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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

benefit trust or private foundation)

		ue Service				e a copy			_			requirements		Inspectio	n
			endar year, or tax					2012			nding		/2013		
		applicable	C Name of organiza		RREBON	NE PAI	RISH	FARM BUI	REAU,	INC		D Employer	identification	number	
<u></u> ⊿	ddress	change	Doing Business A	s								72-0679896			
	lame ch	nange	Number and stree	et (or PO bo	x if mail is not	delivered	to stre	et address)	Room/s	suite	-	E Telephone	number		
ir 🔲	ntial reti	urn	P O BOX 95004						-			(985) 876-2	876		
Пт	erminat	ted	City, town or post		and ZIP code							(000)			
\Box	mended	d return	BATON ROUGE	•				LA	70	895-9	9004	G Gross rece	ipts \$	4	28,910
\square	oplication	on pending	F Name and address		officer	-						this a group retu	n for affiliates		X No
											1	e all affiliates inc		Yes	=
			501(c)(3) X	750463 /	E \ 4	<i></i>	[7.007(0)(0)		7.07	1 ''	'No," attach a lis			
		npt status	501(c)(3) [X] 501(c) (5) ◀	(insert n	0) _	4947(a)(1)	or L	527	ļ		·		
1 M	/ebsite	e: <u>►</u>									H(c) Gr	oup exemption r	umber -		
K F	orm of o	organization	X Corporation	Trust	Associa	tion [Other	•		L Yea	r of form	ation 1953	M State of	legal domicile	LA
Р	art I	Sur	nmary												
	1	Briefly d	escribe the orga	nızatıon's	mission or	most s	signıfic	cant activit	ies	FOR	MED FC	OR THE PROM	OTION AN	D PROTECT	TION
		OF AGE	ICULTURE												
nce L															
Governance															
٥٨e	2	Check tl	nis box ▶ 🔲 if	the organ	ization dis	continu	ed its	operation	s or dis	spose	d of m	ore than 25%	6 of its net	assets.	
<u>ა</u>	3	Number	of voting member	ers of the	governing	body (l	⊃art V	I, line 1a)					3		8
es	4	Number	of independent	voting me	mbers of th	ne gove	erning	body (Par	t VI, lir	ne 1b)	[4		8
Activities &	5	Total nu	mber of individu	als employ	yed in cale	ndar ye	ear 20	12 (Part V	, line 2	2a) .		[5		6
Aci	6	Total nu	mber of voluntee	ers (estima	ate if neces	ssary) .						[6		8
	7a	Total un	related business	revenue	from Part \	/III, col	umn (C), line 12			•	[7a	2	27,166
	b	Net unre	elated business t	axable inc	come from	Form 9	90-T,	line 34 .	<u> </u>		<u></u>]	7b		20,491
							(m)	AP.:.				Prior Year		Current Yea	r
9	8		itions and grants			·	KC	CEIVE	:D·	.	ļ		0		14,490
Revenue	9	Program	n service revenu	e (Part VII	I, line 2g) .	1				υŀ			,402	1	<u>85,648</u>
Şe	10	Investm	ent income (Parl	VIII, colu	mn (A), lin	es 3 4	And/	7d) . ₄ . 2'n		SS	ļ		,167		1,606
_	11	Other re	venue (Part VIII,	column (A), lines 5,	6d, 8c	, 9č, *	l0c, ãnd∸V	11⊖) . [21			,869		29,206
	12	Total rev	enu e – add lines 8	through 1	1 (must equ	al Part	VIII,-GC	lumn_(A), lu	ne 12)	٢!		404	,438	4	30,950
	13	Grants a	and similar amou	ınts paid (Part IX, co	Jumn (/	9)(Jine	PS (1+3)	17.	~-			0		0
	14	benems	paid to or for the	enibers (r	an in, con	mın (A	שו זורד, <i>ך</i>		<i>.</i>				,507		2,431
es	15		other compensati									190	,834	1	71,127
ens	16a		onal fundraising							٠ _	<u> </u>	* alder He's Ald	0	-4-44	0
Expenses	b		ndraising expens	-			-				. "	はみに動物			
_	17		penses (Part IX										,167		74,335
	18		penses. Add line							٠.			,508		47,893
<u></u>	19	Revenu	e less expenses.	Subtract	line 18 froi	m line	12.		• •	• •	Danin	28 ning of Current	,930	End of Year	<u>83,057</u>
Net Assets or Fund Balances	20	Total as	sets (Part X, line	16)							begini		,202		31,115
Asse	21		bilities (Part X, III	•					• •	•			,286		1,142
Set.	22		ets or fund balan						•	•			,916		29,973
	ri ili		nature Block	ces odbi	act file 2	1 1101111	IIIC ZC	<u>,</u>	 -	• •	L		,,010		20,010
			y, I declare that I have	e examined the	nis return, incl	uding ac	compar	ving schedule	s and st	tatemer	nts, and t	o the best of my	knowledge		
			ct, and complete De												
Sign Jom Illander															
Her			Signature of officer	11 .	· · · · · ·)		سله	-		Date/	. 11.2		
HE	e		10m t	<u> 11en</u>	der	- 1	rt	side	N			10/0	<u>(4/1)</u>		
			Type or print name a										·	1	
	_	Print	/Type preparer's nam	е		Preparer	's signa	ture	• (Dat		neck 🗍 ii	PTIN	
Pai		DEBO	ORAH BISCHOFF		ĺ	d 00	MIT	6MYLAN	MY	M	101	しっしつし	elf-employed		
	parer	OUISIANA FARM BUREAU FEDERATION, INC.							,,,,,,,,	72-049109	96	 -			
Use	Only		's name > POE				Α 70	805-0004		VU	·	Firm's EIN	E(2525) Ts)22		
												Phone no	(223) 922-		
May	the IF	RS discus	s this return with	the preparent	arer showr	above	? (se	e instructio	ns) .		<u></u>			X Yes	No No
For	Paperv	work Redu	ction Act Notice,	see the se	parate inst	ruction	s.							Form 99	0 (2012)

	990 (2012) TERREBONNE PARISH FARM BUREAU, INC	72-0679896	Page 2
Pa	Int III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
	· · · · · · · · · · · · · · · · · · ·		<u>· </u>
1	Briefly describe the organization's mission:		
	TO PROMOTE AND PROTECT AGRICULTURE		
2	Did the organization undertake any significant program services during the year which were not listed		
-			[▼] Na
		Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	. Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program se	rvices, as measured	l hv
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants a		
	the total expenses, and revenue, if any, for each program service reported.	na anocations to oth	,
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$including grants of \$) (Reve	nue \$)
	A MEMBERSHIP ORGANIZATION FORMED FOR THE PROMOTION AND PROTECTION OF AGRIC	:ULTURE.	
4b	(Code) (Expenses \$ including grants of \$) (Reve	nue \$)
		· · · · · · · · · · · · · · · · · · ·	
4¢	(Code ⁻) (Expenses \$ including grants of \$) (Reve	enue \$)
		`	/
		,	
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
40	Total program service expanses > 0		

Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 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 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, Х 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 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х 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 9 negotiation services? If "Yes," complete Schedule D, Part IV. Did the organization, directly or through a related organization, hold assets in temporarily restricted Х endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more Х 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more 11c of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d 11e e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. 13 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 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 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 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 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H... 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b

Form 990 (2012) TERREBONNE PARISH FARM BUREAU, INC 72-0679896 Part IV Checklist of Required Schedules (continued) Yes No 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 Did the organization report more than \$5,000 of grants and other assistance to individuals in the 22 United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III. 22 Did the organization answer "Yes" to Part VII. Section A. line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х 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 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 25b 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 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 27 Х entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . 28a Х A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b 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 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

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		<u>X</u>
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		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			l
	III, 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		Χ_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 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	Х	
		Form	990	(2012)

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,

31

31

Form 990 (2012)
Part V.

•	Check if Schedule O contains a response to any question in this Part V		· · _ ·				
						Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a		3			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .	1b	<u> </u>	0	74		
C	Did the organization comply with backup withholding rules for reportable payments to vendors a gaming (gambling) winnings to prize winners?	and re	portable		1c	X	
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]					
b	If at least one is reported on line 2a, did the organization file all required federal employment ta	2a	L	6	2b		7.5
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see insti			ŀ	20	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		15)	1	3a	X	A 6 5 14 1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	•		1	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or	other	authority	. ļ	- 0.5		\vdash
	over, a financial account in a foreign country (such as a bank account, securities account, or of account)?		-		4a		×
b	If "Yes," enter the name of the foreign country:			ŀ		ينطق	â
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Final	ancial	Accounts				#
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax ye		Accounts.	ľ	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter to		ction?	ŀ	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and	did th	ne				†
	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 conf		ons or				
	gifts were not tax deductible?			Ĺ	6b		
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and part	ly for	goods	- 1			
	and services provided to the payor?				7a	<u> </u>	<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	h it wa	as	ĺ	_		
-	required to file Form 8282?	i	 I	.	7c	Contract Con	-
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d_					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal be			ŀ	7e	ļ	┼─
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit if the organization received a contribution of qualified intellectual property, did the organization file Form			`	7f 7g	-	+
g h	If the organization received a contribution of qualified intellectual property, did the organization life round.			, ·	7 <u>9</u> 7h		\vdash
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support		1 Omi 1000 O:	.			
Ū	organizations. Did the supporting organization, or a donor advised fund maintained by a spon-					ľ	
	organization, have excess business holdings at any time during the year?			ľ	8		
9	Sponsoring organizations maintaining donor advised funds.						
а	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:		•				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	L				
11	Section 501(c)(12) organizations. Enter	1	1	j		, .	
a	Gross income from members or shareholders	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources	1					
12-	against amounts due or received from them)	11b	10412	\dashv	12a		1
12a		12b		. [128	عمد	
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.	120	l				4
a	Is the organization licensed to issue qualified health plans in more than one state?			ľ	13a	القبيد	
а	Note. See the instructions for additional information the organization must report on Schedule)		· h	- Ja	ند در	
b	Enter the amount of reserves the organization is required to maintain by the states in which	٠.					
~	the organization is licensed to issue qualified health plans	13b					
С	Enter the amount of reserves on hand	13c					
14a	Did the organization receive any payments for indoor tanning services during the tax year?		`	. 1	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sc				14b		

Form 990 (2012) TERREBONNE PARISH FARM BUREAU, INC 72-0679896 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 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 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 any other officer, director, trustee, or key employee? . . . 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? . . . 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. The governing body?.......... 8b Х Each committee with authority to act on behalf of the governing body? . 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 . . . 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	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		
11a		11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	鑑		100
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Х
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		Х
13	Did the organization have a written whistleblower policy?	13		<u> </u>
14	Did the organization have a written document retention and destruction policy?	14		Х
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	<u> </u>	<u> </u>
þ	Other officers or key employees of the organization	15b	Latendar	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		11.2	1 1 2
	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			144
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard		100	
	the organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request | X | Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest 19 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: ► CHRIS HARVELL (985) 876-2876 282 CORPORATE DRIVE, HOUMA, LA 70360-2768

990 (2012)	TERREBONNE PARISH FARM BUREAU, INC	72-0679896	_
990 (2012)	TERREBONNE FARISH FARIN BUREAU, INC.		

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"

Form

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

Check this box if neither the organization nor al	ly related organ	izalio	11 (JIII	Jens	saleu	an	y current dincer,	director, or trus	icc.
				(C	C)					
				Posi	ition					
(A)	(B)					than c		(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per week (list any	office	r and	a di	rect	or/trust	ee)	compensation from	compensation from related	amount of other
	hours for	우립	ıns.	읔	<u>@</u>	멸실	ğ	the	organizations	compensation
	related	in a	훒	8	<u> </u>	၂၀၂၀	∃e	organization	(W-2/1099-MISC)	from the
	organizations	용률	9		힣	8 8	•	(W-2/1099-MISC)		organization
•	below dotted line)	ر اي	프	- 1	₹	ặ				and related organizations
	iirie)	stee	ısı		۳ ا	ens		ļ		organizations
	ì	Individual trustee or director	8	ļ	ļ	Highest compensated employee		İ		
					<u> </u>	ā		<u> </u>		
(1) TOM ELLENDER	2.00				ĺ			(
PRESIDENT				Χ			_			
(2) JOHN WALTHER	2 00	1			İ					
VICE PRESIDENT	,			Х	l .					
(3) BARTON JOFFRION	1.00									
SECRETARY				х						
(4) LLOYD TRICHE	1.00									
				х				İ		
TREASURER (5) CLAUDE TRICHE	0.46			<u> </u>			_	 		
		i i						1	ĺ	
BOARD MEMBER (6) H L HAWTHORNE	0.40			\vdash	├	\vdash				
	0.46	. 1				}		}		
BOARD MEMBER							<u> </u>			
(7) RICKY BOUDREAUX	0 23						ł			
BOARD MEMBER							_			
(8) BRIAN ELLENDER	0.46					l		ì		
BOARD MEMBER					ļ					
(9)							1			
	}									
(10)	******					\vdash	├─			
(10)	h	1								
(44)					\vdash	-	├	-		
(11)	ļ								Ì	
	l		_		\vdash	<u> </u>				
(12)		}								
							<u> </u>			
(13)					1			[
	<u> </u>					<u> </u>				
(14)	-									
	[

	90 (2012) TERREBONNE PARISH FARI						-			72-067	
Pa ,	Section A. Officers, Directors, Tr	rustees, Key Er	nplo	yee	-	nd C)	High	es <u>t</u>	Compensated	Employees (co	ntınued)
·	(A) Name and title	(B) Average hours per	box,	unles er and	Pos eck s pe	more rson irect	e than us both or/trust	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(15)											
(16)			ļ								
(17)											
(18)											
(19)									,		
(20)			<u> </u>			-					
(21)			-			_		ļ <u>-</u>			
(22)											
(23)			-			-		-			
(24)				-		H		_			
(25)						_					
1b c	Sub-total Total from continuation sheets to Part VII, Total (add lines 1b and 1c).				•		· ·	> > >	0	0	0
2	Total number of individuals (including but not reportable compensation from the organizatio		listed	d ab	ove 0	e) w	ho re	ceiv	ved more than \$	100,000 of	
3	Did the organization list any former officer, di employee on line 1a? If "Yes," complete Sche					yee	e, or I	nigh	est compensate	ed	Yes No 3 X
4	For any individual listed on line 1a, is the sum the organization and related organizations greated individual										4 X
5	Did any person listed on line 1a receive or act for services rendered to the organization? If "									ndıvidual	5 X
Sect 1	tion B. Independent Contractors Complete this table for your five highest comp	nenested indone	nder	nt cc	ntr	acto	ore th	at r	eceived more th	an \$100 000 of	
_	compensation from the organization. Report of year										n's tax
	(A) Name and business add	iress							(B) Description of se	rvices ((C) Compensation
											0
								L			0

(A) Name and business address	(B) Description of services	(C) Compensation
		0
		C
		O
		0

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



Pan	VIII	Check if Schedule O contains a response to	any dijestion in t	his Part VIII			
		-	any question in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e	Federated campaigns	0 0 14,490 0 0				
Cont	g h	Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	0	14,490			•
evenue	2a	MEMBERSHIP DUES	Business Code	179,191	179,191		
Program Service Revenue	b c d e	EXP REIMB & SEASONAL SPECIALTIES	110000	6,457 0 0	6,457		
rogr	f a	All other program service revenue		0 185,648			
	3 4 5	Investment income (including dividends, interest other similar amounts) Income from investment of tax-exempt bond processors (i) Real	st, and >	1,606 0			1,606
	6a b c d	Gross rents		0	'	,	
		Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	0			-	
	q	Gain or (loss)		0			
Other Revenue		Gross income from fundraising events (not including \$0 of contributions reported on line 1c). See Part IV, line 18 a	0	T. 20			
8		Less: direct expenses b	-2,040	2,040	}-		
_	ŧ	Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19 a	0	2,040		,	,
	C	Less direct expenses	•	0			
		returns and allowances a Less. cost of goods sold b Net income or (loss) from sales of inventory .	0	0			~ •
	11a b		Business Code 524298	227,166 0		227,166	
	d e	All other revenue		0 227,166			-
	12	Total revenue. See instructions	•	430,950	185,648	227,166	1,606

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must complete a	Il columns All other	organizations mu	st complete column	(A)
	Check if Schedule O contains a response to any	question in this Pai	rt IX	· · · · · · · · · · · · · · · · · · ·	· ·
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			,	
	organizations in the United States. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	2,431			
5	Compensation of current officers, directors,			1	
•	trustees, and key employees	0			
6	Compensation not included above, to disqualified			<u> </u>	
	persons (as defined under section 4958(f)(1)) and	ا]	
-	persons described in section 4958(c)(3)(B)	0	·		
7	Other salaries and wages	148,529			
8	Pension plan accruals and contributions (include	اه			
9	section 401(k) and 403(b) employer contributions) Other employee benefits	10,287		-	
10	Other employee benefits	12,311			
11	Fees for services (non-employees):	12,311		 	
''a	Management	اها			
b	Legal	0		<u> </u>	
C	Accounting	1,140			
d	Lobbying	0		 	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O)	l ol			
12	Advertising and promotion	0			
13	Office expenses	28,920	<u>-</u>		
14	Information technology	0			
15	Royalties	0			
16	Occupancy	17,831		<u></u>	
17	Travel	225			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	···		
19	Conferences, conventions, and meetings	12,228			
20	Interest	0	*		
21	Payments to affiliates	90,900		J	
22	Depreciation, depletion, and amortization	10,930		0	
23 24	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	MAINTENANCE	12,050			
b		72,000			
c		0			
d		0			
e	All other expenses	0		1	
25	Total functional expenses. Add lines 1 through 24e .	347,893		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)	1			1

Page 11

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) End of year Beginning of year 329,741 1 Cash-non-interest-bearing . 422,674 2 2 181.813 Savings and temporary cash investments 182,723 3 n 3 4 Accounts receivable, net οl 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 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 Assets organizations (see instructions). Complete Part II of Schedule L. 6 0 7 0 Inventories for sale or use 8 8 435 435 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation . . . | 10b | 336,213 10c 325,283 0 11 11 0 0 12 0 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related See Part IV, line 11 ol 13 0 14 0 14 0 0 ol 15 15 848,202 16 931,115 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 1,229 1.085 18 Grants payable. 18 19 Deferred revenue. 19 20 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, iabilities 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 57 23 0 24 24 Unsecured notes and loans payable to unrelated third parties 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete 25 26 Total liabilities. Add lines 17 through 25 1,286 26 1,142 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 28 28 29 29 Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds. . . 846,916 929,973 33 846,916 33 929.973 34 848,202 34 931,115

Form :	990 (2012) FERREBONNE PARISH FARM BUREAU, INC	72-0679	896 P	age 1Z
Par	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	43	30,950
2	Total expenses (must equal Part IX, column (A), line 25)	2	34	47,893
3	Revenue less expenses Subtract line 2 from line 1	3		33,057
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	84	16,916
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	92	<u> 29,973</u>
Part	XII Financial Statements and Reporting			_
	Check if Schedule O contains a response to any question in this Part XII			
1	Accounting method used to prepare the Form 990.		Yes	
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	Į.		. Care
	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	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	Х
	If the organization changed either its oversight process or selection process during the tax year, explain in	n [
	Schedule O.			1.00
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	<u> </u>
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)

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

		Cash	Noncash
1 Federated Campaigns	1		
2 Membership dues	. 2		
3 Fundraising events	. 3	14,490	
4 Related organizations	4		
5 Government grants (contributions)	. 5		
6 All other contributions, gifts, grants, and similar amounts not included above:			
Other contributions total		0	
7 Total	. 7	14,490	

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

	(A)	(B)	(C)	(D)
	Total	Program services	Management and general	Fundraising
1 Depreciation	10,930			<u></u>
2 Depletion	0			
3 Amortization	0			
4 Total	10,930	0	0	0

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

	Total:	57	57
		Balance due	
	Check if	beginning	Balance due
Lender's name	Unsecured	of year	end of year
1 SOUTH LA BANK		57	57

TERREBONNE PARISH FARM BUREAU, INC

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

							Total:	505,712	169,499	180,429	0	336,213	325,283
			Leasehold			Check if	Check if		Beginning	Ending			
			Improve-			Investment	Asset	Cost/Other	Accumulated	ĕ	Disposals/	Beginning	Ending
Category or Item	- Sud	and Buildings ments Equit	ments	Equipment	Other	Asset	Disposed	Basis	Depreciation	Depreciation	⋖	Balance	Balance
1 I AND	×							84.742	1			84,742	84,742
	×	- ×			1			373,607	148,044	157,430	:	225,563	216,177
3 OFFICE FURNITURE & FOUIPMENT	-	-	;	×		1		44 700				24,395	23,057
A OTHER FIXED ASSETS SIGN	i		!		×		1	2.663				1,513	1,307

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**

Department of the Treasury Internal Revenue Service

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

Inspection

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

Nam	e or organization			= n	iployer identification number
TER	REBONNE PARISH FAR	M BUREAU, INC			72-0679896
Pa	rt I-A Complete if t	he organization is exempt und	er section 501	(c) or is a section	527 organization.
1	Provide a description of	the organization's direct and indirect	political campaig	ın activities ın Part IV	•
2	·				▶ \$
3	Volunteer hours .				
Do	rt I-B Complete if t	be constitution is everyt and	ar acation FOA	(0)(2)	
1		he organization is exempt und excise tax incurred by the organizat			. .
2		excise tax incurred by the organization			> \$
		ed a section 4955 tax, did it file Forn			
3	_	·	•		
	Was a correction made?				Yes No
	If "Yes," describe in Part	IV. he organization is exempt und		/a\	E04(a)(2)
					501(0)(3).
1		y expended by the filing organization			~ ¢
2					▶ \$
2	for section 527 exempt for				▶ \$
3		penditures. Add lines 1 and 2. Enter			> \$
3	line 17b	periodicires. Add lines 1 and 2. Enter			* \$
4		n file Form 1120-POL for this year?			Yes No
5	- -	ses and employer identification num			
J		nents. For each organization listed, e			
		ontributions received that were prom			
		d fund or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	n (e) Amount of political
	(a) Name	(b) Address	(0, 2	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\					
(1)				·	
(2)			•		
					
(3)					
				 	
(4)					İ
(5)			_		
(6)					
101				1	

P	art II-A Complete if the organiza	ation	is exempt i	under section 50)1(c)(3) and file	d Form 5768 (elec	tion
	under section 501(h)).						
Α	Check ▶ if the filing organization		_	• , ,		•	member's
	name, address, EIN, e	-				· · · · · · · · · · · · · · · · · · ·	
В	Check ▶ if the filing organization	n che	cked box A	and "limited conti	ol" provisions a	oply	
	Limits on l	obbyi	ing Expendi	tures		(a) Filing	(b) Affiliated
	The term "expenditures"	" mea	ins amounts	paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence	e pub	lic opinion (g	rass roots lobbying)		0
b	Total lobbying expenditures to influence	e a le	gislative body	y (direct lobbying).			0
С	Total lobbying expenditures (add lines	1a an	d 1b)			0	0
d	Other exempt purpose expenditures .						0
е	Total exempt purpose expenditures (a	dd line	s 1c and 1d)			0	0
f	Lobbying nontaxable amount Enter th	e amo	unt from the	following table in b	oth	1	
	columns					0	0
	If the amount on line 1e, column (a) or (b)) is:	The lobbyin	g nontaxable amou	nt is:		
i	Not over \$500,000			mount on line 1e			
	Over \$500,000 but not over \$1,000,000			is 15% of the excess			
	Over \$1,000,000 but not over \$1,500,000			is 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000			is 5% of the excess of	over \$1,500,000		
	Over \$17,000,000		\$1,000,000	 			
g	Grassroots nontaxable amount (enter					0	0
h	Subtract line 1g from line 1a If zero or	-				0	0
İ	Subtract line 1f from line 1c. If zero or					0	0
j	If there is an amount other than zero o					4720 reporting	٦., ١, ١, ١, ١, ١, ١, ١, ١, ١, ١, ١, ١, ١,
	section 4911 tax for this year?				· · · · · ·	<u> L</u>	Yes No
		4-Yea	ar Averaging	Period Under Se	ction 501(h)		
	(Some organizations that	at mad	de a section	501(h) election de	not have to cor		
	columns be	low. S	ee the instr	uctions for lines 2	a through 2f on	page 4.)	
	Lob	bying	Expenditure	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
	beginning in)		,	,,,,,,	, ,		• •
2a	Lobbying nontaxable amount						0
b	Lobburg colleg amount						
D	Lobbying ceiling amount (150% of line 2a, column(e))						0
	(10070 01 1110 22, 00/21/11/07)						<u>-</u>
С	Total lobbying expenditures					o	0
							7.
ď	Grassroots nontaxable amount					0	0
е	Grassroots ceiling amount		· · · · · · · · · · · · · · · · · · ·				
	(150% of line 2d, column (e))						0
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2012

Sched	ERRÉBONNE PARISH FARM BUREAU, INC 72 ule C (Form 990 or 990-EZ) 2012	-0679	896	Page 3
Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forr	
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(b)
	e lobbying activity.	Yes	No	Amount
a b c d e f g h i j 2a b c	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? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912.			0
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		dC	The State of the S
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	c)(5)	Or Se	ection
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members?	c)(5),	or se	3 X
1 2 a	Dues, assessments and similar amounts from members		2a	
b	Carryover from last year		2b	0
3 4	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		2c 3	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	0
	Supplemental Information plete 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, line 2; and Part II-B, line 1 Also, complete this part for any additional information.	Part II	-A (af	filiated group

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► See separate instructions.

OMB No 1545-0047

Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990.

TER	REBONNE PARISH FARM BUREAU, INC		72-0679896
Par	Organizations Maintaining Done	or Advised Funds or Other Similar	Funds or Accounts. Complete if
	the organization answered "Yes" t	o 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)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and d	lonor advisors in writing that the assets he	eld in donor advised
	funds are the organization's property, subje-		
6	Did the organization inform all grantees, doi		
	used only for charitable purposes and not for	or the benefit of the donor or donor adviso	or, or for any other
	purpose conferring impermissible private be		
Par		plete if the organization answered "Yes	
1	Purpose(s) of conservation easements held		
	Preservation of land for public use (e g , reci		on of an historically important land area
	Protection of natural habitat	Preservation	on of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contrib	oution in the form of a conservation
	easement on the last day of the tax year	·	
	•		Held at the End of the Tax Year
а	Total number of conservation easements .		2a
b	Total acreage restricted by conservation ea		
C	Number of conservation easements on a ce		
d	Number of conservation easements include		
	historic structure listed in the National Regis		1 1
3	Number of conservation easements modifie		
	during the tax year		, ,
4	Number of states where property subject to	conservation easement is located	
5	Does the organization have a written policy	regarding the periodic monitoring, inspec	tion, handling of
	violations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conservat	ion easements during the year
	•		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation e	easements during the year
	▶ \$		-
8	Does each conservation easement reported	on line 2(d) above satisfy the requireme	nts of section
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization r	eports conservation easements in its reve	enue and expense statement, and
	balance sheet, and include, if applicable, th	e text of the footnote to the organization's	financial statements that describes
	the organization's accounting for conservati	on easements	
Par	Organizations Maintaining Collecti	ons of Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answere	d "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted und	der SEAS 116 (ASC 958), not to report in	its revenue statement and balance sheet
,	works of art, historical treasures, or other si		
	of public service, provide, in Part XIII, the te		
b	If the organization elected, as permitted und		
~	works of art, historical treasures, or other si		
	of public service, provide the following amount		
	(i) Revenues included in Form 990, Part VI		▶ \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of		
_	following amounts required to be reported u		
_			
a	Revenues included in Form 990, Part VIII, li		
b	Assets included in Form 990, Part X		. 🏲 🖣

Sched	ule D (Form 990) 2012 TERREBONNE PARIS	H FARM BURE	ΞAU,	INC				72-067	9896		Page 2
Pari	<u> </u>									ued)	
3	Using the organization's acquisition, acceuse of its collection items (check all that a		er rec	cords, c	heck ar	ny of the folio	owing 1	that are a signific	ant		
а	Public exhibition		d		Loan o	or exchange	progra	ıms			
b	Scholarly research		е	\Box	Other						
С	Preservation for future generations									·	
4	Provide a description of the organization's	collections an	d exi	nlaın ho	w thev	further the o	rganiz	ation's exempt p	urnose ir	1	
•	Part XIII		u 0.	piani	, tt t.10 y	10111101 1110 0	ngann <u>z</u>	andrio oxompt p	arpodo ii	•	
5	During the year, did the organization solic assets to be sold to raise funds rather tha	n to be maintai	ned	as part	of the o	organization'	s colle	ction?		es 🗌	No
Part	IV Escrow and Custodial Arrange IV, line 9, or reported an amount		•		_	ization ansv	werea	"Yes" to Form	990, Pa	rt 	
1a	Is the organization an agent, trustee, cust	odian or other	inter	mediary	for co	ntributions oi	r other	assets not			
b	included on Form 990, Part X? If "Yes," explain the arrangement in Part X	(III and comple				 le.			Y6	es	No
		•			Ū				Amount		
C	Beginning balance						1	С			
d	5						1	d			
е	J ,						1				
f	Ending balance						1	f			0
2a	Did the organization include an amount or	n Form 990, Pa	art X,	line 21	?				Ye	s X	No
b	If "Yes," explain the arrangement in Part >										<u> </u>
Part	V Endowment Funds. Complete	if the organiza	ation	answe	ered "Y	es" to Forn	n 990,	Part IV, line 10).		
	(;	a) Current year		(b) Pnor y	ear	(c) Two years	back	(d) Three years bac	k (e) Fo	ur years	back
1a	Beginning of year balance										
b	Contributions								_		
С	Net investment earnings, gains,										
	and losses										
d	Grants or scholarships				~	·					
е	Other expenditures for facilities and programs										
f	Administrative expenses							· · · · · · · · · · · · · · · · · · ·			
g	End of year balance	0			0		0		0		
2	Provide the estimated percentage of the c	current vear en	d bal	lance (l	ine 1g.	column (a))	held as	s:	- , -, -		
а	Board designated or quasi-endowment				•						
b	Permanent endowment	%									
C	Temporarily restricted endowment	%									
	The percentages in lines 2a, 2b, and 2c s										
3a	Are there endowment funds not in the pos	ssession of the	orga	anizatıo	n that a	ire held and	admıni	stered for the		V	
	organization by:								20(i)	Yes	No
									3a(i) 3a(ii)		-
b	If "Yes" to 3a(ii), are the related organizat				 Schedul	 le R2		• • •	3b		
4	Describe in Part XIII the intended uses of		•								
Part											
	Description of property	(a) Cost or ot	her ba		(b) Co	st or other s (other)) Accumulated depreciation	(d) B	ook valu	e
1a	Land			0	····	84.742	MAN TO	新疆 公司		8	34,742
b	Buildings			0		373,607		157,430			6,177
С	Leasehold improvements			0		0		0			0
d	Equipment			0		44,700		21,643		2	3,057
е	Other			0		2,663		1,356			1,307
Total	. Add lines 1a through 1e. (Column (d) mu	st equal Form	990,	Part X,	columr	n (B), line 10	(c).) .			32	25,283

Sched	ule D (Form 990) 2012 TERREBONNE PARISH FARM BUREAU, INC		72-0679896	Page 4
Par	XI Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue	er Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	0
5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.	<u>)</u>	. 5	0
Par	XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expense	s per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1	,	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b			0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	<u>8.) </u>	5	0
	XIII Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; F	Part III, lines 1a and 4,	Part IV, lines 1b a	nd 2b;
Part '	V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. A	Also complete this par	t to provide any	
addit	onal information.			

SCHEDULE O ₄(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization 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.

Inspection

OMB No 1545-0047

TERREBONNE PARISH FARM BUREAU, INC	[/2-06/9896
FORM 990, PART VI, SECTION A, LINE 6. THE ORGANIZATION	HAS MEMBERS AND IS A NON PROFIT ORGANIZATION
FORM 990, PART VI, SECTION A, LINE 7A. THE MEMBERS OF	THE ORGANIZATION ELECT THE GOVERNING BOARD
FORM 990, PART VI, SECTION A, LINE 7B HOWEVER, THE ACTIO	NS OF THE GOVERNING BOARD ARE APPROVED BY THE
MEMBERS ON A YEARLY BASIS WHEN ELECTIONS TAKE P	LACE
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS R	EVIEWED AND SIGNED BY THE BOARD PRESIDENT
FORM 990, PART VI, SECTION C, LINE 19 INSPECTON OF THE FI	NANCIAL STATEMENTS AND GOVERNING DOCUMENTS
CURRENTLY IN PLACE ARE AVAILABLE UPON REQUEST A	T AN OFFICE OF THE ORGANIZATION
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