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# Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

## 2012

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.  
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the 2012 calendar year, or tax year beginning Nov 1, 2012, and ending Oct 31, 2013

<p><b>B</b> Check if applicable:</p> <p><input type="checkbox"/> Address change</p> <p><input type="checkbox"/> Name change</p> <p><input type="checkbox"/> Initial return</p> <p><input type="checkbox"/> Terminated</p> <p><input type="checkbox"/> Amended return</p> <p><input type="checkbox"/> Application pending</p>	<p><b>C</b> Name of organization <b>WEBB COUNTY FARM BUREAU</b></p> <p>Number and street (or P O box, if mail is not delivered to street address) Room/suite <b>1303 CALLE DEL NORTE 100</b></p> <p>City or town, state or country, and ZIP + 4 <b>LAREDO TX 78041</b></p>	<p><b>D</b> Employer identification number <b>74-1355499</b></p> <p><b>E</b> Telephone number <b>(956) 712-3276</b></p> <p><b>F</b> Group Exemption Number</p>
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**G** Accounting Method:  Cash  Accrual Other (specify) \_\_\_\_\_

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**I** Website: N/A

**J** Tax-exempt status (check only one) --  501(c)(3)  501(c) ( 5 ) (insert no.)  4947(a)(1) or  527

**K** Check  if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 77,856.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

	1 Contributions, gifts, grants, and similar amounts received			
	2 Program service revenue including government fees and contracts			
	3 Membership dues and assessments			42,302.
	4 Investment income			
	5a Gross amount from sale of assets other than inventory	5a		
	b Less: cost or other basis and sales expenses	5b		
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6 Gaming and fundraising events			
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a		
	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
	c Less direct expenses from gaming and fundraising events	6c		
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	
	7a Gross sales of inventory, less returns and allowances	7a		
	b Less: cost of goods sold	7b		
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8 Other revenue (describe in Schedule O) See Form 990-EZ, Part I, Line 8 Other Revenue			35,554.
	<b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			<b>77,856.</b>
	10 Grants and similar amounts paid (list in Schedule O)			
	11 Benefits paid to or for members			
	12 Salaries, other compensation, and employee benefits			33,647.
	13 Professional fees and other payments to independent contractors			600.
	14 Occupancy, rent, utilities, and maintenance			12,687.
	15 Printing, publications, postage, and shipping			735.
	16 Other expenses (describe in Schedule O) See Form 990-EZ, Part I, Line 16 Other Expenses			25,745.
	<b>17 Total expenses.</b> Add lines 10 through 16			<b>73,414.</b>
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)			4,442.
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)			15,581.
	20 Other changes in net assets or fund balances (explain in Schedule O)			
	<b>21 Net assets or fund balances at end of year.</b> Combine lines 18 through 20			<b>20,023.</b>

**BAA** For Paperwork Reduction Act Notice, see the separate instructions. Form 990-EZ (2012)

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**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O		X
<b>34</b> Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
<b>35a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	X	
<b>b</b> If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	X	
<b>c</b> Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III		X
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		X
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="text" value="37a"/> 0.		
<b>b</b> Did the organization file Form 1120-POL for this year?		X
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
<b>b</b> If 'Yes,' complete Schedule L, Part II and enter the total amount involved <input type="text" value="38b"/>		
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 <input type="text" value="39a"/>		
<b>b</b> Gross receipts, included on line 9, for public use of club facilities <input type="text" value="39b"/>		
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="text"/> ; section 4912 <input type="text"/> , section 4955 <input type="text"/>		
<b>b</b> Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I		
<b>c</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text"/>		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization <input type="text"/>		
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T		X
<b>41</b> List the states with which a copy of this return is filed <input type="text"/>		

**42a** The organization's books are in care of TEXAS FARM BUREAU Telephone no. (254) 751-2337  
 Located at P O BOX 2689 WACO TX ZIP + 4 76702-2689

	Yes	No
<b>b</b> 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)? If 'Yes,' enter the name of the foreign country: <input type="text"/>		X
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country: <input type="text"/>		X

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

**43** Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  and enter the amount of tax-exempt interest received or accrued during the tax year

	Yes	No
<b>44a</b> Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
<b>b</b> Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
<b>c</b> Did the organization receive any payments for indoor tanning services during the year?		X
<b>d</b> If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		
<b>45a</b> Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?		X
<b>b</b> 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,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

	Yes	No
46		X

**Part VI Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 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

	Yes	No
47		
48		
49a		
49b		

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If 'Yes,' was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

Yes  No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**  
 Signature of officer: Clarence W. Earles Date: 3/5/14  
 Type or print name and title: Clarence W. Earles PRESIDENT

**Paid Preparer Use Only**  
 Print/Type preparer's name: Patrick Ehlers Preparer's signature: Patrick Ehlers Date: 02/20/14 Check  if self-employed PTIN: P01278523  
 Firm's name: Texas Farm Bureau Firm's EIN: 74-1145986  
 Firm's address: P.O. Box 2689 Waco TX 76702 Phone no: (254) 751-2337

May the IRS discuss this return with the preparer shown above? See instructions

Yes  No

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

**2012**

**Open to Public  
Inspection**

Name of the organization

WEBB COUNTY FARM BUREAU

Employer identification number

74-1355499

Pt III, Line 31 County Farm Bureau volunteers participate in matters  
dealing with legislation that affects agriculture.

County Farm Bureau volunteers help organize their members  
into separate agricultural commodity interests.

Pt III, Line 28 Annual meeting  
Held an annual meeting in which all members are invited. Purpose was to  
discuss relative local, statewide, and national agricultural issues,  
the importance of agriculture education, the business of the organization,  
and current legislative issues as they relate to agriculture. Members  
of the county farm bureau, county farm bureau staff, county farm bureau  
voluntary leaders, Texas Farm Bureau staff and invited guests participated.

Pt III, Line 29 Youth Leadership Conference  
Sponsored student(s) to attend the Farm Bureau Youth Leadership Conference.  
The purpose of the conference is to give selected high school students in Texas  
a better understanding of the various forms of government and educate them  
their responsibilities as citizens. The conference runs three full days and  
includes lectures, discussions, and films by outstanding authorities in  
government, history, and economics.

Pt III, Line 30 Members of the County Farm Bureau are also members of  
Texas Farm Bureau, a statewide agricultural organization  
(exempt under 501(c) (5)) that works for the betterment  
of agriculture and coordinates programs on a statewide  
basis. Members of the County Farm Bureau are also members  
of the American Farm Bureau, a national agricultural  
organization that also works for the betterment of agriculture.

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ

**Form 990-EZ, Part I, Line 8 Other Revenue**

Other revenue (describe in Schedule O)

<u>INS SERVICE FEES</u>	<u>35,110.</u>
<u>BANKING PROGRAM</u>	<u>294.</u>
<u>TFB AWARDS</u>	<u>150.</u>
Total	<u><u>35,554.</u></u>

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ

**Form 990-EZ, Part I, Line 16 Other Expenses**

Other expenses (describe in Schedule O)

<u>STATE MEMBERSHIP DUES</u>	<u>18,717.</u>
<u>COMMITTEE/CONTRACT SERVICES</u>	<u>894.</u>
<u>OFFICE OPERATIONS EXPENSES</u>	<u>4,157.</u>
<u>EQUIPMENT EXPENSE</u>	<u>106.</u>
<u>OTHER EXPENSE</u>	<u>1,198.</u>
<u>TRAVEL/CONFERENCES/MEETINGS</u>	<u>653.</u>
<u>ADVERTISING/PUBLIC RELATIONS</u>	<u>20.</u>
Total	<u><u>25,745.</u></u>

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ

**Form 990-EZ, Page 1, Part II, Line 24**

<b>Line 24 - Other Assets:</b>	<b>Beginning of Year</b>	<b>End of Year</b>
<u>Accounts Rec - Other</u>	<u>371.</u>	<u>0.</u>
Total	<u><u>371.</u></u>	<u><u>0.</u></u>

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ

**Form 990-EZ, Page 1, Part II, Line 26**

<b>Line 26 - Total Liabilities:</b>	<b>Beginning of Year</b>	<b>End of Year</b>
<u>Accounts Payable &amp; Accrued Expenses</u>	<u>3,857.</u>	<u>3,975.</u>
Total	<u><u>3,857.</u></u>	<u><u>3,975.</u></u>