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Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047 Open to Public

		27/22/12			, mepadation
<u> </u>	For the 2012 o	alendar year, or tax year beginning $07/01/12$ , and ending $06/30/2$	13.	T	<del></del>
<b>B</b> _ (	Check if applicable	C Name of organization		D Employ	rer identification number
- 12	Address change	Wyandotte County Farm Bureau Assoc.		ŀ	
乛.	Name change	Doing Business As		48-	6110433
=	•	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	one number
ا <u>ا</u>	nitial return	9340 Parallel		913	3-299-0914 ·
	Terminated	City, town or post office, state, and ZIP code			
$\neg$	Amended return	Kansas City KS 66112		G Gross rece	ıpts \$ 96,665
$\equiv$		F Name and address of principal officer	1	0 0.000.000	
_] .	Application pending	Jerry Sipes	H(a) Isthisa	group return for a	ıffiliates? Yes X No
		14427 Kreider Rd	H(b) Are all a	ffiliates included	12 Yes No
			1 ' '		(see instructions)
			-		,
	Tax-exempt status	501(c)(3) X 501(c) ( · 5 ) ◀ (insert no ) 4947(a)(1) or 527	-		
	Website P	I/A		xemption numb	77.0
	Form of organization		ear of formation	L951	M State of legal domicile KS
P	arti Sı	ımmary			
	1 Briefly de	scribe the organization's mission or most significant activities			
4	See	Schedule O			
ၓၟ					
ĕ	1				
-					
ž	2 Check th	is box Fig. if the organization discontinued its operations or disposed of more than 25%	of its net asset	ts	
တိ			or its net asser	1 1	224
නේ	3 Number	of voting members of the governing body (Part VI, line 1a)		3	
Ś	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	224
Ę	1	nber of individuals employed in calendar year 2012 (Part V, line 2a)		5	1
Activities & Governance		nber of volunteers (estimate if necessary)		6	41
ĕ		•		<u> </u>	0
		elated business revenue from Part VIII, column (C), line 12		7a	
	b Net unre	lated business taxable income from Form 990-T, line 34		7b	0
ø	Ì	TILCEIVED 7	Prior Ye		Current Year
	8 Contribu	tions and grants (Part VIII, line 1h)		23,195	28,467
Ĕ	9 Program	service revenue (Part VIII, line 2g)		6,752	34,881
Revenue	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		.2,720	14,335
œ	11 Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1	.8,117	<u>16,628</u>
	L	enue – add lines 8 through 11 (must equal Part VIII = column (A) line 12).		0,784	94,311
	1	nd similar amounts paid (Part IX, column (A), lines 1–3)		5,000	1,500
		paid to or for members (Part IX, column (A), line 4)	<del></del>	0	0
	45 Calaman		2	28,885	30,026
Expenses	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)		0	30,020
Sue	16a Professi	onal fundraising fees (Part IX, column (A), line 11e)			
×	<b>b</b> Total fun	draising expenses (Part IX, column (D), line 25) ▶ U			60 101
Ш	17 Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,326	69,194
	18 Total exp	penses Add lines 13–17 (must equal Part IX, column (A), line 25)	9	0,211	100,720
		eless expenses Subtract line 18 from line 12		573	-6,409
5			Beginning of Cu		End of Year
Net Assets or	20 Total as:	sets (Part X, line 16)	90	05,072	907,016
Ass	21 Total liat	pilities (Part X, line 26)		1,257	1,441
ള	22 Net asse	ets or fund balances Subtract line 21 from line 20	90	3,815	905,575
		gnature Block			
					des and halvaf it is
U	nder penalties of	perjury, I declare that I have examined this return, including accompanying schedules and statements	s, and to the best	or my knowie	age and belief, it is
	ue, correct, and c	omplete Declaration of preparer (other than officer) is based on all information of which preparer has	any knowledge		
		Rerry Chulle			
Sig	in 🖊	Signature of officer		/ Date	A /
		Kerry Mueller County Coordinator		/ IA	19/12
He			<del></del>		7/3
		Type or print name and t(tie)			
	Print/Ty	pe preparer's name Preparer's signature	Date	Check	f PTIN
Pai	d			self-en	nployed
Pre	parer Firm's o	This tax return	•	Firm's EIN	
	e Only	prepared by a		, amount	·
J31					
	Firm's a			Phone no	<del></del>
_		ss this return with the preparer shown above? (see instructions)			Yes No
For	Paperwork Red	uction Act Notice, see the separate instructions.			Form <b>990</b> (2012)

	2) Wyandotte Co			48-6110433		Page 2
Part-III	Statement of Program Check if Schedule O c	•		s Port III		X
1 Bnefly de	escribe the organization's miss		to any question in this	s rait III		
· See So	chedule O					
						· · · · · · · · · · · · · · · · · · ·
	organization undertake any sig	nificant program services	s during the year which we	re not listed on the		□ <b></b>
-	m 990 or 990-EZ? describe these new services of	on Schedule O				Yes X No
	organization cease conducting		nges in how it conducts, ar	ny program		
services						Yes X · No
	describe these changes on So the organization's program se		for each of its three largest	nrogram services, as measi	ired by	
	es Section 501(c)(3) and 501(c)					
the total	expenses, and revenue, if any	, for each program servi	ce reported			
4a (Code	) (Expenses \$		ncluding grants of \$	) (Re	evenue \$	
	ctivities offer	red to educat	te and/or imp	rove quality		•
	fe for members.					
Inclu	de health, safe	cy, Citizens	snip and mark	ecing.		
4b (Code	) (Expenses \$		including grants of \$	) (Re	evenue \$	)
4c (Code	) (Expenses \$		including grants of \$	) (Re	evenue \$	
4d Other pro	ogram services (Describe in S	Schedule O )				
(Expens	es \$	including grants of	\$	) (Revenue \$		)
	ogram service expenses▶	<del></del>	<del></del>			Form <b>990</b> (2012
DAA						rnm 3737U1 (2012

#### Part IV **Checklist of Required Schedules**

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1		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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	İ		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5	x	
	Part III	3		
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			x
7		6	<b></b>	
'	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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<b>-</b>		
0	complete Schedule D, Part III	8	ļ	x
9		<u> </u>		_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a		<u> </u>	
	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	•		
10	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,	1.0		
• •	VII, VIII, IX, or X as applicable			
а		İ	•	Ī
-	complete Schedule D, Part VI	11a	х	}
b		110		
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С		112		
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d				_
	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		х
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	1	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		1	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		1	
	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?	}		
	if "Yes," complete Schedule G, Part III	19	ļ	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	I

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		1 62	NO
	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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		_	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X ·
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?			
	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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			Ī
	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		Χ.
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		X.
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			ŀ
	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			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X.	

Form **990** (2012)

Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

 $\mathbf{x}$ 

DAA

	990 (2012) Wyandotte County Farm Bureau Assoc. 48-6110433			age <b>6</b>
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O	See instru	uction	
800	Check if Schedule O contains a response to any question in this Part VI			_ X
Sec	tion A. Governing Body and Management	<del></del>	Voc	No
10	Enter the number of voting members of the governing body at the end of the tax year   1a   224		Yes	NO
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			
ь	Enter the number of voting members included in line 1a, above, who are independent  1b 224			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		Х
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X.	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X.	
b	Each committee with authority to act on behalf of the governing body?	8b	X.	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			<b>.</b> ,
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9 Codo \		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code.)	Yes	
100	Did the erganization have lead charters branches or affiliates?	10a	res	No X
10a	Did the organization have local chapters, branches, or affiliates?	104		
þ	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?	10ь		
115	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	X.	<del>                                     </del>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	110		$\vdash$
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	ж.	Ī
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
_	describe in Schedule O how this was done	12c	X.	
13	Did the organization have a written whistleblower policy?	13	Χ.	
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?			
а	The organization's CEO, Executive Director, or top management official	15a		Χ·
b	Other officers or key employees of the organization	15b		X
	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?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			ŧ
	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed None - Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
18	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Office Secretary · 9340 Parallel ·			
Ka	ansas City . KS 66112	913-29	9-0	914

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

(A) Name and Title	hours per (do not check more than of box, unless person is both (list any officer and a director/trust		an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the				
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1)Diana Tuttle										
	0.00	1								
Board Member	0.00	X						0	0	0
(2) Floyd Eberth										
	0.00								_	
Board Member	0.00	X				Щ		0	0	0
(3)Oran Eddy			ļ							
	0.00								_	
Board Member	0.00	X	_		<u> </u>			0	0	0
(4) Paul Meinke				Ì						
	0.00	l							_	
Board Member	0.00	X						0	0	0
(5) Jerry Sipes										
	0.00							_	_	_
President	0.00	↓		X		<u> </u>		0	0	0
(6) Tammi VanFleet										
	0.00								_	_
Vice-President	0.00	<u> </u>	L.,	X		<u> </u>		0	0	0
(7) Gary Wohlforth										
	0.00				l					
Sec/Treas	0.00			X				0	0	0
(8)										
(9)		-		_	-	ļ	 			
(10)										
(11)				-						

Pai	rt VII . Section A. Officers	s, Directors, Tru	istee	s, K	ey E	mpl	oyee	es, a	and Highest Compensated	Employee(continued)			
	Name and title	(B) Average hours per week (list any	bo	x, unk	Pos check ess pe	erson	than out the state of the state	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estima amour othe compen	ated nt of er sation	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from organiz and rei organiz:		
(12)													
(13)													
(14)													
(15)													
(16)								_					
(17)					-	-	-						
(18)													
(19)													
c d	Sub-total  Total from continuation she Total (add lines 1b and 1c)							<b>&gt; &gt; &gt;</b>					
	Total number of individuals (in reportable compensation from	the organization	nited •	to tr	ose	liste	d abo	ove)	who received more than \$1	00,000 in 		Yes	No
3	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line	complete Sched	ule J	for s	uch	ındıv	ridua	1	- · · · · · · · · · · · · · · · · · · ·		3		X.
5	organization and related organ individual Did any person listed on line 1	nizations greater	than ue co	\$150 ompe	,000 ensa	i? If '	"Yes, from	" co any	mplete Schedule J for such unrelated organization or inc		4		<u>x</u> .
<u></u>	for services rendered to the or ion B. Independent Contract		es," c	omp	lete	Sche	edule	J fo	or such person		5	<u> </u>	<u>X</u> ·
1	Complete this table for your five compensation from the organic	e highest compe	nsate mper	ed in	depe	nde or the	nt co e cale	ntra	ctors that received more that ir year ending with or within	n \$100,000 of the organization's tax year			
	Name and	(A) d business address							Descrip	(B) tion of services	с	(C) ompensa	tion
		-										_	
	Total number of independent of	contractors (inclu	dina	but n	ot lir	nitec	1 to "	1086	e listed above) who				<del></del>
DAA	received more than \$100,000	of compensation	from	the	orga	nıza	tion I	<u> </u>			Fı	m 99	<b>0</b> (2012)

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (A) Total revenue (C) Unrelated (D) Revenue exempt function business excluded from tax under sections revenue revenue 512, 513, or 514 Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 1a 1b b Membership dues 1c c Fundraising events d Related organizations 1d 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 28,467 1f g Noncash contributions included in lines 1a-1f \$ 28,467 h Total. Add lines 1a-1f Program Service Revenue Busn Code 110000 34,881 34,881 2a County Dues ь f All other program service revenue 34,881 q Total. Add lines 2a-2f Investment income (including dividends, interest, 2,306 12,029 and other similar amounts)  $\cdot 14,335$ Income from investment of tax-exempt bond proceeds Þ Royalties (II) Personal (ı) Real 18,000 6a Gross rents **b** Less rental exps 18,000 c Rental inc or (loss) ▶ 18,000 18,000 Net rental income or (loss) Gross amount from (i) Securities (II) Other sales of assets other than inventor b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events ▶ 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses  $\triangleright$ c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 982 returns and allowances b Less cost of goods sold þ 2, 354 -1,372-1,372 c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b All other revenue Total. Add lines 11a-11d 0 28,657 94,311 37,187 Total revenue. See instructions

<u> Pa</u>	rt IX Statement of Functional Exp	enses			
Sect	on 501(c)(3) and 501(c)(4) organizations must con			ete column (A)	
	Check if Schedule O contains a respo				
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
_	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in	1 500		1	
	the U.S See Part IV, line 22	1,500			
3	Grants and other assistance to governments,			1	
	organizations, and individuals outside the			1	
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members			<del></del>	
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				
7	persons described in section 4958(c)(3)(B)	25,387			
7	Other salaries and wages	. 23,367			
8	Pension plan accruals and contributions (include	İ			
	section 401(k) and 403(b) employer contributions)	2,474			<del></del>
9	Other employee benefits Payroll taxes	. 2,165			
10 11	Fees for services (non-employees)	. 2,103			<del> </del>
	Management				
a b	Legal				
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	-			
9	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	349			
13	Office expenses				······································
14	Information technology				
15	Royalties				
16	Occupancy	· 24,127		-	
17	Travel	. 3,428			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	18,197			
20	Interest	15			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,111			
23	Insurance				
24	Other expenses Itemize expenses not covered			***************************************	
	above (List miscellaneous expenses in line 24e. If	1			
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Contributions	1,802			
b	Fair Expense	1,599			
c	Supplies	1,456			
d	Newsletter	1,320			-
e	All other expenses	1,790	· - ·		<del></del>
25	Total functional expenses Add lines 1 through 24e	100,720	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				

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 24,539 14,851 Cash—non-interest bearing 59,479 59,933 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 6 7 Notes and loans receivable, net 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 457,732 other basis. Complete Part VI of Schedule D. 10a 90,588 377,501 367,144 10b 10c b Less accumulated depreciation 343,553 365,088 11 Investments—publicly traded securities 11 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 905,072 907,016 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,257 1,441 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 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 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 1,257 1,441 26 Total liabilities. Add lines 17 through 25 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 28 Temporanly restricted net assets Permanently restricted net assets 29 X Organizations that do not follow SFAS 117 (ASC 958), check herd 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 31 903,815 905,575 32 32 Retained earnings, endowment, accumulated income, or other funds 905,575 903,815 33 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 905,072 34 907,016

	1990 (2012) Wyandotte County Farm Bureau Assoc. 48-6110433			Pag	ge 12
Pa	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		94,:	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	00,	720
3	Revenue less expenses Subtract line 2 from line 1	3			<u>409</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9	03,	<u>815</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		8,:	169
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	9	05,	575
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
			·	Yes	No
1	Accounting method used to prepare the Form 990 Cash . X Accruat Other				
	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	1	<b>X</b> -
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				-
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	1	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis	•		-	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for 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				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			1	
	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		

#### 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.

2012
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

• 8	Section 501(c)(4), (5), or (6) organizations Complete Part III				
Nan	wyandotte County Farm	Bureau Assoc.		Employer identificat 48-61104	
Pai	t I-A Complete if the organization is exem	pt under section 501(c)	or is a section	527 organization	·
1	Provide a description of the organization's direct and indirect	t political campaign activities in f	Part IV		
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pai	t I-B Complete if the organization is exem	pt under section 501(c)(	3).		
1	Enter the amount of any excise tax incurred by the organizat	tion 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?				Yes No
b	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the organization is exem	pt under section 501(c),	except section	n 501(c)(3).	
1	Enter the amount directly expended by the filing organization	n for section 527 exempt function	n		
	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	r here and on Form 1120-POL,			
	line 17b			▶ \$	
4	Did the filing organization file Form 1120-POL for this year?				Yes No
5	Enter the names, addresses and employer identification num	nber (EIN) of all section 527 poli	tical organizations	to which the filing	
	organization made payments. For each organization listed, e	enter the amount paid from the fi	iling organization's	funds Also enter	
	the amount of political contributions received that were prom	ptly and directly delivered to a s	eparate political or	ganization, such	
	as a separate segregated fund or a political action committee	e (PAC) If additional space is no	eeded, provide info	rmation in Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly
					delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					l

Sche	edule C (Form 990 or 990-EZ) 2012 <b>Wyand</b>	tte County	Farm Burea	u Assoc	. 4	8-6110433	Page <b>2</b>
Pa	art II-A Complete if the organiz						
	section 501(h)).	·				·	
Α	Check ▶ ☐ if the filing organization	on belongs to an	affiliated group (an	d list in Part	IV eac	ch affiliated grou	p member's
	name, address, ElN,	expenses, and sl	hare of excess lobl	oying expend	ditures	)	
В	Check ▶ ☐ if the filing organization	on checked box A	and "limited contr	ol" provision	s apply	y	
	Limits on Lot	bying Expendit	ures			(a) Filing	(b) Affiliated
	(The term "expenditures"	means amounts	paid or incurred.)		org	janization's totals	group totals
18	a Total lobbying expenditures to influence pull	olic opinion (grass roo	ots lobbying)	<u> </u>			· · · · · · · · · · · · · · · · · · ·
ı	b Total lobbying expenditures to influence a le	egislative body (direct	lobbying)				
(	c Total lobbying expenditures (add lines 1a a				<del></del>		
	d Other exempt purpose expenditures						<del></del>
	e Total exempt purpose expenditures (add lin	•					<del></del>
	f Lobbying nontaxable amount Enter the am	ount from the followin	g table in both				
	columns	ı			<del></del>		<del></del>
	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			1	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	ne excess over \$500 000			I	
	Over \$1,000,000 but not over \$1,500,000         \$175,000 plus 10% of the excess over \$1,000,000					1	
	Over \$1,500,000 but not over \$17,000,000         \$225,000 plus 5% of the excess over \$1,500,000					1	
_	Over \$17,000,000	\$1,000,000					
	g Grassroots nontaxable amount (enter 25%	•					
ı	h Subtract line 1g from line 1a If zero or less						<del></del>
	i Subtract line 1f from line 1c If zero or less,			l			<u> </u>
	j If there is an amount other than zero on eith	er line 1h or line 1i, o	lid the organization file	Form 4720			ш. г
_	reporting section 4911 tax for this year?						Yes No
		4-Year Averagii	ng Period Under S	Section 501	h)		
	(Some organizations tha					mplete all of the	e five
	columns bel	ow. See the inst	tructions for lines	2a through	2f on	page 4.)	
	Labi	wing Evnanditu	res During 4-Year	Avereging	Dorio	d	<u></u>
	LODI	bying Expenditu	res During 4-Teal	Averaging	Perio	<u>u</u>	
	Calendar year (or fiscal year	(a) 2009	<b>(b)</b> 2010	(c) 201		(d) 2012	(e) Total
	beginning in)	(a) 2003	(6) 2010	(0, 201		(4) 2012	(e) rotal
2	a Lobbying nontaxable amount						
$\neg$	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))						

Schedule C (Form 990 or 990-EZ) 2012

f Grassroots lobbying expenditures

Sched	tule C (Form 990 or 990-EZ) 2012 Wyandotte County Farm Bureau Assoc.	48-6110	433			Page
Pai	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	s NOT filed F	orm 5	5768		
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(	a)		b)	
	cription of the lobbying activity.	Yes	No	Am	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local					••••
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	: Media advertisements?					
d	Mailings to members, legislators, or the public?					
	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	i Other activities?					
j	j Total Add lines 1c through 1i					
	a 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					
	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?	1				
Pai	at III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), o	r sec	tion		
	501(c)(6).					
					Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by members?			_ 1	X	: ]
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	X	
_3_	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		- X
Pa	at III-B Complete if the organization is exempt under section 501(c)(4), section					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered '	"No," OR (b)	if Par	t III-A, line	∍ 3, i:	S
	answered "Yes."					
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).					
а	a Current year		2a			
b	Carryover from last year		2b			
С	C Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			

and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)

**Supplemental Information** 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

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

Part IV

Wyandotte County Farm Bureau Assoc. 48-6110433 Schedule C (Form 990 or 990-EZ) 2012

Part IV Supplemental Information (continued) Page 4

#### 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

Department of the Treasury ▶ Attach to Form 990. ▶ See separate instructions. Inspection Name of the organization Employer identification number Wyandotte County Farm Bureau Assoc. 48-6110433 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 (b) Funds and other accounts (a) Donor advised funds Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 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 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 Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register 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 Yes No violations, and enforcement of the conservation easements it holds? 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) Yes (i) and section 170(h)(4)(B)(ii)? 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 \$

Assets included in Form 990, Part X

Sched		e County E							qe <b>2</b>
	rt·III Organizations Maintainin		_					(continued)	
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, check	any of the follow	ving that are a	significant use of	its		
а	Public exhibition	d [	] Loan o	r exchange pro	grams				
b	Scholarly research	e [	Other						
С	Preservation for future generations								
4	Provide a description of the organization's c	ollections and explai	n how the	y further the org	ganızatıon's ex	empt purpose in	Part		
	XIII								
5	During the year, did the organization solicit of	or receive donations	of art, his	torical treasures	s, or other sımı	lar			
	assets to be sold to raise funds rather than t								No
Pa	rt IV Escrow and Custodial Ar				ization ansi	wered "Yes" to	Form 990	), Part IV,	
	line 9, or reported an amou				–				
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for c	ontributions or o	other assets no	ot			
	included on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing ta	able				Amount	—
	_							Amount	
	Beginning balance						1c		_
	Additions during the year						1d		—
e	Distributions during the year						1e	_	
T 2-	Ending balance	000 Dad V I.a.	- 040				[ it ]	Yes	No
	Did the organization include an amount on F if "Yes," explain the arrangement in Part XIII			n hae haan proj	udod in Port Y	111		l tes	NU
	rt V Endowment Funds. Com						line 10		
1 4	Elidownient i dias. Com	(a) Current year	1200011	(b) Pnor year	(c) Two yea	- :	hree years back	(e) Four years ba	ack
1a	Beginning of year balance	(4) 54.1.51.1.754.	<u> </u>	<u> </u>	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Contributions								
	Net investment earnings, gains, and	<del></del>							
•	losses		İ			1			
d	Grants or scholarships	-							
	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g	g, column (a)) he	eld as				
а	Board designated or quasi-endowment	%							
b	Permanent endowment ► %	ó							
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%							
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	are held and a	dministered for	the		<u> </u>	
	organization by								No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(II), are the related organization							3b	
4	Describe in Part XIII the intended uses of the				10				
_Pa	rt VI Land, Buildings, and Equ	· · ·			T		<del></del>		
	Description of property	(a) Cost or oti			other basis	(c) Accumula depreciatio	į.	(d) Book value	
		(investm		(60	her)	ueprecialio		. 26 5	27
	Land			<del> </del>	26,527	. 01	036	26,5 338,8	
	Buildings			+	123,845	85	5,036	330,0	03
	Leasehold improvements			<del></del>	7 360		5,552	1,8	000
	Equipment	<del></del>		+	7,360	<u> </u>	, 332	Ι,ο	, 0 0
	Other	ogual Form 000, Da	et V. nali:	nn (B) line 40/s				.367,1	ΔΛ
ota	. Add lines 1a through 1e (Column (d) must	equal Form 990, Pa	r A, colur	ini (b), inie 10(c	·/ /	·····	<u> </u>		2

DAA

	orm 990) 2012 Wyandotte County F			. 48-6110433	Page 3
Part VII	Investments—Other Securities. See Form	<u>n 990, Pa</u>		T	
	(a) Description of security or category		(b) Book value	(c) Method of	
<del></del>	(including name of security)		<del></del>	Cost or end-of-ye	ar market value
(1) Financial o		-	<del></del>		
	eld equity interests				
(3) Other					
(A)		<u> </u>	<del></del>		
(B)		-	<del></del>		· <del></del>
(C)		-	<del></del>	<del></del>	<del>-</del>
(D)					
(E)		<u> </u>			
(F)		<u> </u>			
(G)				<del></del>	
(H)		<u> </u>	<del> </del>	-	
(I)					
	n (b) must equal Form 990, Part X, col (B) line 12)	000 D			//////////////////////////////////////
Part VIII	Investments—Program Related. See For	m 990, Pa			
	(a) Description of investment type		(b) Book value	(c) Method o Cost or end-of-ye	
(1)			·		
(2)					
(3)					
_(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 13)	<b>•</b>		11.1. 11.11.11.11.11	
Part IX	Other Assets. See Form 990, Part X, line	15			
	(a) Descript	tion			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(9)					
(10)					
	n (b) must equal Form 990, Part X, col. (B) line 15.)			<u> </u>	
Part X	Other Liabilities. See Form 990, Part X, III	ne 25			
1.	(a) Description of liability		(b) Book value	_	
(1) Federal	income taxes			_	
(2)			. <u> </u>	<u> </u>	
_(3)					
(4)					
(5)				_	
(6)					
(7)				_	
(8)			·		
_(9)				_	
(10)				_	
(11)				_	
	n (b) must equal Form 990, Part X, col (B) line 25)	<b>•</b>			
2. FIN 48 (AS	C 740) Footnote In Part XIII, provide the text of the footn	ote to the o	ganization's financial	statements that reports the org	anızatıon's
liability for unc	ertain tax positions under FIN 48 (ASC 740) Check here	if the text o	f the footnote has been	n provided in Part XIII	

Schedule D (Form 990) 2012

Sche	dule D (Form 990) 2012 Wyan	dotte Co	unty :	Farm	Bureau	Assoc	48-611043	3 _	Page 4
Pa	rt·XI Reconciliation of R	evenue per A	Audited	Financi	al Stateme	nts With	Revenue per Retur	'n	
1	Total revenue, gains, and other supp	oort per audited fi	inanciał sta	atements				1	
2	Amounts included on line 1 but not o	n Form 990, Parl	t VIII, line 1	12					
а	Net unrealized gains on investments	•				2a			
þ	Donated services and use of facilities	s				2b			
C	Recovenes of pnor year grants 2c								
d	Other (Describe in Part XIII )								
е	Add lines 2a through 2d							2e	
3	Subtract line 2e from line 1					, ,		3	
4	Amounts included on Form 990, Par	t VIII, line 12, but	t not on line	e 1:				1	
а	Investment expenses not included or	n Form 990, Part	t VIII, line 7	'b		4a			
b	Other (Describe in Part XIII)					4b			
C	Add lines 4a and 4b							4c	
5	Total revenue Add lines 3 and 4c. (	•	<u>-</u>		<del></del> /			5	
Pa	rt XII Reconciliation of E	xpenses per	Audited	Financ	ial Stateme	ents Wit	h Expenses per Re	turn	
1	Total expenses and losses per audit	ed financial state	ements					1	
2	Amounts included on line 1 but not of	on Form 990, Part	t IX, line 2	5					
а	Donated services and use of facilitie	s				2a			
b	Prior year adjustments					2b			
С	Other losses					2c			
d	Other (Describe in Part XIII)					2d	<del></del>		
е	Add lines 2a through 2d							2e	
3	Subtract line 2e from line 1					( )		3	
4	Amounts included on Form 990, Par								
а	Investment expenses not included o	n Form 990, Part	t VIII, line 7	<sup>7</sup> b		4a	<del></del>		
b	Other (Describe in Part XIII)					4b	<del></del>		
С	Add lines 4a and 4b							4c	
5	Total expenses Add lines 3 and 4c.	(This must equal	I Form 990	). Part I. li	ne 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 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 Wyandotte County Farm Bureau Assoc. 48-6110433

Page 5

Part XIII Supplemental Information (continued)

#### SCHEDULE 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

Wyandotte County Farm Bureau Assoc. Employer identification number 48-6110433

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 Wyandotte 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 Wyandotte County Farm Bureau President, he/she will determine whether

Name of the organization

Wyandotte County Farm Bureau Assoc.

Employer identification number 48-6110433

to (a) 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 Wyandotte County Farm Bureau.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Wyandotte County Farm Bureau does not currently make its governing documents, conflict of interest policy, or financial statements available to the general public.

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation
Unrealized Investment Gain/Loss \$ 8,169

Year Ended: June 30, 2013

48-6110433

Wyandotte County Farm Bureau Assoc. 9340 Parallel Kansas City, KS 66112

# **Electing out of Bonus Depreciation Allowance for All Eligible Depreciable Property**

The taxpayer elects out of first-year bonus depreciation allowance under IRC Section 168(k) for all eligible asset classes of depreciable property acquired after December 31, 2007. This election applies to all eligible depreciable property placed in service during the tax year.

## 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

Name(	· · ·								fying number -6110433		
Busine	ss or activity to which this form relates		<del></del>							<del>-</del>	
O	perations										
Pa	rt! Election To Exper	nse Certain Prop	erty Under Sec	tion 17	79						
	Note: If you have a	any listed property	, complete Part	V befo	ore you co	mple	te Part I		,,		
1	Maximum amount (see instruction	s)							1	500,000	
2	Total cost of section 179 property	placed in service (see	instructions)						2		
3	Threshold cost of section 179 prop	perty before reduction	ın lımıtatıon (see ıns	truction	s)				3	2,000,000	
4	Reduction in limitation Subtract lin	ne 3 from line 2 If zero	or less, enter -0-						4		
5	Dollar limitation for tax year Subtract lii	_					ctions		5		
6	(a) Description	on of property		(b) Cost (	business use on	y)	(c) E	lected cost			
	<u> </u>	<del></del>									
7	Listed property Enter the amount				Į.	7					
8	Total elected cost of section 179 p	• •		6 and 7					8	<del></del>	
9	Tentative deduction Enter the sm								9	<del> </del>	
10	Carryover of disallowed deduction	•							10		
11	Business income limitation Enter		•		•	ee insi	ructions)		11	<del></del>	
12	Section 179 expense deduction A	·		nan line	11	40			12	***************************************	
13 Note	Carryover of disallowed deduction  : Do not use Part II or Part III below					13					
	et II Special Depreciat	<del></del>		oiatio	n (Do not	ınalı	ıda lista	d propor	+, ) (	Coo instructions)	
							ude listet	ı propei	<u>(y. ) (S</u>	see instructions)	
14	Special depreciation allowance for		ier triari listeu prope	erty) piac	æa in service	•			14		
4-	during the tax year (see instruction	•							15		
15	Property subject to section 168(f)(	•							16	14,735	
16 Da	Other depreciation (including ACR Int III MACRS Depreciat		ide listed proper	rtv ) (S	ee instruc	tions	١		1 10 1	14,755	
	III IIIACKS Deprecial	tion (Do not meio	Section Sectio		iee iiisti u <u>c</u>	lions	)				
17	MACRS deductions for assets pla	ced in service in tax ve							17	218	
18	If you are electing to group any assets place	•	• •		eccounts check!	here		ightharpoonup	· · · · · · · · · · · · · · · · · · ·		
<u></u>		-Assets Placed in Se					neral Depr	eciation	Systen	 1	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for deprecent (business/investment only-see instructions)	ciation	(d) Recovery period		Convention	(f) Meth		(g) Depreciation deduction	
19a	3-year property								Ì		
b	5-year property										
С	7-year property										
d	10-year property										
	15-year property		4	,750	15.0		HY	S	/L	158	
f	20-year property										
<u>g</u>	25-year property				25 yrs			S/L			
h	Residential rental				27 5 yrs		MM	S/L			
	property				27 5 yrs		ММ	S/L	•		
i	Nonresidential real				39 yrs		ММ	S/L			
	property					L	MM	S/L		···	
	Section CA	Assets Placed in Ser	vice During 2012	Tax Yea	r Using the	Alter	native De <sub>l</sub>	preciatio	n Syste	em	
20a	Class life					L		S/L			
b_	12-year				12 yrs			S/L		· · · · · · · · · · · · · · · · · · ·	
С	40-year		L		40 yrs		MM	S/L	-		
Pa	ert IV Summary (See ins	structions)							<del>,</del>		
21	Listed property Enter amount from	n line 28							21		
22	<b>Total.</b> Add amounts from line 12, and on the appropriate lines of you	=				Enter	here		22	15,111	
23	For assets shown above and placed in service during the current year, enter the										
	portion of the basis attributable to section 263A costs 23										
							•				