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# SCANNED FEB 2 1 2014

.Form 990

# **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)

2012

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

Α	For the	2012 cale	endar year, or tax year	beginning	9-1	, 2012, a	nd ending	8-	31	, 20 13	
В	Check if	r if applicable C Name of organization Rogers County Farm Bureau								er identification i	number
	Address	change	Doing Business As			73-0660293					
	Name ch	hange	Number and street (or P		E Telepho	ne number					
$\checkmark$	Initial ret	turn	1126 W. Will Rogers			918-341-5112					
	Termina	ted	City, town or post office								
	Amende	d return	Claremore, OK 74017						<b>G</b> Gross re	eceipts \$	133,966 79
$\overline{\Box}$		ion pending			.J. Snider			H(a) Is this a		for affiliates? Ye	]
		,	24205 E 340 Rd , Che					H(b) Are all		_	s 🗌 No
ı	Tax-exe	mpt status	501(c)(3)	✓ 501(c)( 5		7(a)(1) or [	527	1		a list (see instructi	
J	Website				· · · · · · · · · · · · · · · · · · ·	X-20-2	<del></del>	H(c) Group	exemption	n number 🕨	1480
K	Form of	organization	✓ Corporation ☐ Trust	Association	Other ▶	L Yea	r of formation			of legal domicile	OK
_	art I	Summ	<del></del>								
	1		escribe the organization	on's mission o	r most significant a	ctivities:	Agricultu	ral Membe	rship Ore	nanization	
_							1.3			9	
Activities & Governance				• • • - •							
Ē			IVED	•••••							
) Ve	2	Check'th	is box in the orga	anızation dısco	intinued its operation	ns or dis	sposed of i	nore than	25% of	its net assets.	
Ğ	[3		of voting members of						3		7
85.	94 1	-Number	of independent voting	members of	the governing body	(Part VI,	line 1b) .		4		7
itie	5 5	Total nur	mber of <u>individu</u> als en	nployed in cale	endar year 2012 (Pa	rt V, line	2a) .		5		-0-
듕	6=		nber of votunteers (es						6		
٩	7a		elated business rever			12 .			7a	1	112,280.43
1			lated business taxabl						7b		53,530.48
								Prior Ye	ar	Current Y	
6)	8	Contribu	tions and grants (Part	2	0,343.50		15,878 00				
Š	9		service revenue (Parl				. —		,		
Revenue	10	Investme	ent income (Part VIII, d	column (A), line	es 3, 4, and 7d)				1,575 35		648 12
œ	11	Other rev	venue (Part VIII, colum	nn (A), lines 5,	6d, 8c, 9c, 10c, and	l 11e)			0,821 08	1	112,280.43
	12	Total reve	enue-add lines 8 thro	ough 11 (must e	equal Part VIII, colun	nn (A), Iin	ne 12)		2,739.93		28,806.55
	13	Grants a	nd similar amounts pa	aid (Part IX, co	lumn (A), lines 1-3)						
	14	Benefits	paid to or for membe	rs (Part IX, col	umn (A), line 4)			2	0,418 91		18,524.32
S	15	Salaries,	other compensation, e	mployee benef	its (Part IX, column (	A), lines 5	5–10)	73,137.64			34,114.79
Expenses	16a	Profession	onal fundraising fees (	Part IX, colum	n (A), line 11e)						
xpe	b	Total fun	draising expenses (Pa	art IX, column	(D), line 25) 🕨		\$	8,400			22262
ш	17	Other ex	penses (Part IX, colur	nn (A), lines 11	a-11d, 11f-24e)			5	0,473.36		41,272 22
	18	Total exp	oenses Add lines 13-	17 (must equa	I Part IX, column (A)	, line 25)	)	14	4,029.91		93,911 33
	19	Revenue	less expenses. Subti	ract line 18 fro	m line 12 .			(1	,289.98)		34,895 22
ets or							Beg	inning of Cui	rent Year	End of Ye	ear
sets	20	Total ass	sets (Part X, line 16)			-		70	1,720 17		37,675 40
Net Asse Fund Bal	21	Total liab	oilities (Part X, line 26)			-			166.50		1,226 50
_			ts or fund balances S	Subtract line 2	1 from line 20		·	70	1,553 67	7	36,448.90
P	art II	Signa	ture Block				_				
			iry, I declare that I have exa							my knowledge and	d belief, it is
tru	ie, correc	t, and comp	lete Declaration of prepare	r (other than office	r) is based on all informat	ion of whic	h preparer ha	s any knowle	edge		
			Jann	1 Us	<u> </u>				1-10	7-14	
Sig	_	<b>S</b> ugn	lature of officer	<u></u>	<i>7</i> 0 - ≈			Dat	е	,	
He	ere	<b>I</b> _	Sec. 1	OMN	14 ORK	e					
		Туре	e or print name and title		/						
Pa	id	P <b>pnt</b> /Ty	pe preparer's name	Prepa	arer's signature		Date	01 -	Check	II PTIN	
	epare	er L&Co	Chaul brow	シフ  年	ackgue 12	$\Delta \Sigma_{\kappa}$		18/13	self-emp	<b>-</b>	
	se Onl		name Oklahoma Fa	erm Bureau	- 0			Firm	's EIN ▶	73-03820	001
		Firm's a	address ► 2501 N Stile		ty, OK 73105				ne no	405-523-23	
Ma	y the If	RS discus	s this return with the $ $	preparer show	n above? (see instru	ictions)				✓ Ye	

orm 99	0 (2012)				Page <b>2</b>
Part		ogram Service Ac		4.111	<u></u>
			ponse to any question in this Pa	art III	🗸
1	Briefly describe the organicultural Membership				
2	Did the organization un	dertake any signific	ant program services during the	year which were not listed on the	
	prior Form 990 or 990-E	Z?			☐ Yes 🗹 No
_	If "Yes," describe these				
3		ease conducting,	or make significant changes in	how it conducts, any program	ì ☐ Yes ☑ No
	If "Yes," describe these				res ☑ No
4	Describe the organization expenses. Section 5010	on's program servic (c)(3) and 501(c)(4) c	ce accomplishments for each of	its three largest program service ort the amount of grants and allo	
4a	(Code ) (Exp	penses \$	including grants of \$	) (Revenue \$	)
	***************************************				
	••••				
				·	
41-	/Cada \/[		including greats of ¢	) (Revenue \$	
4b	(Code) (Ext	Delises #		) (Nevenue \$	/
4c	(Code ) (Exp	penses \$	including grants of \$	) (Revenue \$	)
	***************************************				
				····	
					•••••
	••••••			·····	
4d	Other program services	(Describe in Sched		··· · · · · · · · · · · · · · · · · ·	
	(Expenses \$	including grai		ue \$ )	
4e	Total program service	expenses >	· ———		

art	Checklist of Required Schedules		V	- A1 -
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1		<b>/</b>
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
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		<u>,</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	<b>√</b>	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII .	11b		1
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		<b>√</b>
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>✓</b>
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		/
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		1
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		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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		1
20 a		20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<b>√</b>

FEIR	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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		1
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		1
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>✓</b>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		<b>√</b>
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		1
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		1
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		1
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)			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	-	1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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		1
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		1
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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	38		<b>✓</b>

Form **990** (2012)

Check if Schedule O contains a response to any question in this Part V  Yes  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  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 tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country:  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction?  5b Cobes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).	No
Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  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 tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b if "Yes," enter the name of the foreign country:  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6b If "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6a Did any taxable party contributions that were not tax deductible as charitable contributions?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	No
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	માં તકે છે.
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Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country: ▶  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	
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over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	
account)?	T
b If "Yes," enter the name of the foreign country:  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6a	١.
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6b	/
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6b	
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	1
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	+
organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	+
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	1
gifts were not tax deductible?	+
7 Organizations that may receive deductible contributions under section 170(c).	
	14.14
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	izz
and services provided to the payor?	<del> </del>
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	
3771	568
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . 7f	+
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g	$\top$
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	
organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	المتنشأة
organization, have excess business holdings at any time during the year?	3 00.93
9 Sponsoring organizations maintaining donor advised funds.	
a Did the organization make any taxable distributions under section 4966?	+
b Did the organization make a distribution to a donor, donor advisor, or related person?  10 Section 501(c)(7) organizations. Enter:	17044
a 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	1-8
11 Section 501(c)(12) organizations. Enter:	- :
a Gross income from members or shareholders	1
b Gross income from other sources (Do not net amounts due or paid to other sources	18.2
against amounts due or received from them)	رئ ئىڭگىدا .
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	<del> </del>
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	ļ
a Is the organization licensed to issue qualified health plans in more than one state? . 13a	1.2
Note. See the instructions for additional information the organization must report on Schedule O  b Enter the amount of reserves the organization is required to maintain by the states in which	1 4
the organization is licensed to issue qualified health plans  the organization is licensed to issue qualified health plans	
c Enter the amount of reserves on hand	,
14a Did the organization receive any payments for indoor tanning services during the tax year?  . 14a	+
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	

Form 99	0 (2012)			Page <b>6</b>						
Part										
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.S.		tructi	ons						
<u> </u>	Check if Schedule O contains a response to any question in this Part VI	<u>···</u>	<u>···</u>							
Secti	on A. Governing Body and Management	—	Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7	N. 100	<b>****</b>							
Ia	If there are material differences in voting rights among members of the governing body, or									
	if the governing body delegated broad authority to an executive committee or similar									
	committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7									
2	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?	3		1						
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		<b>✓</b>						
6	Did the organization have members or stockholders?	6	✓	<b></b> -						
7a	one or more members of the governing body?	7a	1							
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,		•							
_	stockholders, or persons other than the governing body?	7b		✓						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			100						
	the year by the following:									
a	The governing body?	8a	<b>√</b>	<u> </u>						
b	Each committee with authority to act on behalf of the governing body?	8b	✓							
9	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		1						
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	<del></del> _						
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		<b>✓</b>						
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	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<b>✓</b>							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	132	6							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<b>✓</b>						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b		<b>└</b> ─						
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								
13	Did the organization have a written whistleblower policy?	13		<b>✓</b>						
14	Did the organization have a written document retention and destruction policy?	14	State .	<b>✓</b> ¥708-191						
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
a	The organization's CEO, Executive Director, or top management official	15a		\ <u>\</u>						
b	Other officers or key employees of the organization	15b	<sup>3</sup> \r2\2\2	√ -2\$2:.\$9						
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	160								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		<b>♦</b>						
•	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	,	`. `							
	organization's exempt status with respect to such arrangements?	16b		L						
	on C. Disclosure									
17 18	List the states with which a copy of this Form 990 is required to be filed Miles Oklahoma  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	5016	~)(3)°	- Only)						
10	available for public inspection. Indicate how you made these available. Check all that apply	1 201(0	J(J)S	Orliy)						
	☐ Own website ☐ Another's website ☑ 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	f inter	est p	olicy.						
	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 Oklahoma Farm Bureau, 2501 N Stiles, Oklahoma City, OK 73105 405-523-2300									

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Form	990	$\{201$	21

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

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 noi	r any relate	d orga	anız	atıo	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee
				((	<del>)</del>					
(A)	(B)			Pos				(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
Name and me	hours per					is both or/trust		compensation	compensation from	amount of
	week (list any		1		_		<del></del>	from	related	other
	hours for	Ĭ Ž Š	ışt	Officer	êy	黄	Former	the	organizations	compensation
	related organizations	e ë	Ē	ğ	ŝ	l og est	Ę	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	[ 호 교	ona		Key employee	ြို့ ငို		(** 2, 1000 111100)		and related
	line)	Individual trustee or director	ŧ	l	ee e	700		1		organizations
		e	Institutional trustee			Highest compensated employee				
		ļ		ļ		ě				
(1) Schedule Attached										
(1) Schedule Attached	<u> </u>									
(2)										
(3)		<u> </u>	ļ	-			ļ			· · · · · · · · · · · · · · · · · · ·
	<del> </del>									
(4)										
(5)			-		_					
(5)	<b></b>					į				
(6)										
(7)										
(7)	<del> </del>									
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		ļ	ļ							
(9)	<del> </del>									
(10)	<del> </del>	<del> </del>								
					_		<u> </u>			
(11)										
(12)			╁	-	-		$\vdash$			
Y1	· <del>  </del>									
(13)										
	<b></b>	<u> </u>	<u> </u>	_	_			<u> </u>		
(14)									1	

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (c	ontinue	ed)
	(B) Average hours per week (list any	nv					an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	from	(F) Estimated amount of other	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-M		compensation from the organization and related organizations
(15)												
(16)												
(17)												
(18)	,					-						
(19)												
(20)											-	
(21)											-	
(22)												
(23)												
(24)												
(25)												
1b c	Sub-total  Total from continuation sheets to Part			•	· ·			<u> </u>				
d	Total (add lines 1b and 1c)  Total number of individuals (including bureportable compensation from the organization)					ed	above	e) w	ho received m	ore than \$10	00,000	of
3	Did the organization list any <b>former</b> of employee on line 1a? <i>If</i> "Yes," <i>complete</i>	ficer, direc	tor, c	or tr	ust	ee, ıvıdı	key e	emp	oloyee, or high	nest comper	nsated	Yes No 3 ✓
4	For any individual listed on line 1a, is the organization and related organizations individual											4
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or ind	ividual	5 🗸
Section	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Repyear.											
	(A) Name and business add	Iress							(B) Description of s	services	C	(C) Compensation
						_						
2	Total number of independent contractor		-					th	nose listed ab	ove) who		

Part	VIII	Statement of Revenue										
		Check if Schedule O	contains a	respo	nse to any ques			<u></u>	<u>.</u> . 🖸			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
nts nts	1a	Federated campaigns		1a			A. T. S.					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b	15,878 00							
s, C Am	С	Fundraising events .		1c								
Giff	d	Related organizations		1d				<b>"我看着我,"</b>				
ns, Simi	е	Government grants (con		1e			Sign in					
er S	f	All other contributions, gi										
현환		and similar amounts not inc		1f	l							
nd o	g	Noncash contributions includ		11 \$				- Min を か /				
	h	Total. Add lines 1a-1	<u> </u>	•	Business Code	15,878 00	MARAT STE	r gyyddiol y chan ei Elleniaeth y deil o'i bern	CALLEST AND			
Program Service Revenue	0-				Business Code	Cart VIII CEE ME	ezatia III ilia	ىئىرىنىدىدىدىدىنى ئىلىنىدىدىنى	20.1130 C 40.45741			
eke	2a											
Б	b			•								
Ž	d							· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
Š	u											
yran		All other program sen	vice reveni						!			
ě	g	Total. Add lines 2a-2			<b></b>	-	Roth Born	100, 200 100, 100, 100, 100, 100, 100, 1	1911 - S. 18 -			
<del></del>	3	Investment income				<del></del>						
		and other similar amo	. •		<b>&gt;</b>	648 12		,	648 12			
	4	Income from investmen	t of tax-exer	npt bo	ond proceeds ►							
	5	Royalties			▶							
		•	(i) Real		(ıı) Personal							
	6a	Gross rents .	25,0	49.96								
	b	Less: rental expenses	5,0	70 24		and the	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1. 3.4				
	С	Rental income or (loss)	19,9	79 72			14 3					
	d	Net rental income or	<del>`                                    </del>		<b>&gt;</b>	19,979 72		19,979 72				
	7a	Gross amount from sales of	(ı) Securit	ies	(II) Other		* 1 Table 1	, et	Paragraph (N.)			
		assets other than inventory						A ST CO				
	b	Less cost or other basis			İ		Dan w					
		and sales expenses				<b>主要注意</b>						
	С	Gain or (loss) .			<u> </u>			<del>Filmette</del> ne di a manime di di				
	d	Net gain or (loss) .			<u> ▶</u>				2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
enne	8a	Gross income from fu	ındraısıng									
Other Rev		of contributions reporte	ed on line 1	c)								
je.		See Part IV, line 18 .		. a		1 6 6 4 4	1 1	1974				
Ě	ь	Less: direct expenses	s	. b		- 2° , *34	(after the	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
O	c	Net income or (loss) f		using	events . >			3 3 3 3 3 3 3 3	The same of the sa			
	9a	Gross income from ga		_			,	,	,, ,,			
		See Part IV, line 19 .		а				-	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
	b	Less: direct expenses	s .	b		]			·			
	С	Net income or (loss) f	rom gamın	g act	ivities <b>&gt;</b>							
	10a	Gross sales of in		less								
		returns and allowance	es .	а				,				
	b	Less cost of goods s	sol <b>d</b> .	b		]						
	С	Net income or (loss) f	rom sales	of inv	entory <b>&gt;</b>		l. <u> </u>					
		Miscellaneous F	Revenue		Business Code	]	,					
	11a	Office Commissions			524113	4,136 81		4,136 81				
	b	Office Commissions			524126	88,163 90		88,163 90				
	С											
	d	All other revenue .										
	е	Total. Add lines 11a-			. ▶	92,300 71						
	12	Total revenue. See	nstructions	·	<u> </u>	128,806 55	15,878 00	112,280 43	648_12			

Part IX Sta	tement of	<b>Functional</b>	<b>Expenses</b>
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	n 501(c)(3) and 501(c)(4) organizations must com	plete all columns A	II other organizatio	ons must complete c	olumn (A)
	Check if Schedule O contains a respons			<del></del>	
	t include amounts reported on lines 6b, 7b, , 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				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	18,524 32			64
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salanes and wages	31,430.13			
9	Other employee benefits				_
10	Payroll taxes	2,684.66			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting		<del></del>		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees .				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	1,697.12			
13	Office expenses	5,252.77			
14	Information technology				
15	Royalties				
16	Occupancy	10,186.52			
17	Travel			ļ	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	_			
19	Conferences, conventions, and meetings				
20 21	Interest				
	· ·	40 425 20			
22	Depreciation, depletion, and amortization .	10,425 38		-	
23	Insurance	7,928 99		- : 5%	2/ st = 1
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If			1.	1
	line 24e amount exceeds 10% of line 25, column				, ,
	(A) amount, list line 24e expenses on Schedule O)	- ^		A Care of	100
а	Federal Income Tax	3,608.06	<del></del>	1	
b	State Income Tax	1,443 00		<del> </del>	
C	Postane	(271 62)		1	
d	Employee Benefits	1,002 00		<del> </del>	
e	All other expenses	1,002 00			
25	Total functional expenses. Add lines 1 through 24e	93,911 33	·- ·- · · · · · · · · · · · · · · · · ·	<del> </del>	<del> </del>
26	Joint costs. Complete this line only if the	33,311 33	<u> </u>	1	
	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)				

P	art X	Balance Sheet				
		Check if Schedule O contains a response to	any question in this Pa	art X		
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		123,218.65	1	176,048.86
	2	Savings and temporary cash investments .		283,356.94	2	283,542.66
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and trustees, key employees, and highest co- Complete Part II of Schedule L			5	
	_	·		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	3	人,然心的都一下的
S	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar sponsoring organizations of section 501(c)(9) volun organizations (see instructions) Complete Part II of Sche	nd contributing employers ar tary employees' beneficia	nd	6	
Assets	7	Notes and loans receivable, net			7	
As	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges .		12,500 00	9	8,000 00
	10a	Land, buildings, and equipment cost or				
		other basis. Complete Part VI of Schedule D	10a 497,933	.30		
	b	Less. accumulated depreciation .	10b 227,849	.42 282,644 58	10c	270,083 88
	11	Investments - publicly traded securities .			11	
	12	Investments—other securities. See Part IV, line			12	
	13	Investments-program-related See Part IV, line	11		13	
	14	Intangible assets	•		14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equa	al line 34) .	701,720.17	16	737,675 40
	17	Accounts payable and accrued expenses	•	166.50	<del></del>	1,226 50
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities .			20	<del></del>
	21	Escrow or custodial account liability Complete		a v a dilantai mat	21	
Liabilities	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			[ NAC 2, 1600, 10, 25, 22, 22, 2200000000 1	22	
Lia	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines of Schedule D	payables to related thin		05	
	26	Total liabilities. Add lines 17 through 25		100 50	25 26	1,226 50
	20	Organizations that follow SFAS 117 (ASC 958	), check here ▶ □ a	166.50	20	1,226 30
nces	07	complete lines 27 through 29, and lines 33 an Unrestricted net assets		and	27	14 T. 14 14
ala	27 28	Temporarily restricted net assets			28	
ã	29	Permanently restricted net assets			29	
Net Assets or Fund Balances	25	Organizations that do not follow SFAS 117 (ASC 9) complete lines 30 through 34.	58), check here ► 📝 a	ind , , , , , , , , , , , , , , , , , , ,	23	, , ,
ts C	30	Capital stock or trust principal, or current funds		A comment of the comment of	30	
se	31	Paid-in or capital surplus, or land, building, or ed	quipment fund		31	
As	32	Retained earnings, endowment, accumulated in		701,553.67	32	736,448 90
Šet	33	Total net assets or fund balances .		701,553.67	33	736,448.90
_	34	Total liabilities and net assets/fund balances	·	701,720 17		737,675 40
						Form <b>990</b> (2012)

Page	1	2

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1 01111 33	50 (2012)				<u> </u>
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>		<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		128,8	06.55
2	Total expenses (must equal Part IX, column (A), line 25)	2		93,9	11.33
3	Revenue less expenses Subtract line 2 from line 1	3		34,8	95.22
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		701,5	<u>53 67</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		736,4	48.90
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>	· · ·	<u> </u>	
1	Accounting method used to prepare the Form 990: Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in		Yes	No
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both	 pıled or	2a		<u>/</u>
b	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both	 ed on a	2b		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
С	Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o of the audit, review, or compilation of its financial statements and selection of an independent account the organization changed either its oversight process or selection process during the tax year, ex	untant?	2c		85 TS
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth in	3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
				n 990	(2012)
			. 011		,,

# SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

201

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Part		or Advised Funds or Other Similar Fu	inds or Accounts. Complete if the
	organization answered "Yes" to Fo		
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate contributions to (during year) .		
	Aggregate grants from (during year)		
4	Aggregate value at end of year	dense advises in contra that the contra	hold in done of your
5	Did the organization inform all donors and funds are the organization's property, subjections	donor advisors in writing that the assets	neid in donor advised
	Did the organization inform all grantees, doi only for charitable purposes and not for the		
	conferring impermissible private benefit?		
	Conservation Easements. Comp		
			to Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held l  Preservation of land for public use (e.g.,		of an historically important land area
	Protection of natural habitat	· _	of a certified historic structure
	Preservation of open space	Freservation	of a certified historic structure
	rreservation of open space Complete lines 2a through 2d if the organiza	tion held a qualified conservation contribu	tion in the form of a conservation
	easement on the last day of the tax year.	mon heid a quamica conservation contribu	non in the form of a conservation
	sassinoni on the last any or the last year.		Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
	Total acreage restricted by conservation eas	sements	<del></del>
	Number of conservation easements on a cer		2c
	Number of conservation easements include		
	historic structure listed in the National Regis	• • •	2d
	Number of conservation easements modified		
	tax year ►	_,g,	gg
	Number of states where property subject to	conservation easement is located ▶	
	Does the organization have a written pol		nspection, handling of
	violations, and enforcement of the conserva		·
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservation	on easements during the year
	<b>•</b>		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	sements during the year
	▶\$		
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	s of section 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)? .		· 🔲 Yes 🗍 No
9	In Part XIII, describe how the organization re	ports conservation easements in its reveni	ue and expense statement, and
	balance sheet, and include, if applicable, the	e text of the footnote to the organization's	financial statements that describes the
	organization's accounting for conservation e		
Part		ections of Art, Historical Treasures, o	
		vered "Yes" to Form 990, Part IV, line 8	<del></del>
	If the organization elected, as permitted un-		
	works of art, historical treasures, or other	·	
	public service, provide, in Part XIII, the text of	of the footnote to its financial statements the	nat describes these items
	If the organization elected, as permitted un	• • • • • • • • • • • • • • • • • • • •	
	works of art, historical treasures, or other	•	education, or research in furtherance o
	public service, provide the following amount	is relating to these items.	
	(i) Revenues included in Form 990, Part VIII	, line 1	. <b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works		
	following amounts required to be reported u	inder SFAS 116 (ASC 958) relating to these	e items.
а	Revenues included in Form 990, Part VIII, lin	ne 1 .	<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

Page	2
Page	_

Schedule D	(Form 9	990) 2012
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Part	III Organizations Maintaining	Colle	ctions of	Art, Hist	orical T	reasures,	or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, a collection items (check all that apply).	access	sion, and ot	her recor	ds, chec	k any of the	follow	ving that are a s	ignificant use of its
а	☐ Public exhibition			d		or exchange			
b	☐ Scholarly research			e	Other	·			
С	☐ Preservation for future generations	•							
4	Provide a description of the organizat XIII.	tion's (	collections a	and expla	iin how th	hey further t	the org	anızatıon's exen	npt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather								
Dort	IV Escrow and Custodial Arra								
Fart	line 9, or reported an amoun					unization o	IIISVVCI	100 100 1010	om 550, i art iv,
1a	Is the organization an agent, trustee,					or contributi	ons or	other assets no	ot
14									∏ Yes ∏ No
h	If "Yes," explain the arrangement in Pa								
b	ii res, explain the arangement iii r	art Am	and compi	cic inc io	nowing to	abio.		T A	mount
_	Beginning balance						10		
c d	Additions during the year	•		• • •	•		1d	<del></del>	
e				•			1e		
f	Ending balance			_			1f		•
2a	Did the organization include an amoun			art X. line	21?				☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa					n has been i	provide	ed in Part XIII	
Pari		ete if	the organiz	ation ar	swered	"Yes" to F	orm 9	90, Part IV, line	
			Current year		or year	(c) Two years	s back	(d) Three years back	k (e) Four years back
1a	Beginning of year balance .								
b	Contributions		· <del></del>						
c	Net investment earnings, gains, and								
	losses			1					
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs					İ	İ		
f	Administrative expenses								
g	End of year balance		_						
2	Provide the estimated percentage of t	the cur	rent year ei	nd balanc	e (line 1g	j, column (a)	) held	as	
а	Board designated or quasi-endowme	nt ▶ੁ		- %					
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶		%						
	The percentages in lines 2a, 2b, and 2								
За	Are there endowment funds not in th	e poss	session of t	he organi	zation the	at are held a	and ad	ministered for th	
	organization by								Yes No
	(i) unrelated organizations .	-		-		•	•		3a(i)
	(ii) related organizations			•	<b>.</b>		•		3a(ii)
b	If "Yes" to 3a(ii), are the related organ								3b
4	Describe in Part XIII the intended use								
Part		omen			T			A	(d) Dealerature
	Description of property		(a) Cost or o			or other basis other)		Accumulated epreciation	(d) Book value
1a	Land .	I				61,500 00	::	•	61,500 00
b	Buildings	. [				415,424 13		206,840 25	208,583 88
С	Leasehold improvements .	. [							
d	Equipment .	Į				21,009.17		21,009 17	
e	Other		<u>.</u> .						. <u> </u>
Total.	Add lines 1a through 1e (Column (d) r	must <u>e</u>	qual Form 9	990, Part	X, columi	n (B), line 10	(c) )	<u>▶  </u>	270,083 88

Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	al denvatives		
	-held equity interests		
(3) Other			
(A)			
(B)			
(C)			***************************************
(D)			
(E)			
(F)			
(G)			
(H)			
(l)	(A)		
Part VIII	(b) must equal Form 990, Part X, col (B) line 12) ► Investments—Program Related	d Soo Form 000 Part V	line 12
Part VIII		(b) Book value	(c) Method of valuation
	(a) Description of investment type	(b) Book value	Cost or end-of-year market value
/1)			
(1)			
(3)			
(4)			· · · · · · · · · · · · · · · · · · ·
(5)			
(6)		<u> </u>	
(7)			
(8)			
(9)			
(10)			
Total. (Column	(b) must equal Form 990, Part X, col (B) line 13)		能被言為是是200mm,由于·在了個數學是200mm。
Part IX	Other Assets. See Form 990, Pa		
	(	a) Description	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)		······································	
_(7)		<del></del>	
(8)			
<u>(9)</u> (10)		<del> </del>	
	umn (b) must equal Form 990, Part X, c	ol (B) line 15.)	
Part X	Other Liabilities. See Form 990		
1.	(a) Description of liability	(b) Book value	\$
(1) Federa	al income taxes	,	
(2)			
(3)			
(4)			
(5)			To the second of the second
(6)			
(7)			
(8)			
(9)			
(10)			] ÷ '
(11)	_		
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 25)		
			ganization's financial statements that reports the organization's
liability for t	uncertain tax positions under FIN 48 (ASC	740) Check here if the text o	f the footnote has been provided in Part XIII .

d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  Part XII Reconciliation of Expenses per Audited Financial Statement 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4	a a b b	1
a Net unrealized gains on investments	ts With Expenses p	3 4c 5 er Return 1
b Donated services and use of facilities c Recovenes of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  Part XII Reconciliation of Expenses per Audited Financial Statemer 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a linvestment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1  Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b.	ts With Expenses p	3 4c 5 er Return 1
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d Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part VIII, line 12, but not on line 1  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII.)  c Add lines 4a and 4b  5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  Part XII Reconciliation of Expenses per Audited Financial Statement  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII)  c Add lines 4a and 4b  5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1  Part XIII Supplemental Information  complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. A	a b c c	3 4c 5 er Return 1
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Amounts included on Form 990, Part VIII, line 12, but not on line 1.  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII.)  c Add lines 4a and 4b  Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  Part XII Reconciliation of Expenses per Audited Financial Statemer  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII)  c Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1  Part XIII Supplemental Information  complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. A	ts With Expenses p	4c 5 er Return 1
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c Add lines 4a and 4b  Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  Part XII Reconciliation of Expenses per Audited Financial Statement  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII)  c Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1  Part XIII Supplemental Information  complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. A	ts With Expenses p	5 er Return
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Part XII Reconciliation of Expenses per Audited Financial Statement  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII)  c Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1  Part XIII Supplemental Information  omplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. A	ts With Expenses p a b c	er Return
Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIII)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1  Part XIII  Supplemental Information  omplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. A	a b	1
Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities	b c	
a Donated services and use of facilities	b c	
b Prior year adjustments	b c	20
c Other losses	c	20
d Other (Describe in Part XIII.)		20
e Add lines 2a through 2d	d	20
3 Subtract line 2e from line 1		20
Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII).  c Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1)  Part XIII  Supplemental Information  complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XIII, lines 2d and 4b. A		26
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII)	• •	3
b Other (Describe in Part XIII )		
c Add lines 4a and 4b. 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 Part XIII Supplemental Information omplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. A	a	
Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 Part XIII Supplemental Information omplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. A	b	
Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. A		4c
omplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. A	<u> </u>	5
art V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. A		

Schedule D (For	rm 990) 2012	Page <b>5</b>
	Supplemental Information (continued)	

# SCHEDULE O ·(Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Rogers County Farm Bureau

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

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization

Employer identification number

73-0660293

The Organization does not have stockholders but it does have members. There are two types of members. One is an Associate member
and the other is a Voting member. An Associate member includes someone who runs or operates a farm but whose average gross
agricultural income is less than half their total income. An Associate member also includes someone working in Agribusiness. Someone
who is not directly related to Agriculture is an associate member. Lastly, An Associate member can hold their membership through a
church, FFA chapter, an association, or by a corporation not producing agriculture products. A Voting member can be a family that gets the
majority of its average gross income from the sale of agricultural products. A Voting member can also be held by a retired agricultural
·
person living on an income or social security accrued and not employed full time in another occupation. A Voting member can also be held
by a partnership or corporation receiving the majority of income from the sale of agricultural products.
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