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, 990 Form

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)

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(except black lung benefit trust or private foundation)

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

A	For t	he 2012 calen	dar year, or tax year begin	ning	, 2	012, and	ending			,			
В	Check	ıf applicable	C Name of organization SMI	TH COUNT	Y FARM BUREA	AU UA			D Employ	er Identifi	ication Nu	mber	
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Und	er pena	ilties of perjury de	eclare that I have examined this ret arer (other than officer) is based on	turn, including acco	ompanying schedules and which preparer has any k	l statements	s, and to t	ne best of n	ny knowledge	and belie	f, it is true	, correct,	and
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Ма	y the	IRS discuss th	his return with the prepare	r shown above	e? (see instructions	5)					X Y	es	No_

Par		SMITH COUNTY FAR					09118	96		age z
rai	'	ement of Program Ser	•		. 111					x
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		ncy_of_agricultur. 90, Page 2, Part III, Line 1 (
	See Louin 3	90, Page 2, Part III, Line I	continued)	-			- -	- -		
	Did the organ	nization undertake any sign	ificant program cons	and during the i	roar which were	not listed on the n	105			
~	Form 990 or		ilicant program servi	ices during the y	real WillCil Wele	not listed on the p	ю _Г	Yes	ĘΠ	No
		cribe these new services on	Sahadula O		•			163	X	NO
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3	_	cribe these changes on Sch	~	manges in now	it conducts, any	program services:	Ļ	165	X	140
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	Expenses)	am services. (Describe in Se \$	chedule O) including grants of	\$) (Revenue \$)	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		x
2	Is the organization required to completeSchedule B, Schedule of Contributors(see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the lax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197/f 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts if 'Yes,' complete Schedule D, Part I	6		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? 'Yes,' complete Schedule D, Part III	8		<u>x</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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 endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable	: قسد.	¢* ;	* 1
а	Did the organization report an amount for land, buildings and equipment in Part X, line 107f 'Yes,' complete Schedule D, Part VI	11 a	х	
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	11 b		х
C	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
	I Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 253f 'Yes,' complete Schedule D, Part X	11 e		X
	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)3f 'Yes,' complete Schedule D, Part X	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year ∦ 'Yes,' complete Schedule D, Parts XI, and XII	12a		х
t	o Was the organization included in consolidated, independent audited financial statements for the tax yearlf 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
	Is the organization a school described in section 170(b)(1)(A)(ii)?If 'Yes,' complete Schedule E	13	ļ	X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ŧ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		х
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		х
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 (see instructions)	17	ļ	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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a# 'Yes,' complete Schedule G, Part III	19		х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	 	X
ı	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 t	<u> </u>	<u> </u>

Form 990 (2012) SMITH COUNTY FARM BUREAU

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 'Yes,' complete Schedule J	23		x
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
•	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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-EZIF 'Yes,' complete Schedule L, Part I	25b		
26	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? Yes, complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 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
	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)	·	~,	, ,
1	a A current or former officer, director, trustee, or key employee?If 'Yes,' complete Schedule L, Part IV	28a		_ X
	b A family member of a current or former officer, director, trustee, or key employee <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets if 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		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
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	Х
	b If 'Yes' to line 35a, 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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	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 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	х	
BA	A	Form	990	(2012)

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 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a 1 b b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c X (gambling) winnings to prize winners? 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Х Note. If the sum of lines 1a and 2a is greater than 250, you may be required to file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3 b X **b** If 'Yes' has it filed a Form 990-T for this year? If 'No.' provide an explanation in Schedule O 4 a 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)? Х 4 a b If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Х 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5 b c If 'Yes.' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible as charitable contributions? 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were X 6 b not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a services provided to the payor b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c 7 d d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g as required? **h** If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations in the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. L. 9 a a Did the organization make any taxable distributions under section 4966? **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Enter 10 a a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: 11 a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes.' enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? . 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans 13c c Enter the amount of reserves on hand X 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

Form 990 (2012) SMITH COUNTY FARM BUREAU 75-0911896 Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 2 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 1 b 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Х Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 4.1 8a Х a The governing body? **b** Each committee with authority to act on behalf of the governing body? 8Ы Х Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х (This Section B requests information about policies not required by the Internal Revenue Code.) **Section B. Policies** Yes No 10 a Х 10 a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes? X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Barrag. Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b Х to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х Schedule O how this is done 12 c X 13 13 Did the organization have a written whistleblower policy? 14 Х 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 a a The organization's CEO, Executive Director, or top management official Х 15_b Х **b** Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a Х **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Other (explain in Schedule O) Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 20

WACO

P O BOX 2689

Form 990 (2012)	SMITH	COUNTY	FARM	BUREAU

75-0911896

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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

- 1 a 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

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

		(C)								
(A) Name and Title	(B) Average hours per week (list		ı, unl	ess p d a di	ersor	more the state of	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) BOB CARTWRIGHT										
PRESIDENT	4.00	Х		Х				0.	0.	0.
(2) CHAD GULLEY	_				.					
VICE PRESIDENT	8.00	Х		X				0.	0.	0.
(3) BILL CROOK										
SEC TREAS	2.00	X		Х			_	0.	0.	0.
_(4) LEE ROY PACE	_									
DIRECTOR	2.00	Х						0.	0.	
_(5)_OTIS_TATE	_									
DIRECTOR	1.00	X						0.	0.	0.
(6) MARK_CHAMBLEE	_						ļ			
DIRECTOR	8.00	Х			_			0.	0.	0.
_(7)_CHARLES_RAND	_									
DIRECTOR	5.00	Х					<u> </u>	0.	0.	0.
(8) MARTIN FARNSWORTH	_]]								
DIRECTOR	2.00	X					 _	0.	0.	0.
(9) DAVID WILSON	_ -									
DIRECTOR	5.00	Х		<u> </u>			<u> </u>	0.	0.	0.
(10) REX COULTER	_									
DIRECTOR	4.00	Х					_	0.	0.	0.
(11) CHARLES PARMLEY	_ _ 						1			
DIRECTOR	5.00	Х					<u> </u>	0.	0.	0.
(12) KEVIN SAMPSON	_									
DIRECTOR	4.00	X						0.	0.	0.
(13)	-									
(14)										

Form	990 (2012) SMITH COUNTY FARM BURE	AU		_	-					75-0911896	
12ar	VII Section A. Officers, Directors, Tr		Key	Em			es, a	anc	Highest Com	pensated Emple	oyees (cont)
		(B)			(C				(5)		<i>(</i> 5)
	(A) Name and title	Average hours	box.	unle:	heck i ss pei	more	than o	n an	(D) Reportable	(E) Reportable	(F) Estimated
		per week (list any		-			or/trus		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation
		hours	or director	計	Officer	Key employee	nples nploy	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related
		related organiza - tions	[전 표	<u>a</u>		nploy	ee (con				organizations
		below dotted	or director	nstitutional trustee		ee	Highest compensated employee				
		line)	"	8			ated				
(15)											
7.7.											
(16)			_								
(17)			ļ								
(1/)_			-								
(18)											
(19)			-								
(20)				-							
(20)_			-								
(21)											
			_					<u> </u>			
(22)			-								
(23)			+					H			
			1								
(24)			_								
(05)					<u> </u>			├-			
(25)			-						!		
1 b	Sub-total .	<u> </u>		<u> </u>	1	l	1	<u> </u>	0.	0.	0
С	Total from continuation sheets to Part VII, Sec	tion A						>	13737.		
	Total (add lines 1b and 1c) .								0.	0.	0
2	Total number of individuals (including but not lift from the organization	mited to th	ose	ıste	d ab	ove) wh	o re	ceived more than	\$100,000 of reporta	ible compensation
	from the organization ►						-			 .	Yes No
3	Did the organization list any former officer, direct	ctor or trus	stee.	kev	emr	olove	ee. o	r hi	ghest compensate	ed employee	(1
Ū	on line 1a? If 'Yes,' complete Schedule J for su	ich individu	ial		٠۴	<u>.</u>	, .		g. root oomponeet		3 X
4	For any individual listed on line 1a, is the sum of	of reportat	le co	mpe	ensa	tion	and	oth	ner compensation	from	
	the organization and related organizations grea such individual	ter than \$	150,0		τ Υε	es` c	comp	nete	e Scheaule J for		4 X
5	Did any person listed on line 1a receive or accr	ue compe	nsatio	on fr	om	any	unre	elate	ed organization or	ındıvıdual	128.78
	for services rendered to the organization? If 'Ye. tion B. Independent Contractors	s,' comple	te Sc	hed	ule .	J for	suc	h pe	erson		5 X

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A)

(B)

(C)

Name and business address

Description of services

Compensation

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

		Check if Schedule O contains a resp	onse to any question	on in this Part VIII			
743	<u> </u>			(A)	(B)	(C)	(D)
; 1	, (1	Total revenue	Related or exempt	Unrelated business	Revenue excluded from tax
					function	revenue	under sections
·					revenue		512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANT AND OTHER SIMILAR AMOUNTS	1 a	Federated campaigns 1a		, ^ , ⁸			,
종립	b	Membership dues 1 b	109,160.				
Ş. Ş.	C	Fundraising events . 1 c					
늘	d	Related organizations 1 d					
똧픪	е	Government grants (contributions) 1 e		J			
롲띫	f	All other contributions, gifts, grants, and					
25	•	similar amounts not included above 1 f					
동일	g	Noncash contributions included in Ins 1a-1f: \$					
	h	Total. Add lines 1a-1f	•	109,160.			7 11
PROGRAM SERVICE REVENUE			Business Code	. »	Ai isi	<i>I</i>	. I .
2	2 a						
<u>بر</u>	b						
죑	С				·		
몽	d						
\$	е						
8	f	All other program service revenue					
#	g	Total. Add lines 2a-2f	•				<u> </u>
	3	Investment income (including dividend	s, interest and				_
		other similar amounts)		2.	0.	0.	2.
	4	Income from investment of tax-exempt	bond proceeds				
	5	Royalties .	<u> </u>			* * *	S. # 3 , 3 *
	_	(i) Real	(II) Personal		11. 11.		// /
		Gross rents 54,000					
		Less rental expenses 0					
		Rental income or (loss) 54,000				× . X	/
	d	Net rental income or (loss)	(ii) Other	54,000.	0.	43,809.	10,191.
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory		. # * #		* * * * * * * * * * * * * * * * * * *	
	b	Less: cost or other basis					
	_	and sales expenses					
		Gain or (loss)		1X		l 6.20 and .	
		Net gain or (loss)					· 🔌 .
当	8 a	Gross income from fundraising events (not including \$					
邑		of contributions reported on line 1c).					
æ		See Part IV, line 18	a	387 1			
OTHER REVENUE		Less direct expenses	b				
둳		: Net income or (loss) from fundraising	events •	- ~ · · · · · · · · · · · · · · · · · ·		22 - 22	
		, , -				<i>, 4</i> * , 4	
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
		Less direct expenses	b				
	,	: Net income or (loss) from gaming acti	vities	-			
	l	Gross sales of inventory, less returns		7 7 7 2		1	(*, * ;
	106	and allowances	а			\$ 50	
	t	Less cost of goods sold	b			/ <i> </i>	
		: Net income or (loss) from sales of inv	entory				
		Miscellaneous Revenue	Business Code				
	11 a	INSURANCE SVC FEES	524298	89,223.	0.	89,223.	0.
		INS AGENT INCOME	524298	9,654.	0.	9,654.	0.
		BANKING PROGRAM	522100	211.	. 0.	211.	0.
		All other revenue		35.			35.
		e Total. Add lines 11a-11d	•	99,123	. (1)	1 W 5 3	<u> </u>
	12	Total revenue. See instructions	<u> </u>	262,285	. 0.	142,897.	
BA	<u> </u>		TEE	A0109 12/17/12			Form 990 (2012)

Sect	ion 501(c)(3) and 501(c)(4) organizations must			must complete column	(A).
	Check if Schedule O contains a r			T (0)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	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	3,405.			*
2	Grants and other assistance to individuals in the United States See Part IV, line 22.				s* , , ,
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16			* **	٠ ٨٣,
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	71,230.		<u> </u>	
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	427.			<u> </u>
10	Payroll taxes	6,039.			
	Fees for services (non-employees):				
	, , , , ,				ļ
	Management .				
	Legal .				 -
C	: Accounting	1,195.		<u></u>	
(I Lobbying				
•	Professional fundraising services. See Part IV, line 17			1 2 4	
f	Investment management fees				
	Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch 0)	1 000			
	Advertising and promotion	1,000.		<u> </u>	
13	Office expenses	9,694.	· · · · · · · · · · · · · · · · · · ·		
14	Information technology	·			
15	Royalties				
16	Occupancy	48,479.			
17	Travel	5,007.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,357.			
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,826.		<u> </u>	
23	Insurance .				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				* ;
i	STATE MEMBERSHIP DUES	55,945.			
	b COMMITTEE/CONTRACT_SVC	1,940.			
	COTHER_EXPENSE	4,820.			
		1,020.			
	e All other expenses				
	•	220 264			
25	Total functional expenses. Add lines 1 through 24e	229,364.		 	
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)				
	SUP 98-2 (ASU 938-720)	Ĭ.	i .	į.	ĺ

		Check if Schedule O contains a response to any qu	uestion in this Part X			
				(A) Beginning of year		(B) End of year
	1	Gash — non-interest-bearing		17,679.	1	32,248.
	2	Savings and temporary cash investments			2	4,231.
- 1	3	Pledges and grants receivable, net .	•		3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L	officers, directors, mployees. Complete		5	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), persons described in section 4958 employers and sponsoring organizations of section 50 beneficiary organizations (see instructions) Complete	(c)(3)(B), and contributing 1(c)(9) voluntary employees'	A STATE OF THE STA	6	
A	7	Notes and loans receivable, net .			7	
ASSETS	8	Inventories for sale or use .			8	
Ť	9	Prepaid expenses and deferred charges.		5,112.	9	3,195.
	10 a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10a 528,078.		/	
	b	Less accumulated depreciation	10b 104,092.	433,343.	10 c	423,986.
	11	Investments – publicly traded securities .			11	
	12	Investments – other securities See Part IV, line 11			12	
1	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line	34) .	456,134.	16	463,660.
	17	Accounts payable and accrued expenses		5,629.	17	5,317.
Í	18	Grants payable			18	
	19	Deferred revenue			19	
ŀ	20	Tax-exempt bond liabilities .	N/ -4 0 -b - dub - D		20	
A	21	Escrow or custodial account liability. Complete Part		* & 28 · W .3	21	/ 300
L_AB_L_F_ES	22	Loans and other payables to current and former office key employees, highest compensated employees, an Complete Part II of Schedule L	ers, directors, trustees, d disqualified persons		22	
<u> </u>	23	Secured mortgages and notes payable to unrelated the	hird parties	356,908.	23	331,825.
Š	24	Unsecured notes and loans payable to unrelated third			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Com	es to related third parties, iplete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		362,537.	26	337,142.
N E T		Organizations that follow SFAS 117 (ASC 958), check lines 27 through 29, and lines 33 and 34.	k here ► and complete		36 H	
ASSETS	27	Unrestricted net assets	•		27	
Ĕ	28	Temporarily restricted net assets .	•		28	
	29	Permanently restricted net assets .	. —		29	NEV. 28. 4 60000190
R F		Organizations that do not follow SFAS 117 (ASC 958 and complete lines 30 through 34.	B), check here► X		27	
DZC	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipr			31	
Ĺ	32	Retained earnings, endowment, accumulated income	e, or other funds	93,597.	32	126,518.
BALAZCES	33	Total net assets or fund balances .		93,597.	33	126,518.
Š	34	Total liabilities and net assets/fund balances	<u> </u>	456,134.	34	463,660.

BAA

Form 990 (2012)

orr	n 990 (2012) SMITH COUNTY FARM BUREAU	-03 <u>11836</u>		rag	e ız
Pa	rt XIঔ Reconciliation of Net Assets				_
	Check if Schedule O contains a response to any question in this Part XI			_	Ш
1	Total revenue (must equal Part VIII, column (A), line 12).	_1	26	2,28	<u>35.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	22	9,30	<u>64.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	3	32,92	21.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9	3,5	<u>97.</u>
5	Net unrealized gains (losses) on investments	5			
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, column (B))	10	12	26,5	18 <u>.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
		•		Yes	No
1	Accounting method used to prepare the Form 990' X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
2	in Schedule O a Were the organization's financial statements compiled or reviewed by an independent accountant? .		2 a	م السومدات	X
_	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed by an independent decountaries. If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed by an independent decountaries.	wed on a	3 		
	Separate basis Consolidated basis Both consolidated and separate basis				
	b Were the organization's financial statements audited by an independent accountant?		2 b		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	arate			
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		1232		'U' '
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Audit Act and OMB Circular A-133?	ne Single	3 a		<u>X</u>
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	equired audit	3 b		
D A			Form	990 (2	2012)

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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 2012

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection
Employer identification number

MI	TH COUNTY FARM BUREAU			75-0911896
	TIME Organizations Maintaining Dono	r Advised Funds or Other Sim	ilar Funds or Ac	
	the organization answered 'Yes'	to Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b)	-unds 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 dor are the organization's property, subject to the	nor advisors in writing that the assets organization's exclusive legal control?	held in donor advised?	funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that of the donor or donor advisor, or for	grant funds can be us any other purpose co	sed only inferring Yes No
ar	t II Conservation Easements. Comp	lete if the organization answer	ed 'Yes' to Form	990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply	y)	
	Preservation of land for public use (e.g., r	ecreation or education) Pres	ervation of an historic	cally important land area
	Protection of natural habitat	Pres	ervation of a certified	historic structure
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organizational last day of the tax year	on held a qualified conservation contr		·
			2 300 47 4	Held at the End of the Tax Year
ā	Total number of conservation easements .		2 a	
	Total acreage restricted by conservation ease		2 b	
•	Number of conservation easements on a certi-	fied historic structure included in (a)	2 c	
	Number of conservation easements included in structure listed in the National Register	•	. 2d	
3	Number of conservation easements modified, tax year ▶	transferred, released, extinguished, o	r terminated by the o	rganization during the
4	Number of states where property subject to co	onservation easement is located		
5	Does the organization have a written policy re and enforcement of the conservation easement	garding the periodic monitoring, inspents it holds?	ection, handling of vic	olations, . Yes No
6	Staff and volunteer hours devoted to monitoring	ng, inspecting, and enforcing conserva	ation easements durii	ng the year
7	Amount of expenses incurred in monitoring, in	nspecting, and enforcing conservation	easements during th	e year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?		•	∐Yes
9	In Part XIII, describe how the organization repinclude, if applicable, the text of the footnote conservation easements.	ports conservation easements in its re to the organization's financial statement	venue and expense sents that describes th	statement, and balance sheet, ar e organization's accounting for
Păi	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treas wered 'Yes' to Form 990, Part	ures, or Other Si IV, line 8.	milar Assets.
1:	If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIII, the text of the footnote to its final	s held for public exhibition, education	, or research in furthe	ent and balance sheet works of erance of public service, provide,
ı	b If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items:	r SFAS 116 (ASC 958), to report in its eld for public exhibition, education, or	s revenue statement a research in furtheran	and balance sheet works of art, ce of public service, provide the
	(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 a amounts required to be reported under SFAS	art, historical treasures, or other simila 116 (ASC 958) relating to these items	ar assets for financial s.	gain, provide the following
	a Revenues included in Form 990, Part VIII, line			► \$
	b Assets included in Form 990. Part X			▶ \$

Schedule D (Form 990) 2012 SMITH CO	OUNTY FAI	RM BUREAU		75-091	1896		Page 2		
Part III Organizations Maintainin	g Collectio	ons of Art, Histo	orical Treasures, o						
3 Using the organization's acquisition, a items (check all that apply):									
a Public exhibition									
b Scholarly research									
c Preservation for future generation									
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII									
During the year, did the organization to be sold to raise funds rather than to					Yes		No		
Part IV Escrow and Custodial Arra reported an amount on Fo	ngements. orm 990, Pa	Complete if the oart X, line 21.	organization answer	ed 'Yes' to Form 990	, Part I\ 	/, line !	Э, or 		
1 a Is the organization an agent, trustee, on Form 990, Part X?	custodian, or	other intermediary	for contributions or oth	ner assets not included	Yes				
b If 'Yes,' explain the arrangement in P	art XIII and c	complete the follow	ing table [.]						
					Amount				
c Beginning balance				1 c					
d Additions during the year .	•			1 d					
e Distributions during the year	•			. 1 e					
f Ending balance				1f)					
2 a Did the organization include an amou	nt on Form 9	90, Part X, line 213	7		Yes	L	No		
b If 'Yes,' explain the arrangement in P	art XIII Ched	k here if the explain	ntion has been provided	d in Part XIII		L	_		
Part V Endowment Funds. Comp	olete if the	organization ar	nswered 'Yes' to Fo	orm 990, Part IV, lir	ne 10.				
	a) Current	(b) Prior yea	1	(d) Three years		our year	s		
1 a Beginning of year balance									
b Contributions									
c Net investment earnings, gains, and losses									
d Grants or scholarships					-				
e Other expenditures for facilities and programs	· · · · · · · · · · · · · · · · · · ·								
f Administrative expenses									
g End of year balance									
2 Provide the estimated percentage of	the current ve	ear end balance (lir	ne 1g, column (a)) held	as	 `				
a Board designated or quasi-endowment	-	8							
b Permanent endowment ►									
c Temporarily restricted endowment ►		ક							
The percentages in lines 2a, 2b, and	2c should eq	ual 100%							
3a Are there endowment funds not in the organization by:	possession	of the organization	that are held and adm	inistered for the	Г	Yes	No		
(i) unrelated organizations					3a(i)				
(ii) related organizations		•	•		3a(ii)				
b If 'Yes' to 3a(ii), are the related organ	Nastione lieta	nd as required on S	chedule R?	•	3b				
4 Describe in Part XIII the intended use		·			1 35				
Part VI Land, Buildings, and Equ									
Description of property		Cost or other basis		(c) Accumulated	(d) F	Book va	———		
		(investment)	basis (other)	depreciation	(4)				
la Land .			70,107.	Part of the second		70	,107.		
b Buildings			378,063.	59,727.			336.		
c Leasehold improvements									
· -						-	- ·		

d Equipment 24,691. 18,387. e Other 55,217. 25,978. 29,239. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) BAA 423,986.

Schedule **D** (Form 990) 2012

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

(9) (10) (11)

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

Schedule D (Form 990) 2012 SMITH COUNTY FARM BUREAU	75-0911896	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements 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:	f. 32	
a Net unrealized gains on investments 2a	k# l	
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	. 2 e	
3 Subtract line 2e from line 1	. 3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line:	3.4	
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) . 4b	<u></u>	
c Add lines 4a and 4b	- ₄ c	
	5	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	<u>` </u>	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses 1 Total expenses and losses per audited financial statements	per Keturn	
·		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	×	
b Prior year adjustments	 ,	
c Other losses	;	
d Other (Describe in Part XIII)	[*] ~_	
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part III, lines 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provid	e any additional inform	ation
BAA	Schedule D (Form	990) 2012

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service

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.

Open to Public

Name of the organization		Employer identification number				
SMITH COUNTY FARM	75-0911896					
Pt_VI,_Line_la	VI, Line la An executive committee, when appointed, has the authority					
	to conduct affairs of the organization between regular board					
	meetings, but the committee is under the direct supervision					
	of the board of directors at all times, and all actions of the					
	committee must be ratified at the following boa	rd of directors				
	meeting.					
Pt_VI,_Line_2	Mark Chamblee & Bill Crook - Business Relations	hip				
Pt_VI,_Line_6	Members					
Pt_VI,_Line_7a	All members are the same class and are invited	to the				
	annual membership meeting where directors are e	elected.				
Pt_VI,_Line_11b_	The form 990 is reviewed by president prior to	filing_and				
	all directors review at the board meeting subse	guent to its filing				
Pt_VI,_Line_19	The organization makes its Form 990 and any other					
	required information available to the public					
	upon specific request only.					
Pt_VILine_15	No officers or directors receive any compensati	on; therefore				
	no compensation review is needed.					
Part XII, Line 2a & 2b	While the financial statements are not compiled	l_by_an				
	"independent" accountant, they are compiled by	a_separate				
	entity who compiles its financial statements ar	<u>.d</u>				
	prepares and files all of its state and federal	_ <u>tax</u>				
	returns/reports. This entity also reconciles the					
	organization's bank statements. The organization pays a fee					
	for these services.					

Schedule O (Form 990), Supplemental Information to Fo	orm 990
Form 990, Page 2, Part III, Line 1 (continued)	

Briefly describe the organization's mission:								
and	desira	able	rural	life	through	education,	information,	
and	other	such	prog	cams.				

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

each prog	nani service repo	of tea.
Code:	Description:	Members of the County Farm Bureau are also members of
Expenses _		Texas Farm Bureau, a statewide agricultural organization
Grants Of		(exempt under 501(c) (5)) that works for the betterment
Revenue		of agriculture and coordinates programs on a statewide
		basis. Members of the County Farm Bureau are also members
		of the American Farm Bureau, a national agricultural
		organization that also works for the betterment of agriculture.
Code:	Description:	
Expenses		County Farm Bureau volunteers participate in matters
Grants Of		dealing with legislation that affects agriculture.
Revenue	•	
		County Farm Bureau volunteers help organize their members
		into separate agricultural commodity interests.
Code:	Description:	Youth Leadership Conference
Expenses _		Sponsored student(s) to attend the Farm Bureau Youth Leadership Conference.
Grants Of		The purpose of the conference is to give selected high school students in Texas
Revenue _		a better understanding of the various forms of government and educate them
		their responsibilities as citizens. The conference runs three full days and
		includes lectures, discussions, and films by outstanding authorities in
		government, history, and economics.
Code:	Description:	
Expenses		National Affairs Meetings
Grants Of		County Farm Bureau Directors attended meetings with national
Revenue		legislators as well as state legislators to explain how
_		laws and regulations impact agriculture and rural areas.

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

75-0911896

2012

Attachment Sequence No 179

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

SMITH COUNTY FARM BUREAU
Business or activity to which this form relates

Identifying number

	m 990 / Form 990	ÉZ							
Par			roperty Under Sec		Part I				
1	Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions)							1	
2	manifest amount (coo mondone)							2	
3									
4									
5	Dollar limitation for tax yes separately, see instruction		5						
6	(a)	Description of property		(b) Cost (business	s use onl	y) (C) Elected cos	it	
	· · · · · · · · · · · · · · · · · · ·								
7	Listed property. Enter the				_	<u> </u>		1 à	
8	Total elected cost of section			c), lines 6 and	/			9	
9 10	Tentative deduction Enter			:60				10	-
11	Carryover of disallowed de Business income limitation		_		ra) ar I	ne 5 (se	a instra)	11	
12						116 5 (36	.c 1113(13)	12	
	Carryover of disallowed de				▶ 13	3	-		
	: Do not use Part II or Part				<u> </u>				
Pai	t II 🖓 Special Deprec	iation Allowand	e and Other Depre	ciation (Do n	ot inclu	ide listed	property)	(See	instructions)
	Special depreciation allow								
14	tax year (see instructions)		property (other than his	ed property) pre	aceu iii	Service	during the	14	
15	Property subject to section	n 168(f)(1) election						15	
	Other depreciation (includ							16	<u> </u>
<u>'Pai</u>	∕t∖III △ MACRS Depre	ciation (Do not in			.)				
			Sectio	n A				1	
17	MACRS deductions for as	sets placed in serv	ice in tax years beginnii	ng before 2012				17	14,045
18	If you are electing to grou asset accounts, check her	ip any assets place re	d in service during the i	tax year into on	ne or m	ore gene	eral 🗕 🗌	` *	
	Section B	3 – Assets Placed i	n Service During 2012	Tax Year Using	the G	eneral De	epreciation	1 Syste	em
	(a) Classification of property	(b) Month and year placed in service	(C) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	Cor	(e) vention	(f) Metho	d	(g) Depreciation deduction
19	3-year property .								
	5-year property								
	7-year property		5,468.	7 YRS		HY	2001	DB	781
(10-year property								
(15-year property								
1	20-year property								
	25-year property			25 yrs			<u>S/I</u>		
	h Residential rental			27.5 yrs		MM S/1		<u>.</u>	<u></u>
	property			27.5 yrs		MM S/L			ļ
i	i Nonresidential real			39 yrs		MM S/L			
	property					MM	S/I		
	Section C		Service During 2012 T	ax Year Using t	he Alte	ernative			stem
20	a Class life						S/I		
	b 12-year			12 yrs			S/1		
c 40-year 40 yrs MM S/L									
Pa	rt IV: Summary (See	instructions)	· · · · · · · · · · · · · · · · · · ·		<u> </u>				
21	Listed property Enter am							21	
	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions.							22	14,826
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs								

Form 4562 (2012) SMITH COUNTY FARM BUREAU 75-0911896 Page 2 Part V. Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, comple**tenly** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles) 24 a Do you have evidence to support the business/investment use claimed? Yes No 24b If 'Yes,' is the evidence written? Yes No (i) Elected (d) (b) (e) (c) Type of property Basis for depreciation Method/ Business/ investment Cost or Depreciation Recovery Date placed in service section 179 other basis (business/investment Convention deduction (list vehicles first) percentage use only) cost Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) Property used more than 50% in a qualified business use Property used 50% or less in a qualified business use. 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) Vehicle 1 (b) Vehicle 2 **(c)** Vehicle 3 (d) Vehicle 4 (e) Vehicle 5 (f) Vehicle 6 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 Yes No Yes No Yes No Yes No Yes No Yes No Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees was not more than 5% owners or related persons (see instructions) Yes No 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) **Note:** If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles \$3%× Part∗VI Amortization (b) (c) (d) (e) (a) Description of costs Date amortization Amortizable Code Amortization Amortization for this year section period or percentage Amortization of costs that begins during your 2012 tax year (see instructions): 43 43 Amortization of costs that began before your 2012 tax year 44 44 Total. Add amounts in column (f). See the instructions for where to report