTCOM	nulter	1/12 14216	PIL				
Her	е	Signature of c		es Pal	Vahalla			Date	111201	12
		7			<u>evijav</u>			(e illian	2
		Print/Type prepare	name and title	Preparer's sig	nature ·		Date		P	TIN
Paid	d	Find Type prepare	a 3 Hallic	/ / A	. 1. M	60	را سر		eck 🔲 if	1114
	parer	DEBORAH BIS	CHOFF	IN CLEUTON	MIKNAC				f-employed	
	Only	Firm's name	LOUISIANA FARM	BUREAU FEDERA	TION, INC	100		Firm's EIN	72-0491096	
USE	· Oilly	Firm's address ▶						Phone no	225-922-623	7
May	the I		rn with the preparer			ne)			Γv	Yes No
						131	<u> </u>	· · · ·	· · <u> </u>	
For I	Paperv	ork Reduction Act N	lotice, see the separ	ate instructions.						Form 990 (2012

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

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

20a

20b

Par	t IV: Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 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
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b 24c		
	to defease any tax-exempt bonds?	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	25b		
26	990-EZ? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		100	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
С	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? <i>If</i> "Yes," <i>complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</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? <i>If "Yes," complete Schedule R, Part I</i>	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
36	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b 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? <i>If "Yes," complete Schedule R, Part</i>	27		х
38	VI	37	x	

Form 9	990 (2012) ST LANDRY PARISH FARM BUREAU, INC	72-0501811	P	age :
Pai	t 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	2	J. 2.	(2)
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		7	F
С			X	
0-	gaming (gambling) winnings to prize winners?	1c	3.4	.16
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a		-	Eri/A
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u>X</u>	13. 12
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	44.54		ř
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> X</u>	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authorit	у		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	. 4a	0	X
b	If "Yes," enter the name of the foreign country: ▶		然	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Account	nts 📆		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. <u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Х
6a	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 as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		2112	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			17
_	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		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	• • • • • • • • • • • • • • • • • • • •		
•	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		SHEET.	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		24612	METER!
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76		
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require			
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 109			
_	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	30-C7. 711	*****	
8	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1-0-		
		250		
_	organization, have excess business holdings at any time during the year?	8		EN.
9	Sponsoring organizations maintaining donor advised funds.		iliato <u>gi</u>	题
a	Did the organization make any taxable distributions under section 4966?	<u>9a</u>		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	Historia de la companya della companya della companya de la companya de la companya della compan	and St.
10	Section 501(c)(7) organizations. Enter.			
a	Initiation fees and capital contributions included on Part VIII, line 12		0.00	
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		37	
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 . 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	. 13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			. 1
	the organization is licensed to issue qualified health plans	ē <u>€</u> . **		o e e tr
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

•					
Form 990 (2012)	ST LANDRY PARISH FARM BUREAU, INC		72-0501811	Pa	ge
Part Vi	Governance, Management, and Disclosure For each "Yes" response to lines 2 this response to line 8a, 8b, or 10b below, describe the circumstances, processes, or check if Schedule O contains a response to any question in this Part VI			uctic [ns X
Section A.	Soverning Body and Management				
			Y	es	No
	ne number of voting members of the governing body at the end of the tax year are material differences in voting rights among members of the governing body, or	1a	19	1.	•

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 19			
	If there are material differences in voting rights among members of the governing body, or		1 :	1.	·
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.		-,		4 5
b	Enter the number of voting members included in line 1a, above, who are independent	1b 19	,	1.4	1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relati	onship with	1.	1.	[e-]
_	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or unc	er the direct			
•	supervision of officers, directors, or trustees, or key employees to a management company or c		3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w		4		X
5	Did the organization become aware during the year of a significant diversion of the organization		5		Х
6	Did the organization have members or stockholders?		6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect	or appoint			
	one or more members of the governing body?		7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) memb				
-	stockholders, or persons other than the governing body?		7b		х
8	Did the organization contemporaneously document the meetings held or written actions underta	iken durina	1	残終	海流
•	the year by the following:	g	300	Co.	
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be	e reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule (9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the I	nternal Revenue C	ode.)		
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of sur	· · · · · · · · · · · · · · · · · · ·			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	ore filing the form?.	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				1
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	· · · · · · · · · · · · · · · · · · ·	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could		12b	ļ	Х
C	Did the organization regularly and consistently monitor and enforce compliance with the policy?	If "Yes,"	١		
	describe in Schedule O how this was done		12c		X
13	Did the organization have a written whistleblower policy?		13		X
14	Did the organization have a written document retention and destruction policy?		14	240000	X
15	Did the process for determining compensation of the following persons include a review and ap				ne / 1
_	independent persons, comparability data, and contemporaneous substantiation of the deliberati	on and decision?	450	200	
a	The organization's CEO, Executive Director, or top management official		15a 15b		<u> </u>
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	• •	2432	Philips.	أسالعات
40-	·		N.		
Iba	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrawith a taxable entity during the year?	angement	16a	3823	X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to ev	 aluato its		M. Berry	
b	participation in joint venture arrangements under applicable federal tax law, and take steps to sa		*		
	the organization's exempt status with respect to such arrangements?	-	16b	LAST.	24.05
Sect	ion C. Disclosure	<u> </u>	100		
17	List the states with which a copy of this Form 990 is required to be filed				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	990-T (Section 501(d	c)(3)s	only)	
	available for public inspection Indicate how you made these available Check all that apply	,	,,-,-		
		plain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documen	•			
	policy, and financial statements available to the public during the tax year.				
20	State the name, physical address, and telephone number of the person who possesses the boo	ks and records of the)		
	CADALLTIIDODEALIV	(227) 040 02	150		

SARAH THIBODEAUX 5265 I-49 SOUTH SERVICE ROAD, OPELOUSAS, LA 70570-0772 organization:

Part Vii Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, i	unles	Pos eck s pe	rson irecti	n of structure Highest compensated to structure Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) CARLOS POLOTZOLA PRESIDENT	1.85			Х						
(2) FRED LAVERGNE VICE-PRESIDENT	1.15			Х						
(3) LEO FRANCHEBOIS SECRETARY	1 15			х						-
(4) CECIL CORBELLO TREASURER	1 38			Х						
(5) JOEY OLIVIER BOARD MEMBER	1 15									
(6) CHARLES CANNATELLA BOARD MEMBER	0 92			•				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(7) LARRY LAFLEUR BOARD MEMBER	0.92									
(8) DALE BERTRAND BOARD MEMBER	0 92									
(9) DANIEL LYONS BOARD MEMBER	0 92									
(10) KEITH NORMAND BOARD MEMBER	0 92									
(11) WINN PLATTSMIER BOARD MEMBER	0 92									
(12) IKE BOUDREAUX BOARD MEMBER	0 92									
(13) MARK REINERS BOARD MEMBER	0 92									
(14) TOM RABALAIS BOARD MEMBER	0.92							···		

72-050	1811	Page 8
ees (co	ntınued)	

P	art VII Section A. Officers, Directors, Tr	rustees, Key Er	nplo	yee	s, a	nd	High	est	Compensated	Employe	es (co	ntınue	(d)	
	(A) Name and title	hours per officer and a director/trustee) co				(D) Reportable compensation	(E) Reporta compens	able sation	an	(F) timated nount of				
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from rela organiza (W-2/1099	tions	com fro orga and	other pensation om the anization direlated inization	1
	BARRETT LYONS	0 92												_
	RD MEMBER JOE HIDALGO	0.92		_		_								
	JOE HIDALGO RD MEMBER	0.92	ĺ											
(17)	KYLE DOUCET	0 92												
	RD MEMBER	0.92					\longrightarrow	_						
JUO). BOA	MIKE WARTELL RD MEMBER	0.92												
	STEPHEN QUEBEDEAUX	0.92												
	RD MEMBER			_										
320)														
(21)					-									
(22)												<u> </u>		—
				_										
(23)			1								Ī			
(24)												·		
(25)										-				
1b	Sub-total							•	0		0			0
C	Total from continuation sheets to Part VII, \$								0		0			0
<u>d</u>	Total (add lines 1b and 1c). Total number of individuals (including but not line).								L					
	reportable compensation from the organization					<i>.</i>								
3	Did the organization list any former officer, dir						, or h	igh	est compensate	d			, E	No :
ā	employee on line 1a? If "Yes," complete Sche										. }	3		<u>X</u>
4	For any individual listed on line 1a, is the sum the organization and related organizations gre													. المالية
	ındıvidual			٠.							. [4	7	X
5	Did any person listed on line 1a receive or acc										ľ	<u></u> :		
Sec	for services rendered to the organization? If ") tion B. Independent Contractors	Yes," complete S	Sche	dule	Jto	or s	uch p	ers	son <u>.</u>	: : : :		5		<u>X</u> _
1	Complete this table for your five highest comp compensation from the organization. Report c year.	•										n's tax		
	(A) Name and business addi	ress							(B) Description of ser	vices	С	(C) ompens		
									_					0
									 -					0
														0
			4			_						7,4	4 4	, O
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the	-	iited	to th	1056	∌ IIS	ted a	DOV	re) wno received	J		R. Wales	r, sarr	, ,

Form 990 (2012)	ST LANDRY PARISH FARM BUREAU, INC
Part VIII	Statement of Revenue

	Check if Schedule O contains a response to any question in this Part VIII							
,					(A)	(B)	(C)	(D)
				,, ,	Total revenue	Related or	Unrelated	Revenue excluded from
}	`- · ·					exempt function	business revenue	tax under sections
í	•					revenue		512, 513, or 514
	1a	Federated campaigns .	1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1t				1	2 2, ,
3ra			10		1,2,5		* , , , , , , , , , , , , , , , , , , ,	3 '
Contributions, Gifts, Grants and Other Similar Amounts		Fundraising events					² y	2
Gif	d	Related organizations	. <u>1c</u>					
ns,	е	Government grants (contribution		9 0		· · · · · · · · · · · · · · · · · · ·		
er S	f	All other contributions, gifts, grain						
5 원		similar amounts not included ab-	ove . 11	0	***			
ont	g	Noncash contributions included in li	nes 1a-1f \$	0			المراد أست والمراد المراد المر	
O 8	h	Total. Add lines 1a-1f			49,923			ا <u>م در</u> المراقعة الم
				Business Code		1.	- 7	
ň	2a	MEMBERSHIP DUES		110000	167,019	167,019		
eve		EXP REIMB & SEASONAL SPE	CIALTIES	110000	4,762	4,762		
e R	b	EXP REIMB & SEASONAL SPE	CIALTIES	110000	7,702	7,702	·	
Ş	C				0			
Sei	d				0			
Program Service Revenue	е			<u> </u>	0			
ogr	f	All other program service revenu	ле		0			1 (g. 4 2)
4	g				171,781	1		· · · · · · · · · · · · · · · · · · ·
	3	Investment income (including di	vidends, ıntere	st, and				
		other similar amounts)			1,683			1,683
	4	Income from investment of tax-e	xempt bond pr	oceeds . ►	0			
	5	Royalties			0			
		rioyanico	(ı) Real	(II) Personal	\$855 E. S. S.	70 t ", , , , , , , , , , , , , , , , , ,	ल्हिन्द्रक <i>स</i> र्व स्ट	(1) 12 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	-	Cuana manta		· · · · · · · · · · · · · · · · · · ·			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	松沙东 132-14
	6a	Gross rents						
	b	Less rental expenses			性物品的创			
	С	Rental income or (loss)		0 0	State of the state of			التسكنين المستنا
	d	Net rental income or (loss) .		. •	0	Control and	A + 200 - 10 - 2	- W 27.00 M
	7a	Gross amount from sales of	(ı) Securities	(II) Other	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	letter and the		TO THE STATE OF
		assets other than inventory.		0 0	hand Expression of the second			
	b	Less, cost or other basis						
		and sales expenses	1	0 850		Control of the		
	С	Gain or (loss)		0 -850				
	d	Net gain or (loss)		>	-850			
		riot gain or (loco).			1, 70 10 10 10 10		1	36 3 23
9	92	Gross income from fundraising			Section 1			
2	Va	events (not including \$	0		Like Total	, , , , , , , , , , , , , , , , , , , ,		
Š			4		数约 元			
쮼		of contributions reported on line			The same of the same of			
Other Revenue		See Part IV, line 18					emp.	14 1 Sun 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
チ	b		b			Physical Company	المنتشنست أما	افت فك الخدما
9	С	Net income or (loss) from fundra	_	<u> </u>	-17,483			1 24 74
	9a	Gross income from gaming activ			The state of	Water St.		[] + = \(\frac{1}{2} \frac{1}
		See Part IV, line 19	a	0		177 电流线线		Property (
	b	Less direct expenses	b	0	1000	13 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
	С	Net income or (loss) from gamin			0			
		Gross sales of inventory, less	J		2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/	2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2		
			а	n				
	h		b					
	b	Net income or (loss) from sales			0	<u> </u>		استنشست نتسا
	С		or inventory	1 0			4 2 10	* (58/ W) 1 1 1 1 1 W
		Miscellaneous Revenue		Business Code	240.400	- Landense	41 14 15	المستنشد المسال
	11a	INSURANCE SERVICE FEES		524298	248,193		248,193	
	b				0			
	С				0		<u> </u>	
	d	All other revenue			0			
	е	Total. Add lines 11a-11d		▶	248,193		, , , , , , , , , , , , , , , ,	
	12	Total revenue. See instructions	<u> </u>	<u> </u>	453,247	171,781	248,193	1,683

Part IX Statement of Functional Expen	ses
---------------------------------------	-----

Secti	on 501(c)(3) and 501(c)(4) organizations must complete a	all columns All othe	r organızations mu	st complete columr	n (A)
	Check if Schedule O contains a response to any	question in this Pa	nrt 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	0			
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members	2,088		3.	·: ', ' . ' . ' '' '' ''
5	Compensation of current officers, directors,	· · · · · · · · · · · · · · · · · · ·			
-	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	131,116			
8	Pension plan accruals and contributions (include	101,110			
U	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	127			
10		11,100			
11	Payroll taxes	11,100			
	Fees for services (non-employees)	0			
a	Management				
b	Legal	1,140			
C	Accounting	1,140			
d	Lobbying			The state of the s	
e	Professional fundraising services. See Part IV, line 17		(A) "高级维度"。(C)	18 Add 25 1. 2007 1185	
Ť	Investment management fees		· · · · · · · · · · · · · · · · · · ·		
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	10,250			
13	Office expenses	24,743			
14	Information technology	0			
15	Royalties	0			<u></u>
16	Occupancy	23,430			
17	Travel	450			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	100,601			
20	Interest	0			· — — — — — — — — — — — — — — — — — —
21	Payments to affiliates	74,214			
22	Depreciation, depletion, and amortization	13,568	0	0	0
23	Insurance	279			
24	Other expenses. Itemize expenses not covered				But the Contraction
	above (List miscellaneous expenses in line 24e. If	W. The	《新港版》 。在	1 - 14 - 15 - 15	
	line 24e amount exceeds 10% of line 25, column	100	1.75		The state of the s
	(A) amount, list line 24e expenses on Schedule O.)	the standard of the	of streets and the second	م في المنظم المن	1343 2 2
а	MAINTENANCE	11,741			
b	UNRELATED BUSINESS INCOME TAXES	16,255			
С	***************************************	0			
d		0			
е	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	421,102	0	0	0
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

		Check if Schedule O contains a response to any question in this Part X			
	··· -		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	207,453	1	145,941
	2	Savings and temporary cash investments	243,090	2	162,560
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	5,154	4	72
	5	Loans and other receivables from current and former officers, directors,	, .	, -	
		trustees, key employees, and highest compensated employees.		· · ·	<u>, , , , , , , , , , , , , , , , , , , </u>
		Complete Part II of Schedule L		5	
	6	Loans and other 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			[T]
ets		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	0	7	0
4	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	50,280	9	48,894
	10a	, , , , , , , , , , , , , , , , , , , ,		. 4:	
		other basis Complete Part VI of Schedule D 10a 638,279			
	b	Less accumulated depreciation 10b 33,713	607,426		604,566
	11	Investments—publicly traded securities	0		0
	12	Investments—other securities. See Part IV, line 11	0		0
	13	Investments—program-related See Part IV, line 11	0		0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11 .	. 0	_	0
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	1,113,403		962,033
	17	Accounts payable and accrued expenses	806		3,302
	18	Grants payable		18	
	19	Deferred revenue	109,360		106,000
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors,		`	
≝		trustees, key employees, highest compensated employees, and		· ·,	
Liabilities		disqualified persons. Complete Part II of Schedule L		22	
=	23	Secured mortgages and notes payable to unrelated third parties	382,159		199,408
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	0		0
	26	Total liabilities. Add lines 17 through 25	492,325	26	308,710
		Organizations that follow SFAS 117 (ASC 958), check here▶ and	人名 经 医流流	13 5	
ő		complete lines 27 through 29, and lines 33 and 34.			mad a a s
aŭ	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
٦	29	Permanently restricted net assets		29	
표		Organizations that do not follow SFAS 117 (ASC958), check here		, ,	
0		complete lines 30 through 34.			Contract to the second
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund.		31	-
ţ	32	Retained earnings, endowment, accumulated income, or other funds .	616,078		653,323
Š	33	Total net assets or fund balances	616,078		653,323
	34	Total liabilities and net assets/fund balances .	1,108,403	-	962,033
	<u> </u>	, which is a second and the second a	***************************************		·

Form !	990 (2012) ST LANDRY PARISH FARM BUREAU, INC	77	2-0501811	Pag	ge 12
Part	XI Reconciliation of Net Assets		 		
	Check if Schedule O contains a response to any question in this Part XI			1	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		453	3,247
2	Total expenses (must equal Part IX, column (A), line 25)	2		421	1,102
3	Revenue less expenses Subtract line 2 from line 1	3		32	2,145
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		616	3,078
5	Net unrealized gains (losses) on investments	5		5	5,100
6	Donated services and use of facilities .	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	1 1			
	column (B))	10		653	3,323
<u>Part</u>	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	•	<u> </u>		
				Yes	No
1	Accounting method used to prepare the Form 990: CashX Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.			ME	a.
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		***	4	# 7
	reviewed on a separate basis, consolidated basis, or both		1		
	Separate basis Consolidated basis Both consolidated and separate basis				****
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	t of	3.50	8	
·	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain i				(A)
	Schedule O			79	2
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		أهلان	u-y	لسمعانت
	the Single Audit Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	;			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b		ĺ
			Form	990	(2012)

SCHEDULE C (Form 990 or 99,0-EZ)

Political Campaign and Lobbying Activities

Open to Public Inspection

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of organization

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Attach to Form 990 or Form 990-EZ. ▶ Complete if the organization is described below. See separate instructions.

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

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

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

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

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

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

ST	LANDRY PARISH FARM I	BUREAU, INC			72-0501811
		the organization is exempt und	er section 501	c) or is a section 527	organization.
1	•	the organization's direct and indirect			•
2	Political expenditures .				\$
3	Volunteer hours	• • • • • • • • • • • • • • • • • • • •			
Pa		he organization is exempt und			
1	Enter the amount of any	excise tax incurred by the organizat	ion under section	4955 ▶	\$
2	_	excise tax incurred by organization	-	section 4955 🕨	\$
3	If the organization incurr	ed a section 4955 tax, did it file Form	n 4720 for this yea	ar?	Tyes No
4a	Was a correction made?	·			Yes No
b	If "Yes," describe in Part				
Pa		he organization is exempt und			1(c)(3).
1		y expended by the filing organization			
					\$
2		filing organization's funds contribute			
_	•	unction activities			5
3	•	penditures. Add lines 1 and 2. Enter			
					» <u></u>
4		n file Form 1120-POL for this year?			Yes No
5		ses and employer identification num ents. For each organization listed, e			
		ontributions received that were prom			
		d fund or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	, ,			filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
			;		political organization If
					none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
		1		i	1

ST LANDRY PARISH FARM BUREAU, INC Schedule C·(Form 99 φ 0 990-EZ) 2012

Ρ	art II-A Complete if the organization under section 501(h)).	ation is exempt	under section 5	01(c)(3) and filed	ł Form 5768 (elec	tion
A	Check ▶ if the filing organization					p member's
	name, address, EIN, e					
В	Check ▶ if the filing organization	n checked box A	and "limited con	trol" provisions ap	ply.	
		obbying Expend			(a) Filing organization's totals	(b) Affiliated group totals
	(The term "expenditures				Organization o totalo	
1a	Total lobbying expenditures to influence	e public opinion (grass roots lobbyin	g)		0
b	Total lobbying expenditures to influence		dy (direct lobbying)			0
С	Total lobbying expenditures (add lines	•	0	0		
d	Other exempt purpose expenditures .		 			0
е	Total exempt purpose expenditures (ac				0	0
f	Lobbying nontaxable amount Enter the	e amount from the	e following table in	both		
r	columns	T			1	0
	If the amount on line 1e, column (a) or (b)	<u>-</u> -	ng nontaxable amou	int is:		remarkation of the second of t
	Not over \$500,000		amount on line 1e	4500.000		S. S. Carlot
}	Over \$500,000 but not over \$1,000,000		lus 15% of the excess			
ŀ	Over \$1,000,000 but not over \$1,500,000		lus 10% of the excess		100	
}	Over \$1,500,000 but not over \$17,000,000		lus 5% of the excess	over \$1,500,000		
	Over \$17,000,000	\$1,000,000		<u></u>	0	0
g	Grassroots nontaxable amount (enter				} 	<u></u>
h	Subtract line 1g from line 1a. If zero or				0	0
İ	Subtract line 1f from line 1c. If zero or				0	0
j	If there is an amount other than zero o		line 1i, did the orga	anization file Form 4	1/20 reporting	
	section 4911 tax for this year?				[Yes No
	(Some organizations that columns bel	at made a section low. See the inst	ructions for lines	lo not have to com 2a through 2f on p	plete all of the five	
	Lobi	oying Expenditu	res During 4-Year	Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount				0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))	,	-71			0
С	Total lobbying expenditures				0	0
d	Grassroots nontaxable amount				0	0
е	Grassroots ceiling amount (150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures				0	0
					Schedule C (For	m 990 or 990-EZ) 2012

	(election under section 501(h)).	(a)	(b)
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description e lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	L		T ANY
С	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?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>	
h		ļ	ļ	
i	Other activities?	ļ	1 8437	_
j	Total. Add lines 1c through 1i	Mar.		O and the state of
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	10. US 50" .	minutes 94.1	
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	N 452	2	Water Can arrespondent L
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>	L	A STATE OF THE STA
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5),	or s	ection
	501(c)(6).			Yes No
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."	c)(5),	or so) Par	3 X
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a	Current year	•	2a	
b	Carryover from last year	•	2b	
C	Total	•	2c	. 0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	•	. 165 23	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	0
Part		· -		<u></u>
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5;	Dart II	A (af	filiated group
	· · · · · · · · · · · · · · · · · · ·	raitii	-A (ai	illiated group
lıst), l	Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information			
				•••••

SCHEDULE D (Form 990) ·

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

72-0501811

Par			Similar F	Funds or Accounts. Complete if
	the organization answered "Yes" to			
		(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 d			
	funds are the organization's property, subject	ct to the organization's exclusive	e legal cor	ntrol? Yes N
6	Did the organization inform all grantees, dor			
	used only for charitable purposes and not for			1 1.4 1 1.4
	purpose conferring impermissible private be			Yes N
Par	Conservation Easements. Comp	lete if the organization answ	ered "Yes	s" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held	by the organization (check all t	hat apply)	
	Preservation of land for public use (e.g., recr			on of an historically important land area
	Protection of natural habitat		reservatio	on of a certified historic structure
		<u> </u>	1000. 101.0	
2	Preservation of open space Complete lines 2a through 2d if the organization	ation held a qualified concerns.	on contrib	ution in the form of a consequation
2	easement on the last day of the tax year	ation rield a qualified conservation	OH COMMID	ution in the form of a conservation
	easement on the last day of the tax year			Held at the End of the Tax Ye
_	Total number of conservation easements .			2a
a b	Total acreage restricted by conservation eas			. 2b
c	Number of conservation easements on a ce			
d	Number of conservation easements include			
_	historic structure listed in the National Regis			2d
3	Number of conservation easements modifie		uished, or	terminated by the organization
	during the tax year	2,	•	, ,
4	Number of states where property subject to	conservation easement is locat	ted >	
5	Does the organization have a written policy	regarding the periodic monitorir	ng, inspect	tion, handling of
	violations, and enforcement of the conserva			Yes . N
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing	conservati	on easements during the year
	•			
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing cons-	ervation e	asements during the year
	▶ \$			
8	Does each conservation easement reported			
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization re			
	balance sheet, and include, if applicable, the		anızatıon's	financial statements that describes
	the organization's accounting for conservati			0: 11 4
Par				er Similar Assets.
	Complete if the organization answere			
1a	If the organization elected, as permitted und			
	works of art, historical treasures, or other sin			
	of public service, provide, in Part XIII, the te			
þ	If the organization elected, as permitted und			
	works of art, historical treasures, or other sin		bition, edu	cation, or research in furtherance
	of public service, provide the following amou			
	(i) Revenues included in Form 990, Part VII(ii) Assets included in Form 990, Part X	I, line 1		• \$
	(ii) Assets included in Form 990, Part X			▶ \$
2	If the organization received or held works of			
	following amounts required to be reported u	nder SFAS 116 (ASC 958) relat	ting to the	se items
а	Revenues included in Form 990, Part VIII, li Assets included in Form 990, Part X	ne 1		
b	Assets included in Form 990, Part X			• \$

Par	III Organizations Maintaining Coll	ections of A	rt, Histor	ical Tre	asures, or (Other S	imilar Assets	(contın	ued)_	
3	Using the organization's acquisition, access	ssion, and oth	er records	, check a	any of the follo	owing th	at are a significa	ant		
	use of its collection items (check all that a	pply).								
а	Public exhibition		d []	Loan	or exchange	progran	ns			
b	Scholarly research		е 🗌	Other						
С	Preservation for future generations									
4	Provide a description of the organization's Part XIII	collections ar	nd explain	how they	further the o	rganıza	tion's exempt pu	rpose ii	n	
5	During the year, did the organization solicion assets to be sold to raise funds rather than							Y6	es [] No
Par	IV Escrow and Custodial Arrange IV, line 9, or reported an amount				nization ansv	vered "	Yes" to Form 9	90, Pa	rt	
1a	Is the organization an agent, trustee, custo				ontributions of	r other a	assets not			
	<u> </u>				•			Y	es 🗌	No
b	If "Yes," explain the arrangement in Part X	III and comple	ete the foll	owing tal	ble:					
						ļ	ΑΑ	mount		
С	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year			•		<u>1e</u>				
T	Ending balance					1f	<u> </u>			0
2a	Did the organization include an amount or							Ye	∍s <u> </u>	No
b_	If "Yes," explain the arrangement in Part X	III. Check her	e if the ex	planation	has been pro	ovided II	n Part XIII	<u>. </u>		<u> </u>
Part	V Endowment Funds. Complete i	f the organiza	ation ans	wered "\	Yes" to Form	n 990, F	Part IV, line 10.			
	(a) Current year	(b) Prid	or year	(c) Two years	back	(d) Three years back	(e) Fc	our years	back
1a	Beginning of year balance .			· · · · · · · · · · · · · · · · · · ·	ļ			 		
b	Contributions							↓		
С	Net investment earnings, gains,									
	and losses				 -	<u> </u>		+		
d	Grants or scholarships		<u> </u>		-			 		
е	Other expenditures for facilities									
f	and programs							+		
g	End of year balance	0				0	(0
2	Provide the estimated percentage of the c		<u> </u>					<u>'I</u>		<u>_</u>
а	Board designated or quasi-endowment	▶	%	(
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c sh									
3а	Are there endowment funds not in the pos	session of the	organızat	tion that a	are held and a	administ	tered for the	ſ		
	organization by.								Yes	No
	(i) unrelated organizations			•		•		3a(i)		ļ
	(ii) related organizations .			. O - h - d		•		3a(ii)		
b	If "Yes" to 3a(ii), are the related organization		-				• •	3b		<u> </u>
4 Part	Describe in Part XIII the intended uses of to Land, Buildings, and Equipme									
Fart						(=) (Nancional de la constant	(d) D.		
	Description of property	(a) Cost or ot			ost or other is (other)	. ,	Accumulated epreciation	(a) Bo	ook valu	e
1a	Land	 `` `` `	0		9,250					9,250
b	Buildings		0		543,444		4,645			8,799
c	Leasehold improvements		0		17,529		1,753			5,776
d	Equipment		0		36,864		11,077			5,787
е	Other		0		31,192		16,238			4,954
Total	. Add lines 1a through 1e. (Column (d) mus	t equal Form	990, Part	X, colum	n (B), line 10((c).)	Þ			4,566

Part VII	Investments—Other Securities	es. See Form 990, Part X	, line 12.	··
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
(1) Financial		0	 	
	eld equity interests	0		
		<u> </u>		· · · · · · · · · · · · · · · · · · ·
(g)				· · · · · · · · · · · · · · · · · · ·
(D)				
···(Ē)				
(F)				
(G)				
(H)				
<u>(l)</u>			became a company of the company of t	
	must equal Form 990, Part X, col (B) line 12)	<u> </u>		
Part VIII	Investments—Program Relat	ed. See Form 990, Part X	(, line 13	
(a) Description of investment type	(b) Book value	(c) Method of v Cost or end-of-year	
(1)				
(2)				
(3)				
(4)			-	
(5)				
<u>(6)</u> (7)				
(8)				
(9)				
(10)				
	must equal Form 990, Part X, col (B) line 13)	0		
Part IX	Other Assets. See Form 990,	Part X, line 15		·
		a) Description		(b) Book value
(1)				
(2)			· · · · · · · · · · · · · · · · · · ·	
(3)	····-			
(4)				
(6)				
(7)				
(8)				
(9)				
(10)				· · · · · · · · · · · · · · · · · · ·
	mn (b) must equal Form 990, Part X, o		<u> </u>	
Part X	Other Liabilities. See Form 99	, - 	To the Association of the Section of The Section is the Section of	
1.	(a) Description of liability	(b) Book value		
	income taxes			
(2)				
(3)	·, ·, ·, ·			
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	must equal Form 990, Part X, col (B) line 25)	0	<u></u>	
	740) Footnote. In Part XIII, provide the text of			ganization's liability
ior uncertain tax	c positions under FIN 48 (ASC 740) Check he	ae a the text of the foothole has be	en provided in Paπ XIII	

Sched	ule D (Form 990) 2012		72-0501811	Page 4
Par	Reconciliation of Revenue per Audited Financial Statement	nts With Revenue pe	r Return	
1	Total revenue, gains, and other support per audited financial statements .		1_	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net unrealized gains on investments	2a	_]'	
b	Donated services and use of facilities	2b]- ,	
С	Recoveries of prior year grants	2c	_} ,	
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) <u></u>	5	0
Par	Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses p	er Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1	
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b] 6 # 3 #3	
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d	31074	
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		4 A.	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С			4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8)	5	0
Par	XIII Supplemental Information			
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; F V, line 4, Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. A ional information.			and 2b;
				••••

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

Employer identification number 72-0501811 ST LANDRY PARISH FARM BUREAU, INC FORM 990, PART VI, SECTION A, LINE 6 THE ORGANIZATION HAS MEMBERS AND IS A NON PROFIT ORGANIZATION. FORM 990, PART VI, SECTION A, LINE 7A THE MEMBERS OF THE ORGANIZATION ELECT THE GOVERNING BOARD. FORM 990, PART VI, SECTION A, LINE 7B HOWEVER, THE ACTIONS OF THE GOVERNING BOARD ARE APPROVED BY THE MEMBERS ON A YEARLY BASIS WHEN ELECTIONS TAKE PLACE. FORM 990, PART VI, SECTION B, LINE 11 THE FORM 990 IS REVIEWED AT THE NEXT REGULARLY SCHEDULED BOARD MEETING FORM 990, PART VI, SECTION C, LINE 19 INSPECTION OF THE FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS CURRENTLY IN PLACE ARE AVAILABLE UPON REQUEST AT AN OFFICE OF THE ORGANIZATION. FORM 990, PART XI, LINE 5: TO CORRECT AND BALANCE ACCUMULATED DEPRECIATION ACCOUNTS

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

	21.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·		Cash	Noncash
1	Federated Campaigns	1		
2	Membership dues .	2		
3	Fundraising events .	3	49,923	
4	Related organizations	4		
5	Government grants (contributions)	5		
6	All other contributions, gifts, grants, and similar amounts not included above:			
				
	Other contributions total	c		
	Other contributions total	0		
7	Total	7	49,923	0

ST LANDRY PARISH FARM BUREAU, INC

Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

•					•		Description of	Basis Method	GHT LINE
								Depreciation	46,575 STRAIGHT LINE
Cost, other	0	0	850	Expense	of sale and	cost of	improve-	ments	
Cost,					Cost or other basis	(Enter one field only)	Donated	value	
SS	0	0	0		Cost or of	(Enter one		Cost	47,425
Gross					-		Gross sales	price	
	Total Public Securities	c Securities	Total Other Sales				Date	sold	
	Total Publ	Total Non-Public Securities	Total				Acquisition	method	
		5			-		Date	acquired	
								Purchaser	
					Check if	purchaser	ısa	pusiness	
				Check If	gain/loss is gain/loss is Check if	from sale from sale of purchaser	of public non public	securities	
				Check if Check if	gain/loss is	from sale	of public	securities	
								CUSIP #	
								Description	THEMOTION & BOILD DO DE LE

Part IX, Line 22 (990) - Depreciation, Depletion, and Amortization

I alt IX, Lille	22 JJJ	o, - Deb	i ec <u>iatio</u>	711, De	piction, and	Aniordzadon		
					(A)	(B)	(C)	(D)
					Total	Program	Management	Fundraising
						services	and general	-
1 Depreciation		•		1	13,568		·	
2 Depletion			•	2	0			
3 Amortization				3	0			
4 Total				. 4	13.568	0	0	0

Part X, Line 4 (990) - Accounts Receivable

		Accounts	receivable	Allowance for	doubtful accounts
		Beginning	End	Beginning	End
1 ACCOUNTS RECEIVABLE	1 [5,154	72		
2	2 [
3	3 [
4	4 [
5	5				
6	6				
7	7 [
8	8				
9	9				
10	10				
11 Total accounts receivable	11	5,154	72	0	0

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

							Total:	638,279	66,719	33,713	0	607,426	604,566
			Leasehold			Check If	Check If		Beginning	Ending			
			Improve-			Investment	Asset	Cost/Other	Accumulated	Accumulated	Disposals/	Beginning	Ending
Category or Item	Land	Land Buildings ments Equ	ments	Equipment	Other	Asset	Disposed	Basis			Adjustments	Balance	Balance
	X							9,250	0	0		9,250	9,250
:	!	×			,			543,444	0	4,645	•	0	538,799
			ı		×	:		0	0	0		543,444	
				×	•		:	36,864	57,652	11,077		25,925	25,787
OTHER FIXED ASSETS			f 1		×			31,192	290'6	16,238		22,125	14,954
			:×			,		17,529	0	1,753		6,682	15,776

Part X, Lines 23 and 24 (990) - Secured and Unsecured Notes Payable

· ·	_		
	Total:	382,159	199,408
		Balance due	
	Check If	beginning	Balance due
Lender's name	Unsecured	of year	end of year
1 TECHE FEDERAL BANK		382,159	199,408

Form 8868

(Rev January 2013)

Department of the Treasury

Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

If you are	e filing for an Automatic 3-Month Extensice filing for an Additional (Not Automatic) Inplete Part II unless you have already be	3-Month B	Extension, complete only Part II (on page 2 c	of this	form)			
Electronic a corporation 8868 to requestion Return for T	filing (e-file). You can electronically file Food required to file Form 990-T), or an addituest an extension of time to file any of the Transfers Associated With Certain Personal). For more details on the electronic filing of	orm 8868 i ional (not a forms liste al Benefit C	if you need a 3-month automatic ex automatic) 3-month extension of tim d in Part I or Part II with the except Contracts, which must be sent to the	tension of ti le. You can ion of Form e IRS in pap	ime to electi 8870 er for	o file (6 n ronically , Informa rmat (see	months for file Form ation e		
Part I	Automatic 3-Month Extension of	f ime . Onl	y submit original (no copies nee	ded).		-			
Part I only . All other con	on required to file Form 990-T and request 						▶ 🗍 on of		
			Enter filer	s identifying	numl	ber, see i	nstructions		
Type or	Name of exempt organization or other filer, se	e instruction	าร	Employer ide	ntıficat	on numbe	r (EIN) or		
print	ST LANDRY PARISH FARM BUREAU, IN			72-0501811					
File by the	4.6.								
filing your	Ing your City, town or post office, state, and 7ID code. For a foreign address, see instructions								
return See		For a foreigi	n address, see instructions	Ι Λ	70	905 000	14		
instructions	BATON ROUGE			LA		895-900	14		
Enter the Re	eturn code for the return that this application	on is for (fil	e a separate application for each re	eturn) . . .			01		
Application	n	Return	Application			•	Return		
ls For		Code	Is For				Code		
Form 990 o	r Form 990-EZ	01	Form 990-T (corporation)	_			07		
Form 990-E	BL	02	Form 1041-A				08		
Form 4720		03	Form 4720				09		
<u>Form 990-F</u>		04	Form 5227	_			10		
	(sec. 401(a) or 408(a) trust)	05	Form 6069				11		
Form 990-1	(trust other than above)	06	Form 8870				12		
Telephor If the org If this is for the whole list with the until I requuntil	the organization's return for: calendar year <u>2012</u> or	of busines s four digit If it is for p sion is for. corporatio exempt org	Group Exemption Number (GEN) _ art of the group, check this box	sion of time	▶	. If th	his is d attach a ension		
Cł	tax year entered in line 1 is for less than 12 nange in accounting period	2 months,	check reason: Initial return		retur	n			
	application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the tentative tax, le	ss any	3-		^		
	fundable credits. See instructions. application is for Form 990-PF, 990-T, 472	20 or 6060	enter any refundable credits and		3a_	3	0		
	application is for Form 990-FF, 990-1, 472				3b	s	0		
	ce due. Subtract line 3b from line 3a. Incli			y usina		-			
	S (Electronic Federal Tax Payment System	-	•		3с	\$	0		
	u are going to make an electronic fund withdrav			rm 8879-EO					
For Privacy A	ct and Paperwork Reduction Act Notice, see	instructio	ns.		Forn	8868	(Rev 1-2013)		