

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

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

OMB No 1545-0047 2012

Open to Public Inspection

For the 2012 calendar year, or tax year beginning $07/01/\overline{12}$ and ending 06/30/13 C Name of organization Employer identification number Check if applicable Johnson County Farm Bureau Assoc. Address change Doing Business As 48-0564295 Name change Number and street (or P.O. box if mail is not delivered to street address) Telephone number Initial return 117 S Main St 913-782-0235 Terminated City, town or post office, state, and ZIP code Spring Hill ' KS 66083 4 · 118,415 Amended return G Gross receipts \$ Name and address of principal officer Application pending H(a) Is this a group return for affiliates? Nick Guetterman 22270 Ouivira Rd H(b) Are all affiliates included? Bucyrus KS 66013 If "No," attach a list (see instructions 501(c)(3) Tax-exempt status 501(c) N/A Website > H(c) Group exemption number X · Corporation 1951 Other | Year of formation M State of legal domicile Form of organization Summary 1 Briefly describe the organization's mission or most significant activities See Schedule O SCANNEL NOV 2 1 2013 2 Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets 358 3 Number of voting members of the governing body (Part VI, line 1a) 358 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 1 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 40 6 Total number of volunteers (estimate if necessary) 0 7a Total unrelated business revenue from Part VIII, column (C), line. 7a 0 b Net unrelated business taxable income from Form 990-T 7b Pnor Year Current Year 7,400 ,400 8 Contributions and grants (Part VIII, line 1h) 98,789 98,679 9 Program service revenue (Part VIII, line 2a) 10,515 13,381 10 Investment income (Part VIII, column (A), lines 3, 4, and 10c) and 11e) 13,482 -2,31011 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 130,186 117,150 12 Total revenue - add lines 8 through 11 (must equal Part VII) 3,500 1,750 13 Grants and similar amounts paid (Part IX, column (A), lines 1, 3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 34,013 33,438 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) 66,712 59,790 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 104,225 94,978 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 25,961 19 Revenue less expenses Subtract line 18 from line 12 End of Year Beginning of Current Year 664,890 687.019 20 Total assets (Part X, line 16) 2,201 2,158 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 662,689 684,861 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign President Here Type or print name and title Print/Type preparer's name Date Preparer's signature Check Paid Preparer This tax return Firm's EIN ▶ **Use Only** prepared by a non-paid preparer. May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

			y Farm Bureau Assoc.	48-0564295	Page 2
P,a:		_	Service Accomplishments	e Dart III	X
1		The the organization's missi	entains a response to any question in thi	s rait III	<u>A</u>
		edule 0	511		
	D 14	 			
	_	anization undertake any sign 990 or 990-EZ?	ificant program services during the year which we	re not listed on the	Yes X No
	•	scribe these new services or	n Schedule O		1es 110
			or make significant changes in how it conducts, a	ny program	
	services?				Yes X No
		scribe these changes on Sch			
			rvice accomplishments for each of its three larges		
			(4) organizations are required to report the amoun	nt of grants and allocations to others,	
	the total exp	penses, and revenue, ir any,	for each program service reported		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
A.	ll act		ed to educate and/or imp		·
		for members.			
i	nclude	health, safe	ty, citizenship and mark	eting.	
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	Other	rom convect (Deserted C	ahadula O)	<u> </u>	
40	(Expenses	ram services (Describe in S) (Revenue \$	1
4e		ram service expenses▶	including grants of \$	Y Iveseuge 3	
DAA		, a co. 1.co oxponocar			Form 990 (2012

- 0	THE THE CHECKHOL OF REQUIRED SCHEDULES			
	·		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X·	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_	x	
c	Part III	5	_^	
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			v
7	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			X
9		8		
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	-		<u> </u>
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	-10		A
• •	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
-	complete Schedule D, Part VI	11a	X.	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	x	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
-	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	L	_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	L	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			١
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	ì	l

Part 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		X '
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x .
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		_	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	1		
	if "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? If "Yes," complete Schedule L, Part II	26		X.
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial 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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> X</u> .
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	'		
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			7,5
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	_ 29	_	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			.
24	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,			₽ .
22	Part I	31		X ·
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	22		x .
33	complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x ·
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		
J 4	or IV, and Part V, line 1	34		x .
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	33a		
_	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-chantable	1000		\vdash
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	100		-
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<u> </u>		<u> </u>
	19? Note. All Form 990 filers are required to complete Schedule O	38	x -	

	990 (2012) Johnson County Farm Bureau Assoc. 48-0564295		P	age
P,a	rt V 'Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V		1	Щ,
	1 1 -		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2 -	4		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1	4	:	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ·	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			١
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		1	
	gifts were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).			Ī
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		ŧ
	and services provided to the payor?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1_		
_	required to file Form 8282?	7c		ļ
d	If "Yes," indicate the number of Forms 8282 filed during the year	┦_		ŧ
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	┢
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		 -
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			I
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		•	ŧ
•	organization, have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.		İ	ŧ
a	Did the organization make any taxable distributions under section 4966?	9a		⊢
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		╁
10	Section 501(c)(7) organizations.Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 Cross received and Ferm 200 Real VIII, line 43 for subharing of slick feetbase.	-		•
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	-		
11	Section 501(c)(12) organizations.Enter			
a	Gross income from members or shareholders Cross income from either environs (Pa not not amounte due or not to attend to a thorse and to attend to a not to a thorse and to attend to a not to a	┪		Ī
b	Gross income from other sources (Do not net amounts due or paid to other sources			ŧ
40-	against amounts due or received from them)	4	•	ŧ
12a	Section 4947(a)(1) non-exempt charitable trusts.ls the organization filing Form 990 in lieu of Form 1041?	12a	 	╁
b 12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 504(c)(20) qualified perpentit health incurrence incurrence.	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	42-	 	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	ļ
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans [Second to a recovery of consequence to be added to the consequence to the consequen	\dashv		1
C	Enter the amount of reserves on hand Did the amount of reserves on hand		┼	1.5
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	┼──	X
D_	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u> </u>	

Part VI' Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 358 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 358 Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X · any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X. one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a X Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, 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 q Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," \mathbf{X} describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 14 Did the organization have a written document retention and destruction policy? 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 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? X. 16a If "Yes," did the organization follow a written policy or procedure requinng the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safequard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > None . 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X 'Upon request Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 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 books and records of the organization ▶ OFFICE SECRETARY 117 S Main St Spring Hill . KS 66083 ·

DAA

Form 990 (2012)

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

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

(1) Melvin Roettger Board Member (2) Robert Moss Board Member (3) Maribeth Finley	ours for elated	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
Board Member (2) Robert Moss (3) Maribeth Finley (Board Member (1) Board Member (1)	0.00									
Board Member (2) Robert Moss (3) Maribeth Finley (Board Member (C)	0.00					1				
(2) Robert Moss Board Member (3) Maribeth Finley Board Member (6)	0.00		ļ			i				
Board Member (3) Maribeth Finley (Board Member (1)	0.00	v	ŀ		_	\vdash		0	0	0
Board Member (3) Maribeth Finley (Board Member (0.00	v	1							
(3) Maribeth Finley (Board Member (•	•
Board Member (n nn	1	-	 		$\vdash \vdash$		0	0	0
Board Member (
		x								^
	0.00	<u> </u>	⊢		-	$\vdash \vdash$		0	0	0
	0.00									
	0.00			x				ol	0	^
(5) Donna Goetzmann	0.00	-	-	^	┢	\vdash		<u> </u>	0	0
	0.00									
	0.00			x				ol	o	^
(6) David Hayden	0.00	╁──	 	^	-	Н		0		0
	0.00									
	0.00	1		x				ol	0	0
(7)	0.00	╁	╁	1	╁	\vdash				
(8)										
(9)										
(10)										
(11)										

Par	† VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	d Employee(continued)				
•	. ' (A) Name and title	(B) Average hours per week (list any hours for	bo	x, unle	Pos check ess pe nd a d	rson lirecto	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estima amoun othe ompens from t	t of r ation	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(1.2.133 11.135)	,	organiza and rela organiza	ation ated	
(12)											_			
(13)														
(14)														-
(15)														
(16)														
(17)														
(18)												. •		
(19)														
1b c	Sub-total Total from continuation she	ets to Part VII, \$	Sect	ion /	\	<u> </u>	<u>.</u>	>						
d 	Total (add lines 1b and 1c) Total number of individuals (increportable compensation from the compensation from			to th		liste	d abo	ve)	who received more than \$1	00,000 in			Vac	NI-
3	Did the organization list any for employee on line 1a? If "Yes,"	complete Schedu	ıle J	for s	uch i	indiv	idual					3	Yes	No X
4 5	For any individual listed on line organization and related organindividual Did any person listed on line 1a	izations greater t	han	\$150	,000	? If '	Yes,	" co	mplete Schedule J for such			4		х
	for services rendered to the org	ganization? If "Ye										5		X
1	ion B. Independent Contractor Complete this table for your five compensation from the organiz	e highest compei ation Report cor							ir year ending with or within	the organization's tax year			(0)	
	Name and	(A) business address							Descrip	(B) obtion of services		Co	(C) mpensat	ion
														_
2	Total number of independent c received more than \$100,000 c	ontractors (included compensation	ling from	but n	ot lin orgai	nited	to the	nose	e listed above) who	0			991	-

Pa	rt V		Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII										
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
ts ts	1a	Federated camp	aigns	1a									
iran	b	Membership due	=	1b	•		I						
S, G	С	Fundraising eve	nts	1c			I						
Sift;	d	Related organization	ations	1d			I						
s, (е	Government grants (cx	ontnbutions)	1e			1						
tion r S	f	All other contributions,					1						
the		and similar amounts no	ot included above	1f		· 7,400	1						
dit	g	Noncash contributions	included in lines 1a-	1f \$			1						
<u>2 E</u>	h	Total. Add lines	1a-1f			•	. 7,400						
Jue						Busn Code	1						
ě	2a	County Me	embership D	ıes		110000	- 98,679	98,679					
e R	b								··- <u>-</u>				
Zic	С												
ı Se	d					-							
ran	е												
Program Service Revenue Contributions, Giffs, Grants	f	All other program		nue		<u> </u>	-00 670						
	- 9	Total. Add lines					·98,679						
	3	Investment inco		iiviaenas	, interes	i,	.13,381			13,381			
	4	Income from inv	•	evemnt	hond nro	oceads -	.13,301			13,381			
	5	Royalties	estinent of tax-	exempt	bond pro	L							
		Toyanies	(ı) Real		(n) F	Personal							
	6a	Gross rents	(1) (102)				Ī						
	b	Less rental exps					1						
	С	Rental inc or (loss)					I						
	d	Net rental incom	ne or (loss)	_ _			1	ì	ĵ	•			
	7a	Gross amount from	(i) Securities	3	(11)	Other							
		sales of assets other than inventory											
	b	Less cost or other	•	Į			Ī						
		basis & sales exps											
	С	Gain or (loss)					1						
	d	Net gain or (loss	s)	_		▶							
Ф	8a	Gross income from	n fundraising eve	nts			I						
eun		(not including \$					1						
Š		of contributions rep											
Other Revenue		See Part IV, line 1		a	····								
Ę		Less direct exp		ь[
•		Net income or (I			vents	•	· · · · · · · · · · · · · · · · · · ·	·····					
	9a	Gross income from		1									
	١.	See Part IV, line 1		a									
		Less direct exp		₽Ĺ			1						
		Net income or (I	-	ing activi	ties	•							
	Tua	Gross sales of i	•			. 060							
		returns and allow		a b		868 1,265							
		Less cost of go		~ _		1,265	-397			207			
	۳	Net income or (I	oss) from sales		ituiy	Busn Code	-39/			-397			
	11a					22311 3008	-1,913	-1,913	•				
	b	nos IIVII	- V-T					1,515					
	, ו								-				
	ď	All other revenu	e						:				
		Total. Add lines					-1,913						
	12	Total revenue.	See instruction	1 <u>S</u>		•	- 117,150	96,766	0	12,984			

Form 990 (2012) Johnson County Farm Bureau Assoc.

Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a respo	nse to any question in this I	Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		одрение	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in		·		
-	the U.S. See Part IV, line 22	1,750			
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the				, ·
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				<u> </u>
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	· 26,606			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	4,419			
10	Payroll taxes	2,413			
11	Fees for services (non-employees)				
а	Management				
þ	Legal	50			
C	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	609	· ·		
13	Office expenses				
14	Information technology		· <u> </u>		
15	Royalties				-
16	Occupancy	19,037			
17	Travel	1,537		·	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	15,242			
20	Interest				
21	Payments to affiliates	10 500			
22	Depreciation, depletion, and amortization	10,799			-
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	4-H Promotion	4,369			
a b	Board Expense	1,904			
C	Newsletter	1,629			
d	Insurance: Master Group L	1,611	<u> </u>		
e	All other expenses	3,003			
25	Total functional expenses. Add lines 1 through 24e	94,978	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) (B) Beginning of year End of year 16,072 \cdot 39,031 Cash-non-interest bearing 2 Savings and temporary cash investments Pledges and grants receivable, net 3 100,000 100,000 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 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 organizations (see instructions) Complete Part II of Schedule L a Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 442,219 10b 226,964 226,054 215,255 10c b Less accumulated depreciation Investments—publicly traded securities 11 11 322,764 332,733 12 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 664,890 687,019 16 Total assets. Add lines 1 through 15 (must equal line 34) 2,201 . 2,158 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 2,201 $\cdot 2,158$ Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 X Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 662,689 684,861 32 Retained earnings, endowment, accumulated income, or other funds 32 662,689 33 Total net assets or fund balances 33 684,861 664,890 687,019 Total liabilities and net assets/fund balances 34

Form 990 (2012)

	990 (2012) Johnson County Farm Bureau Assoc. 48-0564295			Page 12
Рa	rt XI' Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,150
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,978
3	Revenue less expenses Subtract line 2 from line 1	3		2,172
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	66	2,689
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	68	<u>4,861</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
			دلے	es No
1	Accounting method used to prepare the Form 990 Cash Cash Cash Control Other			1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
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			1
	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	<u> </u>
	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			1
	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 oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form	990 (2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047 **Open to Public**

Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

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

Name of organization Johnson County Farm E	Johnson County Farm Bureau Assoc.							
Part I-A Complete if the organization is exemp	ot under section 501(c) o	or is a section 5	27 organization					
1 Provide a description of the organization's direct and indirect	political campaign activities in F	Part IV						
Political expenditures			▶ \$					
3 Volunteer hours								
Part 1-B Complete if the organization is exemp	ot under section 501(c)(3).						
1 Enter the amount of any excise tax incurred by the organizat	ion under section 4955		▶ \$					
2 Enter the amount of any excise tax incurred by organization	managers under section 4955		▶ \$					
3 If the organization incurred a section 4955 tax, did it file Form	n 4720 for this year?			Yes No				
4a Was a correction made?								
b If "Yes," describe in Part IV								
Part I-C Complete if the organization is exemp		•	501(c)(3).					
Enter the amount directly expended by the filing organization	for section 527 exempt function	1						
activities			▶ \$					
2 Enter the amount of the filing organization's funds contribute	d to other organizations for sect	ion						
527 exempt function activities			▶ \$					
3 Total exempt function expenditures Add lines 1 and 2 Enter	▶ \$							
	line 17b							
•	4 Did the filing organization file Form 1120-POL for this year?							
	•	•						
organization made payments. For each organization listed, e the amount of political contributions received that were prom	· ·	• •						
as a separate segregated fund or a political action committee	•		·					
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political				
(a) Italije	(b) Address	(6) 5114	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)				<u></u>				
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-E	7		0-1-1-1-	C (Form 990 or 990-FZ) 201				

Sche	edule C (Form 990 or 990-EZ) 2012 Johns	on County F	arm Bureau	Assoc.	48-05	64295	Page 2
P	art II-A Complete if the organi	zation is exempt	under section 50	1(c)(3) and f	iled Form 57	68 (election	on under
	section 501(h)).						
Α	Check ▶ ☐ If the filing organization					ited group	member's
	name, address, EIN,						
В	Check ▶ ☐ If the filing organization	on checked box A	and "limited conti	ol" provision	s apply.		
		bbying Expendit			(a) Filing		(b) Affiliated
	(The term "expenditures"		·		organization's	otals	group totals
	 Total lobbying expenditures to influence put 			ļ			
	b Total lobbying expenditures to influence a		lobbying)	ļ.			
4	c Total lobbying expenditures (add lines 1a	and 1b)		-			
	d Other exempt purpose expenditures	-					
	e Total exempt purpose expenditures (add li	-					
	f Lobbying nontaxable amount Enter the an	nount from the followin	g table in both				
	columns	<u> </u>					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	ble amount is			1	
	Not over \$500,000	20% of the amount on li	ne 1e				
	Over \$500,000 but not over \$1,000,000		ne excess over \$500,000			-	
	Over \$1,000,000 but not over \$1,500,000		ne excess over \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000		excess over \$1,500,000				
	Over \$17,000,000	\$1,000,000		\			
	g Grassroots nontaxable amount (enter 25%			F			
	h Subtract line 1g from line 1a. If zero or lessi Subtract line 1f from line 1c. If zero or less	•		ŀ			
		•	lid the erganization file	L Form 4720			
	j If there is an amount other than zero on eit reporting section 4911 tax for this year?	ther lifte in or lifte 11, o	nd the organization me	F01111 4720			Yes No
	reporting section 4911 tax for this year?	<u></u>		.			Tes NO
		_	ng Period Under	•	•		
	(Some organizations the				•		five
	columns be	low. See the inst	tructions for lines	2a through	2f on page 4	.)	
	Lob	bying Expenditu	res During 4-Yea	Averaging	Period		
	Calendar year (or fiscal year						
	beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2	a Lobbying nontaxable amount						
	b Lobbying ceiling amount						
	(150% of line 2a, column(e))						
	c Total lobbying expenditures						
	d Grassroots nontaxable amount						
	e Grassroots ceiling amount						
	(150% of line 2d, column (e))			 			
	f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2012

48-0564295

	t ii-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	OT filed Fo		68		Page
Ear .	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(6	a)	(t)	
	ription of the lobbying activity	Yes	No	Amo	ount	_
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?					
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
d	Mailings to members, legislators, or the public?			-		
e	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?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			· · · · · · · · · · · · · · · · · · ·		
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6).	1(c)(5), oı	section	on		
			-		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1_1_	· X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	X	<u> </u>
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	_		3		X
	t III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes."				3, is	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
	political expenses for which the section 527(f) tax was paid).					
	Current year		2a			
	Carryover from last year		2b			
_	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
F	and political expenditure next year? Tayable apparent of labburgs and political expenditures (see yesters)		4			
<u>5</u>	Taxable amount of lobbying and political expenditures (see instructions) 1 V Supplemental Information		5		_	
	plete this part to provide the descriptions required for Part I.A. line 1. Part I.P. line 4. Part I.C. line 5. Part II.A. (af	Shatad are	. <u>.</u>			

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Schedule C (Form 990 or 990-EZ) 2012

Johnson County Farm Bureau Assoc.

48-0564295

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047 Open to Public

▶ Attach to Form 990.▶ See separate instructions. Inspection Name of the organization Employer identification number Johnson County Farm Bureau Assoc. 48-0564295 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (duning year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Revenues included in Form 990, Part VIII, line 1

\$

Sche	dule D (Form 990) 2012 Johnson	County	Farm	Bur	eau Ass	oc.	48-056	4295	Page 2
Pa	ert III · Organizations Maintainin	g Collectio	ns of A	Art, His	torical Tre	asures, or	Other Sir	nilar Assets	(continued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other i	records,	check ar	ny of the follow	ring that are a	significant us	se of its	
а	Public exhibition		d 🗍	Loan or	exchange prog	grams			
b	Scholarly research		е 🦳	Other					
С	Preservation for future generations		_						
4	Provide a description of the organization's co	ollections and	explain h	ow they	further the org	janization's ex	empt purpos	e in Part	
	XIII								
5	During the year, did the organization solicit of	r receive dona	ations of a	art, histo	rical treasures	, or other sim	ılar		
	assets to be sold to raise funds rather than to	o be maintaine	ed as par	t of the c	rganization's o	collection?			Yes No
Pa	ert IV Escrow and Custodial Ar					ization ans	wered "Ye	s" to Form 990	, Part IV,
	line 9, or reported an amou	nt on Form	990, P	art X, I	ine 21				
1a	Is the organization an agent, trustee, custodi	ian or other int	ermediar	y for cor	ntributions or o	ther assets no	ot		
	included on Form 990, Part X?								Yes No
þ	If "Yes," explain the arrangement in Part XIII	and complete	the follow	wing tabl	е				
									Amount
	Beginning balance							1c	
	Additions during the year							1d	
е	Distributions during the year							1e	
f	Ending balance							1f	
	Did the organization include an amount on F								☐ Yes ☐ No
	If "Yes," explain the arrangement in Part XIII								
Pa	ert V Endowment Funds. Com								
		(a) Current	year	(1	o) Prior year	(c) Two yea	rs back	(d) Three years back	(e) Four years back
	Beginning of year balance				 				-
	Contributions							· · · · · · · · · · · · · · · · · · ·	
С	Net investment earnings, gains, and								
	losses								-
	Grants or scholarships					-			-
е	Other expenditures for facilities and								
	programs			L.		 	<u></u> _		
T	Administrative expenses					 		<u> </u>	
9	End of year balance			4 4		<u>l</u>			
2	Provide the estimated percentage of the curr	•	-	line 1g, o	column (a)) ne	eld as			
	Board designated or quasi-endowment ► Permanent endowment ► %		%						
	Permanent endowment ► % Temporarily restricted endowment ►	9/							
·	The percentages in lines 2a, 2b, and 2c short	70 uld agual 1009	,						
32	Are there endowment funds not in the posse	•		on that a	ro hold and ad	Impostored for	the		
Ja	organization by	ssion or the or	gariizatic	ווומנ מו	re neio ano ao	ministered for	me		Yes No
	(i) unrelated organizations								3a(i)
	(ii) related organizations								3a(ii)
b	If "Yes" to 3a(ii), are the related organization	e lietad ae ragi	ured on	Schedul	a P2				3b
4	Describe in Part XIII the intended uses of the	•							[JD]
Pa	art VI Land, Buildings, and Equ					10		· · · · · ·	
	Description of property		st or other b	-	(b) Cost or		(c) Accu	mulated	(d) Book value
		(u	nvestment)		(oth			ciation	• ,
1a	Land				1	02,478			102,478
	Buildings					24,218	· 2	212,176	112,042
	Leasehold improvements		-			, == 3	_		
	Equipment					15,523		14,788	· 735
	Other	-						<u> </u>	
	I. Add lines 1a through 1e (Column (d) must e	equal Form 99	0, Part X	, column	(B), line 10(c)				215,255

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

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 revenue, gains, and other support per audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements	Sche	dule D (Form 990) 2012 Johnson County Farm Bureau As	ssoc.	48-056429	5	Page 4				
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveres of prior year grants c Recoveres of year year year year year year year year	Part XI' Reconciliation of Revenue per Audited Financial Statements With Revenue per Return									
a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and iosses per audited financial statements 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) 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part IX, line 25 b Other (Describe in Part XIII) 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part IX, line 7b b Other (Describe in Part XIII) c Add lines 2a through 2d 5 Total expenses Add lines 9 and 4c. (This must equal Form 990, Part III, line 7b c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part II, line 18) 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part II, line 18) 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part II, line 18)	1	Total revenue, gains, and other support per audited financial statements		1	1					
b Donated services and use of facilities c Recoveries of pnor year grants d Other (Describe in Part XIII) 2	2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		1						
c Recovenes of pror year grants d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) c Add separate location of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 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 (Describe in Part XIII) c Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	а	Net unrealized gains on investments	2a		1					
d Other (Describe in Part XIII)	b	Donated services and use of facilities	2b		1					
Example Add lines 2a through 2d 3 3 3 3 3 3 3 3 3	C	Recovenes of pnor year grants	2c		- 1					
3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 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 (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	d	Other (Describe in Part XIII)	2d		- 1					
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 7 Total expenses and losses per audited financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 1 Total expenses and use of facilities 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 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	е	Add lines 2a through 2d			2e					
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	3	Subtract line 2e from line 1			3					
b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 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 c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:								
to Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Fart XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 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 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1					
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	b	Other (Describe in Part XIII)	4b							
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 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 c Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	С	Add lines 4a and 4b			4c					
1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5					
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 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	Pa	Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return								
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 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	1	Total expenses and losses per audited financial statements			1					
b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	2	Amounts included on line 1 but not on Form 990, Part IX, line 25			- 1					
c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 2c 2d 4e 4e 4e 5	а	Donated services and use of facilities	2a		- 1					
d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	b	Prior year adjustments	2b		- 1					
e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 2e 4a 4a 4c 5	С	Other losses	2c							
3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 3 4a 4b 4c 5	d	Other (Describe in Part XIII)	2d		1					
4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	е	Add lines 2a through 2d		<u> </u>	2e					
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	3	Subtract line 2e from line 1	, ,	Ĺ	3					
b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 5	4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			1					
c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5	а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1					
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	b	Other (Describe in Part XIII)	4b							
Total Superiors That into Sunta 181 (Title Interes)	С	Add lines 4a and 4b]	4c					
	5				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 IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2012 Johnson County Farm Bureau Assoc.

48-0564295

Page 5

Part XIII Supplemental Information (continued)

SÇHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

• Attach to Form 990 or 990-EZ.

2012 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Johnson County Farm Bureau Assoc.

Employer identification number 48-0564295

Form 990 - Organization's Mission or Most Significant Activities

To promote the development of the most profitable and permanent system of agriculture; the most wholesome and satisfactory living conditions; the highest ideals in home and community life and a general interest in the business of farming and in rural life; and to encourage active citizenship responsibility in local, state, national, and international affairs.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders
The organization has members.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

The organization has voting members who may elect one or more members of the governing body.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 A copy of the Form 990 is provided to each officer and director.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Persons covered by the policy may be required to annually disclose or
provide an update of their interests to the Johnson County Farm Bureau
President on a formal disclosure form. Disclosure may include: listing
family members, substantial business or investment holdings, and other
transactions or affiliations with businesses and other organizations which
could present a conflict of interest. For each interest disclosed to the
Johnson County Farm Bureau President, he/she will determine whether to (a)

Name of the organization

Johnson County Farm Bureau Assoc.

Employer identification number 48-0564295

take no action; (b) assure full disclosure to the Board of Directors and other individuals covered by the policy; (c) ask the person to excuse themselves from participation in related discussions or decisions; or (d) ask the person to resign from his or her position with the Johnson County Farm Bureau.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Johnson County Farm Bureau does not currently make its governing documents,

conflict of interest policy, or financial statements available to the

general public.

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury Internal Revenue Service Name(s) shown on return

(99)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No

Identifying number

179

	Johnso	<u>on County Fa</u>	<u>rm Bureau A</u>	ssoc.			48-	<u>056</u>	4295
Busine	ess or activity to which this form relates								
	perations				_				
Pa	•	ense Certain Prop							
		any listed property	, complete Part V b	efore you co	mple	e Part I.			
1	Maximum amount (see instruction	•						2	500,000
2	Total cost of section 179 property placed in service (see instructions)								0 000 000
3	Threshold cost of section 179 property before reduction in limitation (see instructions)							3	2,000,000
4	Reduction in limitation Subtract		•					4	
5	Dollar limitation for tax year Subtract							5	
6	(a) Descrip	otion of property	(B) C	ost (business use or	Ny)	(c)	Elected cost		
									
7	Listed arough: Enter the amount	ot from here 20		.	T -				
7 8	Listed property Enter the amoun			7	7				
9	Total elected cost of section 179	· · ·	in column (c), lines 6 ar	iu /				8	
10		Tentative deduction Enter the smaller of line 5 or line 8 Carryover of disallowed deduction from line 13 of your 2011 Form 4562						10	
11	Business income limitation Ente	•		zero) or line 5 (s	oo incl	nictions)		11	· · · · · · · · · · · · · · · · · · ·
12	Section 179 expense deduction		•		ice ilisi	i uciions)		12	
13	Carryover of disallowed deduction	•		e 11	13			<u>''-</u>	
	: Do not use Part II or Part III belo					<u>-</u>			
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ation Allowance ar		tion (Do not	ınclı	ıde liste	d proper	tv) (S	See instructions)
14	Special depreciation allowance f	· -							
	during the tax year (see instructi	ons)						14	
15	Property subject to section 168(f	f)(1) election						15	
16	Other depreciation (including AC	RS)						16	821
Pa	rt III MACRS Deprecia	ation (Do not inclu	de listed property)	(See instruc	tions)			
			Section A	<u>. </u>					
17	MACRS deductions for assets p	laced in service in tax ye	ears beginning before 20	012				17	9,978
18	If you are electing to group any assets pla						>	<u> </u>	
	Section B	—Assets Placed in Se			ne Ger	ieral Depi	reciation S	Systen	n
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) C	Convention	(f) Metho	od	(g) Depreciation deduction
19a	3-year property	_			<u> </u>				
b	5-year property	_			<u> </u>		ļ		
С	7-year property	_							
	10-year property	—			<u> </u>				
	15-year property	_							
f_						 -			
<u>g</u>				25 yrs			S/L		
n	Residential rental property			27 5 yrs	1	MM	S/L		
	Nonresidential real			27 5 yrs	1	MM MM	S/L		
•	property	-		39 yrs	 		S/L		
		-Assets Placed in Ser	vice During 2012 Tax	Vear Using the	Altor	MM native De	S/L preciation		
202	Class life	// // // // // // // // // // // // //	l l l l l l l l l l l l l l l l l l l	Tour Comy the	T	induve be			
	12-year	\dashv		12 yrs		-	S/L S/L		-
	40-year			40 yrs	 	MM	S/L		
	art IV Summary (See II	nstructions)	L	1 40 A12	<u> </u>	IAIIA	<u> </u>		
21	Listed property Enter amount from							21	
22	Total. Add amounts from line 12		nes 19 and 20 in column	(a) and line 21	Enter	here		 	
_	and on the appropriate lines of y							22	10,799
23	For assets shown above and pla	•	•						20,10
	portion of the basis attributable t		year, erner the	-	23				
	D								4500

There are no amounts for Page 2