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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

Open to Public

X Yes

Form **990** (2012)

Department of the Treasury

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

	Inten	nai Reve	nue Service The organization may have to use a copy of this return to satisfy sta	te reporting requirem	ents.	Inspection			
	A F	or the	= 2012 calendar year, or tax year beginning $=$ NOV 1, 2012 and ending	OCT 31, 20	13				
	B	Check if applicable	C Name of organization	D Employer ide	entificat	ion number			
		Addre	White County Farm Bureau						
	Ī	Name		71	-027	8869			
	Ē	Initial	Number and street (or P O box if mail is not delivered to street address) Room/su						
		Terminated	· · · · · · · · · · · · · · · · · · ·			8-5358			
		Amen		G Gross receipts \$	200				
		Application		H(a) Is this a gro	up retur				
		pendii	F Name and address of principal officer:Mike Fisher	for affiliates		Yes X No			
			same as C above	H(b) Are all affiliate	filiates included? Yes N				
	17	ax-ex	empt status: 501(c)(3) X 501(c) (5) ◀ (insert no) 4947(a)(1) or 5	—		. (see instructions)			
			e:▶ www.arfb.com/white	H(c) Group exen					
	K F	orm of	organization X Corporation			ate of legal domicile AR			
		art I	Summary						
	, N	1	Briefly describe the organization's mission or most significant activities: Agriculti	ıral Promot	ion				
	Activities & Governance								
	eT	2	Check this box If the organization discontinued its operations or disposed of m	ore than 25% of its n	et asset				
	Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	26			
	8	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	26			
	ies		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	8			
	ξ	t	Total number of volunteers (estimate if necessary)		6	31			
	Act		Total unrelated business revenue from Part VIII, column (C), line 12		7a	183,523.			
		b	Net unrelated business taxable income from Form 990·T, line 34	Prior Year	7b	-20,130.			
2014	1				Current Year				
20	ne	Į.	Contributions and grants (Part VIII, line 1h)	06 07	0.	0.			
r-s	Revenue	ĺ	Program service revenue (Part VIII, line 2g)	86,87		82,930.			
1==4 S~	æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,66		716.			
۹		l .	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	197,74		201,836.			
SEP			Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	286,28	0.	<u>285,482.</u> 0.			
			Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
SCANNED		ì	Benefits paid to or for members (Part IX, column (A), line 4)	150,66		136,511.			
	Ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	130,00	0.	0.			
\$	Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)		- 				
	Ĕ		Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	144,68	8	124,381.			
00			Total expenses. Add lines 13-17 (must equal Part-IX, column (A), line 25)	295,35		260,892.			
		19	Revenue less expenses. Subtract line 18 from line 1200	-9,06		24,590.			
	es es		Treveniue less expenses. Obbitation in terminal in the less expenses.	Beginning of Current Y		End of Year			
	Net Assets or Fund Balances	20	Total lassets (Part X, line 16) Total liabilities (Part X, line 26)	576,62		491,050.			
	Ass 188	21	Total labilities (Part X, line 16)	144,69		34,528.			
	ᇗ	22	Net assets or fund balances. Subtract line 21 from line 20	431,93		456,522.			
		irt II	Signature Block L UECEINED						
	Und	er pena	ities of perjury, I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best	of my kn	owledge and belief, it is			
			t, and complete Declaration of preparer (other than officer) is based on all information of which prepa						
				8/29	114				
	Sigr	1	Signature of officer 1	Date	.1				
	Her	e	Mike Freher						
			Type or print name and title						
			Print/Type preparer's name Preparer's signature	Date Chec		PTIN			
	Paid		Maria K. Bean Wain & San CPA			P00941762			
	Prep		Firm's name Thomas & Thomas LLP	/ Firm's EIN	7	1-0271741			
	Use	Only	Firm's address 201 E. Markham, Suite 500						
			Little Rock, AR 72201	Phone no	501	-375-2025			

May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2012)

Form 990 (2012) White County Farm Bureau
Part IV Checklist of Required Schedules

<u></u>	,		Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		1,55	
•	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
_	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	ĺ	ĺ
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	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	T_		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	_ 9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		^_
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 "Yee " complete School to F. Borto I and IV.	14b		Х
45	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	146		
15		15		Х
16	or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13		
10	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			- -
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	_ 		_ - _
. •	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990	(2012)

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			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		162	140
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a_		_X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			!
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	!		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	;		
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u> _
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		<u>X</u>
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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_		<u></u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		- 1	v
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?	~		X
	If "Yes," complete Schedule N, Part I	31_		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			Х
00	Schedule N, Part II	32_		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		X
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34	- 1	X
25.	Part V, line 1	35a		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
26		330		
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			
J.	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?	<u> </u>		
~	Note. All Form 990 filers are required to complete Schedule O	38	Х	
	A Section 1 of the Section of the Todalica to Softplate Sectionals Section 1			2012)

<u> </u>	· 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			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	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 2a 8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		_X
ь	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		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	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 the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a_		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	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 partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		_
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	i		
	to file Form 8282?	7c		
đ	If "Yes," indicate the number of Forms 8282 filed during the year		1	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		
_	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		. 1	
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
_	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		.]	
11	Section 501(c)(12) organizations. Enter:			
''a	Gross income from members or shareholders		.	
	Gross income from other sources (Do not net amounts due or paid to other sources against			
J	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	. [
	Is the organization licensed to issue qualified health plans in more than one state?	13a		····
_	Note. See the instructions for additional information the organization must report on Schedule O.			
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans	. [1	İ
С	Enter the amount of reserves on hand			ı
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			990/	(0040)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a. 8b, or 10b below, describe the circumstances, processes or changes in Schedule Q. See instructions

	to and day do, or rob balon, deading the analysis and an extra materials.						
	Check if Schedule O contains a response to any question in this Part VI			X			
Sec	tìon A. Governing Body and Management		г				
		·····	Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 26						
	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 0						
		1					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		.,				
	officer, director, trustee, or key employee?	2_	X	-			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			.,			
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X			
5 Did the organization become aware during the year of a significant diversion of the organization's assets?							
6	Did the organization have members or stockholders?	6	X	 			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_	.,				
	more members of the governing body?	7a	X	<u> </u>			
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	X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
a	The governing body?	8a_	X	<u> </u>			
Ь	Each committee with authority to act on behalf of the governing body?	8b	_X_	<u> </u>			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			۱			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X			
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)						
			Yes	No			
	Did the organization have local chapters, branches, or affiliates?	10a		X			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b					
	and branches to ensure their operations are consistent with the organization's exempt purposes?						
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X				
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	-			
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		v				
	in Schedule O how this was done	12c	_X	· ·			
13	Did the organization have a written whistleblower policy?	13	v	X			
14	Did the organization have a written document retention and destruction policy?	14	X	· · · · · · · · · · · · · · · · · · ·			
15	Did the process for determining compensation of the following persons include a review and approval by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			v			
	The organization's CEO, Executive Director, or top management official	15a		X			
b	Other officers or key employees of the organization	15b					
4.6	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
ıva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	4.0		v			
_	taxable entity during the year?	16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
 -	exempt status with respect to such arrangements?	16b		L			
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed None						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ıvallab	ie				
	for public inspection. Indicate how you made these available. Check all that apply.						
4.0	Own website Another's website X Upon request Other (explain in Schedule O)	al 6 ·	اجيما				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	u iinar	icial				
••	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 — 501 – 268 – 5358	ion. 💌					
	The Organization - 501-268-5358						
	P.O. Box 1007, Searcy, AR 72143						

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

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an) than is bot	one h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director o			recto	Highest compensated 1/2/	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Mike Fisher	0.50								•	
President		X	╙	X		ļ		0.	0.	0
(2) Matt Morrison	0.50	١		١		1				_
Vice President	0.50	X	 	X		-		0.	0.	0
(3) Michael Taylor	0.50			J.				0.	0.	0
Secretary/Treasurer	0 50	X		X		-				0
(4) Benny Anderson	0.50	X						0.	0.	0
Member	0.50	^	├	-	┢	-		0.	0.	
(5) Billy Caldwell	0.30	X						0.	0.	0
Member (6) Bobby Cofer	0.50	^		 	 	+-				
Member	0.50	x						0.	0.	0
(7) Danna Cofer	0.50	 	 	-		<u> </u>	-			
Member		X						0.	0.	0
(8) Bennie Duch	0.50					<u> </u>				
Member		X						0.	0.	0
(9) Barry Farris	0.50									_
Member		X	<u> </u>					0.	0.	0
(10) Keith Feather	0.50									
Member		X					_	0.	0.	0
(11) Jeremy Gillam	0.50									
Member		X	<u> </u>	ļ		<u> </u>	ļ	0.	0.	0
(12) Laverne Hale	0.50	l								
Member		X	<u> </u>		_	├-	<u> </u>	0.	0.	0
(13) John Hamilton	0.50	١.,						0	0	0
Member	0 50	X	┝			 	-	0.	0.	0
(14) Phillip Hamilton	0.50	·						0.	0.	0
Member Viller	0.50	X	 				\vdash		<u> </u>	0
(15) Hoyt Hilger	0.30	X						0.	0.	0
Member (16) Thomas Lercher	0.50	╁	 -			\vdash	 	·		
Member	0.30	x						0.	0.	0
(17) Kenneth May	0.50	† <u></u>	-		-	\dagger				
Member	-	x						0.	0.	0
232007 12-10-12					•		-			Form 990 (2012

Form 990 (2012)

Section A. Officers, Directors, T	(B)	DIO	/ees			igne	SIC			\neg		/ E\	
(A)	1 . ' '	(B) (C) Average Position				า		(D)	(E) Reportable		For	(F)	ـ ـ
Name and title	hours per			check	more	than		Reportable compensation	compensation	Ì		imate ount o	
	week					or/trus		from	from related			other	,
	(list any	Ę						the	organizations	i		ensat	ion
	hours for	를		}	1	뮲		organization	(W-2/1099-MISC)	fro	om the	,
	related	1 ag	ral frustee		İ	eus		(W-2/1099-MISC)		ļ	orga	anızatı	on
	organizations	Ē	를		86	E =				-	and	l relate	ed
	below line)	Individual trustee or director	Institution	Officer	Кеу етріоуее	Highest compensate employee	Former				orga	nizatio	ns
(18) John McKnight	0.50	트	<u>=</u>	٦	<u> </u>	王台	<u></u>			+		_	
Member		Х						0.	C).			0.
(19) Tony Moss	0.50												
Member		X	ļ	<u> </u>		ļ	L	0.) •		_	0.
(20) Michael Oxner	0.50								,				^
Member	0.50	X	}—	-	 	┼	├-	0.).			0.
(21) Jacky Reaper	0.50	X						0.	().			0.
Member (22) Jim Safley	0.50	^	├—		-	╁		<u> </u>		' +			<u> </u>
Member		x						0.	C).			0.
(23) Peggy Smith	0.50		_							+		_	
Member		X						0.).[_	0.
(24) Dana Stewart	0.50												-
Member		X	<u> </u>	_		<u> </u>	<u> </u>	0.	<u>_</u>) -			0.
(25) Keith Watkins	0.50	۱	l		l	l	ľ						^
Member	0.50	X	-		 			0.	<u>_</u>).			0.
(26) Fredese Wheetley	0.50	X	ļ					0.	C).			0.
Member 1b Sub-total		Α	1		l	<u> </u>	<u> </u>	0.		5.			0.
c Total from continuation sheets to Part	VII. Section A					•		Ō.).			0.
d Total (add lines 1b and 1c)	,							0.).			0.
2 Total number of individuals (including bu	it not limited to th	nose	liste	ed a	bov	e) wl	no r	eceived more than \$100	,000 of reportable				
compensation from the organization	· · · · · · · · · · · · · · · · · · ·												_ 0
										Γ-		Yes	No
3 Did the organization list any former office			e, ke	ey er	mplo	yee	, or	highest compensated er	mployee on	-			v
line 1a? If "Yes," complete Schedule J fo					_4			har aamaaaattaa frans	the ergonization	-	3	-	X
4 For any individual listed on line 1a, is the and related organizations greater than \$									ine organization		4	- 1	Х
5 Did any person listed on line 1a receive									dual for services	-	~		
rendered to the organization? If "Yes," c							0.0.	oo organization or marvi			5	1	Х
Section B. Independent Contractors													
1 Complete this table for your five highest	compensated in	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of compe	ensa	tion fr	om	
the organization. Report compensation t	or the calendar y	ear	endı	ng v	vi <u>th</u>	or w	ıthır	n the organization's tax y	ear.				
(A) Name and busine	oo oddrooo	BT/	~ * * * * * * * * * * * * * * * * * * *	77			- 1	(B) Description of s	envices	Co	(C)) sation	1
ivarile and odsine		IA	INC	<u></u>				Description of s	CIVICOS		ripei		
	<u> </u>								-			_	
			_	_				<u> </u>		_			_
					-								_
							\dashv						
2 Total number of independent contractor		ot II	mıte	d to	tho	se li: N	stec	d above) who received m	ore than				
\$100,000 of compensation from the org	anization P				. '	<u>~</u> _		_ 					

71-0278869 Page **9**

		Check if Schedule O cont	ains a response	to any question ii	n this Part VIII			
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1 a	Federated campaigns	1a					
ira Our	b	Membership dues	1b					
Am (С	Fundraising events	1c					
ig je	d	Related organizations	1d					
S.E	е	Government grants (contribut	ions) 1e					
i Si	f	All other contributions, gifts, gran	ts, and					
들취		similar amounts not included abo	ve 1f					
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	1a-1f \$					
<u> </u>	h	Total. Add lines 1a-1f		<u> </u>	- · · · · · · · · · · · · · · · · · · ·			
				Business Code				
ဋ	2 a			110000	82,930.	82,930.		
e e	b			ļ		·		
Program Service Revenue	С							
Re	d	·						
ğ	е			ļ				
۳	f	All other program service reve	enue		02 020			
\rightarrow	9			•	82,930.			
	3	Investment income (including	dividends, intere	est, and	716.			716.
ļ	_	other similar amounts)			/10.			/10.
	4	Income from investment of tax	x-exempt bond p	proceeds	7,103.		·	7,103.
	5	Royalties			7,103.			7,103.
			(i) Real 11,100.	(II) Personal				
	6 a		0.	 				
	b	1	11,100.					
	C	Rental income or (loss)	11,100.	<u></u>	11,100.			11,100.
	d		() ()	1	11,100.			11,100.
	/ a	Gross amount from sales of	(i) Securities	(II) Other				
1		assets other than inventory						
	D	Less: cost or other basis						
	_	and sales expenses		 				
1	ر د		L		ĺ			
	d 8 a		a avanta (nat					······································
ue	o a	including \$	g events (not					
Š		contributions reported on line	1c) See]				
Other Reven		Part IV, line 18	a					
£.	b	Less: direct expenses	b					
0		Net income or (loss) from func	_				:	
		Gross income from gaming ac						······
	• •	Part IV, line 19	а					
	ь		b					
- 1			ing activities	•				
Ì		Gross sales of inventory, less					· · · · · · · · · · · · · · · · · · ·	······································
- 1		and allowances	а					
	ь	Less cost of goods sold	ь					
		Net income or (loss) from sale	s of inventory		_			
Ī		Miscellaneous Revenu		Business Code				
Ī	11 a	Insurance Servi		524298	183,523.		183,523.	
Ì	ь	Miscellaneous		900099	110.			110.
ļ	С							
}	ď	All other revenue						
	е	Total. Add lines 11a-11d		>	183,633.			
	12	Total revenue See instructions		▶	285,482.	82,930.	183,523.	19,029.
232009 12-10-	12				-			Form 990 (2012)

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	nplete all columns. All oth	er organizations must c	complete column (A).	
	Check if Schedule O contains a respon	nse to any question in th	is Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	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	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees		<u> </u>		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	101 400			
7	Other salaries and wages	121,438.		ļ. ———	
8	Pension plan accruals and contributions (include	2 442			
_	section 401(k) and 403(b) employer contributions)	3,443.			
9	Other employee benefits	10,719.			
10	Payroll taxes	10,719.		ļ	
11	Fees for services (non-employees):				
a	Management				
b	Legal	2,043.			
9	Accounting Lobbying	2,043.			·-· -
d	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
8	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion	2,788.			_
13	Office expenses	18,618.			
14	Information technology				
15	Royalties				
16	Occupancy	55,637.			,
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	15,575.			
20	Interest	3,824.			
21	Payments to affiliates		· · · · · · · · · · · · · · · · · · ·		
22	Depreciation, depletion, and amortization	20,505.			
23	Insurance	812.			
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	Youth and Safety	4,500.		<u> </u>	
b	Miscellaneous	79.			
C					
d					
е	All other expenses	260 002			
25	Total functional expenses Add lines 1 through 24e	260,892.			
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)	}			
	II Ioliowing SUP 98-2 (ASU 958-720)			L	

Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year 1 1 Cash - non-interest-bearing 131,361. 197,177 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Assets 7 Notes and loans receivable, net 8 inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 693,349. 10a basis. Complete Part VI of Schedule D 333,660. 359,689. 379,445. 10c 10b b Less: accumulated depreciation 11 11 Investments · publicly traded securities 12 Investments · other securities. See Part IV, line 11 12 13 Investments · program-related. See Part IV, line 11 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 491,050. 576,622. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,006. 2,838. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 31,522. 32,025. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 0. 109,827. 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Schedule D 34,528. 144,690. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ► X and complete lines 30 through 34. 0. 30 Capital stock or trust principal, or current funds 0. 31 Paid in or capital surplus, or land, building, or equipment fund 456,522. 431,932. 32 Retained earnings, endowment, accumulated income, or other funds 32 456,522. 431,932. 33 33 Total net assets or fund balances 491,050. 576,622. 34 Total liabilities and net assets/fund balances

	990 (2012) White County Farm Bureau	71-027	8869	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				ليا
	v.	1 1	201	- 4	00
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>82</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2			92.
3	Revenue less expenses Subtract line 2 from line 1	3			90.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	43	L , 9	32.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	456	,5	<u> 22.</u>
Pa	rt XII Financial Statements and Reporting				
_	Check if Schedule O contains a response to any question in this Part XII				ᆜ
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Sched	lule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or revie	wed 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?		2ь		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	arate basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	f the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in §	Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	Single Audit			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re-	equired audit			
	or guidte, explain why in Schedule O and describe any stops taken to undergo such guidte		36		

Form **990** (2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

► See separate instructions.

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

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

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

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

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

	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.		-	
Nan	ne of organization			Empl	loyer identification number
	White C	ounty Farm Burea	au		71-0278869
Pa	ert I-A Complete if the or	ganization is exempt und	der section 501(c	or is a section 527 o	rganization.
2	Provide a description of the organic Political expenditures Volunteer hours	zation's direct and indirect politic	cal campaign activities	s in Part IV. ▶\$	
Pa	art I-B Complete if the or	ganization is exempt und	der section 501(c)(3).	
	Enter the amount of any excise tax			▶ \$	
	Enter the amount of any excise tax	• •			
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
48	a Was a correction made?				Yes No
t	olf "Yes," describe in Part IV.			 	
P	ert I-C Complete if the or	ganization is exempt und	der section 501(c), except section 501(c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s	section 527	
	exempt function activities			▶ \$	
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here a	and on Form 1120-PO	L,	
_	line 17b			> \$	Yes No.
	Did the filing organization file Form		181) of all acadean 507 a		
5	Enter the names, addresses and en made payments. For each organize	ation listed, enter the amount pa	id from the filing organ	ization's funds. Also enter th	e amount of political
	contributions received that were pr				te segregated fund or a
	political action committee (PAC). If				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
					
	<u> </u>				

Schedule C (Form 990 or 990 EZ) 2012	White Co	ounty Farm Bure	au = 504(a)(3) and file)278869 Page 2
		s exempt under section	on 501 (c)(3) and file	ea rorm 5/00	
(election under sec			- Dort IV and affiliated	arous mombor's par	no address EIN
•		an affiliated group (and list i obying expenditures).	n Fan IV each annated	group member s nai	ne, address, Lift,
· — ` · ·		ox A and "limited control" pr	ovisions apply		
Limit	ts on Lobbying	g Expenditures s amounts paid or incurred		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ			-		
b Total lobbying expenditures to influ	•	* '	ŀ		-
c Total lobbying expenditures (add li					
 d Other exempt purpose expenditure e Total exempt purpose expenditure 		and td)			
f Lobbying nontaxable amount. Enter			th columns.		
If the amount on line 1e, column (a) o		The lobbying nontaxable an	1 1		100
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1,000		\$100,000 plus 15% of the ex			
Over \$1,000,000 but not over \$1,5		3175,000 plus 10% of the ex	11		
Over \$1,500,000 but not over \$17,					
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable amount (en		·	}		
h Subtract line 1g from line 1a. If zer	-				
i Subtract line 1f from line 1c. If zero			L 61- F 4700		<u> </u>
j If there is an amount other than ze		e 1h or line 1i, did the organiz	ation file Form 4/20		Yes No
reporting section 4911 tax for this		ear Averaging Period Under	Section FO1/h)		165 110
	ations that m	ade a section 501(h) election See the instructions for line	n do not have to comp		
	Lobbying	Expenditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))		-	1		
c Total lobbying expenditures					
C . Otal 1000/111g Oxpolitions					
d Grassroots nontaxable amount				······································	
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures	<u>-</u>			<u> </u>	200 57 2015
				Schedule C (Form	990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 White County Farm Bureau 71-0278869 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(b)) (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.)	<u>(t</u>	o)
of the lobbying activity.	Yes	No	Amount	
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:				
a Volunteers?				
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? 				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?			· <u></u> -	
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-			
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ction	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No." OF	h Dad	. III A 1:	- 2 ia
answered "Yes."			IIII-A, III	
answered "Yes." 1 Dues, assessments and similar amounts from members		1 1	i III-A, IIr	
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).			. III-A, III	
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).		1		
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year		_1 	i III-A, III	
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year		1 2a 2b	i III-A, III	
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total		2a 2b 2c	i III-A, III	
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

White County Farm Bureau

Employer identification number 71-0278869

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(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 donor advisors in	writing that the assets held in donor advised fu	unds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
_	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?	,, 25.10, 25.100, 6.10, 6.1, 6.1.6, 61, 61, 60, 60, 60, 60, 60, 60, 60, 60, 60, 60	Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990. Part I	
1	Purpose(s) of conservation easements held by the organizati		
•	Preservation of land for public use (e.g., recreation or e		ally important land area
	Protection of natural habitat	Preservation of a certified	- •
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of a	conservation easement on the last
_	day of the tax year.		
	ouy of the tacyout.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired		
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the organic	—
-	vear ▶		
4	Number of states where property subject to conservation ear	sement is located >	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements r		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense state	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat		
	conservation easements		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statement	and balance sheet works of art,
	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that descri		,
ь	If the organization elected, as permitted under SFAS 116 (AS		balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	•	
	relating to these items:		,,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treations	asures, or other similar assets for financial gain	
_	the following amounts required to be reported under SFAS 1		., .
а	Revenues included in Form 990, Part VIII, line 1		▶ s
	Assets included in Form 990, Part X		> \$

		ounty Farm	Bure	<u>eau</u>				<u>/1-02</u>	78869	Page 2
Pa	t III Organizations Maintaining C	ollections of A	rt, Hist	orical T	reasures, c	or Other	Simila	ar Asse	ts(continu	red)
3	Using the organization's acquisition, accessi	on, and other recor	ds, check	any of the	following tha	it are a sigi	nificant	use of its	collection	items
	(check all that apply):									
а	Public exhibition	•	a 🗀 L	oan or exc	change progra	ams				
b	Scholarly research			Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	ey further	the organizati	on's exem	pt purpo	ose in Pa	rt XIII.	
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be ma								Yes	☐ No
Pai	t IV Escrow and Custodial Arran					"Yes" to Fo	orm 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Par			-						
1a	Is the organization an agent, trustee, custodi	an or other interme	diary for c	contributio	ns or other as	sets not in	cluded			
	on Form 990, Part X?		•						Yes	No
ь	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing to	able:						
		·	•						Amount	
С	Beginning balance						1c			
	Additions during the year						1d		_	
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	€ 21?						Yes	No
	If "Yes," explain the arrangement in Part XIII.			n has beer	n provided in F	Part XIII				
Pa	***************************************									
		(a) Current year	(b) Pr	or year	(c) Two year	s back (d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance		1		1					
	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships				7					
е	Other expenditures for facilities									
	and programs				1					
f	Administrative expenses				1					
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balance	ce (line 1g	, column (a)) held as:					
а	Board designated or quasi-endowment	•	%							
	Permanent endowment ▶	%								
	Temporarily restricted endowment ▶									
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.								
3a	Are there endowment funds not in the posse		ation that	t are held a	and administe	red for the	organiz	ation		
	by.								Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
ь	If "Yes" to 3a(II), are the related organizations	s listed as required o	on Sched	ule R?					3ь	
4	Describe in Part XIII the intended uses of the	organization's ende	owment fo	unds.			_			
Pai	t VI Land, Buildings, and Equipm	ent. See Form 990	0, Part X,	line 10						
	Description of property	(a) Cost or o			t or other	(c) Acc	umulate	d	(d) Book	value
		basis (investi	ment)	basis	(other)	depre	ciation			
1a	Land				0,000.					,000.
b	Buildings			47	2,066.	20	5,86	55.	266	,201.
С	Leasehold improvements									
d	Equipment				6,448.	12	23,58	35.	22	,863.
	Other			1	4,835.		4,2	10.	10	,625.
	Add lines 1a through 1e (Column (d) must e	qual Form 000 Part	Y colum	n (R) line	10(c))				359	.689.

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

<u>Sch</u> e	edule D (Form 990) 2012 White County Farm Bureau			71-	0278869	Page 4
	Reconciliation of Revenue per Audited Financial Statem	nents V	Vith Revenue per F	Retur	n	
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				
ь	Donated services and use of facilities	2b				
c	Recoveries of prior year grants	2c		7		
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
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				
Ь	Other (Describe in Part XIII.)	4b		1		
c	Add lines 4a and 4b		<u> </u>	4c	İ	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5		
	rt XII Reconciliation of Expenses per Audited Financial Stater	ments	With Expenses per		ırn	
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:					
-	Donated services and use of facilities	2a	1			
b	Prior year adjustments	2b		1		
	Other losses	2c		1		
d	Other (Describe in Part XIII.)	2d		7	}	
e	Add lines 2a through 2d		<u> </u>	2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			· · · · ·		
7	investment expenses not included on Form 990, Part VIII, line 7b	4a				
a 5	Other (Describe in Part XIII.)	4b		1		
b	Add lines 4a and 4b	70		4c		
С 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5		
	rt XIII Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	till lines	10 and 4: Part IV lines 1	Lb and	2b: Part V line	4: Part
	e 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part					
					<u>.</u>	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Namè of the organization

White County Farm Bureau Employer identification number 71-0278869

Part VII Section A. Officers, Directors, Tru	unty Fai		~~~		nd k	diah	Act	Compensated Employ	/1-U2/	
(A)	(B)	npic	уее	:s, a ((<u>na r</u> C)	iign	एउ र	(D)	(E)	(F)
Name and title	Average hours	(c	heck	Pos	ition		ly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustae or director	Institutional frustee	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 organization
27) Johnny Wheetley ember	0.50	X		ı		l		0.	0.	
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