Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public.
► Information about Form 990 and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning , 2013, and ending ,

B Check if applicable
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization MICHIGAN FARM BUREAU
Doing Business As
Number and street (or P O box if mail is not delivered to street address) 7373 W SAGINAW HWY — Room/suite
City or town, state or province, country, and ZIP or foreign postal code LANSING MI 48917

D Employer Identification Number 38-1718391
E Telephone number (517) 323-7000
G Gross receipts $ 12,891,708.

F Name and address of principal officer ANDREW J KOK 7373 W SAGINAW HWY LANSING MI 48917

H(a) Is this a group return for subordinates? [ ] Yes [X] No
H(b) Are all subordinates included? [ ] Yes [ ] No
If 'No,' attach a list (see instructions)
H(c) Group exemption number ►

I Tax-exempt status [ ] 501(c)(3) [X] 501(c) (5) ◄ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ► www.michfb.com

K Form of organization [X] Corporation [ ] Trust [ ] Association [ ] Other ► **L** Year of formation 1919 **M** State of legal domicile MI

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: MICHIGAN FARM BUREAU IS A MEMBER DIRECTED AGRICULTURAL ORGANIZATION WHOSE PURPOSE IS TO REPRESENT, PROTECT, AND ENHANCE THE BUSINESS, ECONOMIC, SOCIAL AND EDUCATIONAL INTERESTS OF OUR MEMBERS LOCATED THROUGHOUT THE STATE OF MICHIGAN.

2 Check this box ► [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	17
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	111
6	Total number of volunteers (estimate if necessary)	6	7,282
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	358,703.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-90,907.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	7,280,505.	7,735,319.
	9	Program service revenue (Part VIII, line 2g)	511,776.	410,809.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,078,836.	4,298,256.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,650,679.	447,324.
	12	Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	16,521,796.	12,891,708.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	80,900.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	9,988,081.	5,775,911.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ►		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,606,934.	4,527,720.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,595,015.	10,384,531.
	19	Revenue less expenses. Subtract line 18 from line 12	-73,219.	2,507,177.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	11,740,796.	14,159,575.
	21	Total liabilities (Part X, line 26)	4,075,694.	3,813,013.
	22	Net assets or fund balances. Subtract line 21 from line 20	7,665,102.	10,346,562.

RECEIVED
A005 NOV 2 5 2014 IRS-OSC
OGDEN, UT

SCANNED DEC 1 7 2014

Part II Signature Block

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] Signature of officer — Date 11/7/14
► ANDREW J KOK Secretary & General Counsel
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
Mark Hooper	Mark Hooper	11/6/14		P00039887

Firm's name ► ANDREWS HOOPER PAVLIK PLC
Firm's address ► 4295 OKEMOS RD STE 200 OKEMOS MI 48864-6201
Firm's EIN ► 38-3133790
Phone no (517) 706-0800

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

913 4

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . [X]

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . [ ] Yes [X] No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . [ ] Yes [X] No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4 a (Code:) (Expenses $ including grants of $) (Revenue $)

THE PUBLIC POLICY AND COMMODITY DIVISION IS RESPONSIBLE FOR ESTABLISHING A SYSTEMATIC PROCESS FOR DEVELOPMENT AND DISTRIBUTION OF BACKGROUND INFORMATION ON CURRENT AND EMERGING ISSUES TO ENSURE THAT QUALIFIED DELEGATES TO MFB'S STATE ANNUAL MEETING ARE MAKING INFORMED POLICY DECISIONS. TOPICS INCLUDE AGRICULTURAL ECOLOGY, COMMODITY MARKETING, LOCAL AFFAIRS AND LAND USE ACTIVITIES. THE PUBLIC POLICY DIVISION IS THE KEY RESOURCE IN GUIDING THE MEMBERSHIP IN DEVELOPING POLICY. WHEN POLICY DECISIONS ARE ADOPTED BY THE MEMBERS, THE POLICY PROVIDES DIRECTION FOR STAFF WHEN INTERACTING WITH THE LOCAL, STATE AND NATIONAL ORGANIZATIONS DURING THE YEAR.

4 b (Code:) (Expenses $ including grants of $) (Revenue $)

THE INFORMATION AND PUBLIC RELATIONS DIVISION (IPR) IS RESPONSIBLE FOR GENERAL COMMUNICATIONS WITH MEMBERS REGARDING MICHIGAN FARM BUREAU (MFB) POLICIES, PROGRAMS AND ISSUES OF IMPORTANCE IN THE AGRICULTURAL INDUSTRY THROUGH THE FOLLOWING PUBLICATIONS:

MICHIGAN FARM NEWS IS MICHIGAN'S ONLY STATEWIDE FARM PUBLICATION. TWENTY TIMES A YEAR, FARMER MEMBERS RECEIVE FIRSTHAND ORIGINAL AND ESSENTIAL INFORMATION ABOUT CURRENT AGRICULTURAL NEWS, STATE AND NATIONAL LEGISLATIVE AND REGULATORY ISSUES: INCLUDING FARM PROGRAM UPDATES, WEATHER FORECASTS, FARM SAFETY, AND MARKET ANALYSIS.

4 c (Code:) (Expenses $ including grants of $) (Revenue $)

THE FIELD OPERATIONS DIVISION PREPARES AND DEVELOPS AGRICULTURAL LEADERS. THIS IS ACCOMPLISHED THROUGH EDUCATION AND LEADERSHIP SKILL DEVELOPMENT PROGRAMS FOR CURRENT LOCAL AG LEADERS, STATE AND LOCAL COMMITTEES, AND MEMBERS. A TARGETED PROGRAM IS FOR YOUNG FARMERS BETWEEN THE AGES OF 18 AND 35. IT OFFERS AGRICULTURAL EDUCATION,ACTION COMMITTEES, LEADERSHIP TRAINING, COMPETITIONS, AND SOCIAL EVENTS TO ENCOURAGE INVOLVEMENT AND TO DEVELOP FUTURE LEADERSHIP. PROMOTION AND EDUCATION PROGRAMS FOR PUBLIC EDUCATION ABOUT THE AGRICULTURAL INDUSTRY ARE OFFERED FOR 4-H CLUBS, AND FFA CHAPTERS, SCHOOLS, AND CIVIC GROUPS. THE DIVISION REGIONAL REPRESENTATIVES ARE A KEY RESOURCE IN BRINGING THE FIELD PERSPECTIVE TO THE ORGANIZATION. REGIONAL REPRESENTATIVES REGULARLY AND ACTIVELY ENGAGE WITH

4 d Other program services. (Describe in Schedule O.)

(Expenses $ including grants of $) (Revenue $)

4 e Total program service expenses ►

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If 'Yes,' complete Schedule A*	1		X
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If 'Yes,' complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 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 provide advice on the distribution or investment of amounts in such funds or accounts? *If 'Yes,' complete Schedule D, Part I*	6		X
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.			
a	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
e	Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If 'Yes,' complete Schedule D, Part X*	11f		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	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If 'Yes,' complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If 'Yes,' complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If 'Yes,' complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If 'Yes,' complete Schedule G, Part I (see instructions)*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If 'Yes,' complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If 'Yes,' complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If 'Yes,' complete Schedule H*	20		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? *If 'Yes,' complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants or 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		X
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 25a*	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If 'Yes,' complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If 'Yes,' complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If 'Yes,' complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If 'Yes,' complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If 'Yes,' complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If 'Yes,' complete Schedule R, Part V, line 2*	35b	X	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If 'Yes,' complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

				Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	119			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1 c	X	
2 a 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	2 a	111			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2 b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3 a Did the organization have unrelated business gross income of $1,000 or more during the year?			3 a	X	
b If 'Yes' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation in Schedule O*			3 b	X	
4 a 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)?			4 a		X
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.					
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			5 c		
6 a 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?			6 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6 b		
7 Organizations that may receive deductible contributions under section 170(c).					
a 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?			7 a		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7 c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7 e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7 f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7 h		
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 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?			9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?			9 b		
10 Section 501(c)(7) organizations. Enter					
a Initiation fees and capital contributions included on Part VIII, line 12	10 a				
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b				
11 Section 501(c)(12) organizations. Enter:					
a Gross income from members or shareholders	11 a				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b				
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state?			13 a		
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 the organization is licensed to issue qualified health plans	13 b				
c Enter the amount of reserves on hand	13 c				
14 a Did the organization receive any payments for indoor tanning services during the tax year?			14 a		X
b If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O*			14 b		

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 O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . . . [X]

Section A. Governing Body and Management

			Yes	No
1 a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1 a	17		
b Enter the number of voting members included in line 1a, above, who are independent	1 b	16		
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?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6		X	
7 a 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?	7 a		X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8 a		X	
b Each committee with authority to act on behalf of the governing body?	8 b		X	
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			X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

		Yes	No
10 a Did the organization have local chapters, branches, or affiliates?	10 a	X	
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?	10 b	X	
11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12 a Did the organization have a written conflict of interest policy? *If 'No,' go to line 13*	12 a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done*	12 c	X	
13 Did the organization have a written whistleblower policy?	13	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?			
a The organization's CEO, Executive Director, or top management official	15 a	X	
b Other officers of key employees of the organization	15 b	X	
If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		

Section 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 (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

[ ] Own website [ ] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► PAULA DROSTE 7373 W SAGINAW HWY LANSING MI 48917-7900 (517) 679-5426

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

Check if Schedule O contains a response or note to any line in this Part VII . . . ☐

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

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Brigette Leach Director	12.50 0.54	X						9,686.	11,500.	0.
(2) Renee McCauley Director	7.12 0.10	X						5,060.	0.	0.
(3) Paul Koeman Director	11.06 0.71	X						8,426.	11,500.	0.
(4) L. Charles Mulholland Director	15.67 0.42	X						11,456.	11,500.	0.
(5) Michael Mulders Director	11.63 0.54	X						9,426.	12,000.	0.
(6) Ben LaCross Director	9.81 0.32	X						9,206.	11,000.	0.
(7) Patrick McGuire Director	20.77 0.42	X						15,836.	11,500.	0.
(8) Stephanie Schafer Director	8.56 0.32	X						7,826.	11,500.	0.
(9) Caleb Stewart Director	0.87 0.10	X						0.	0.	0.
(10) Jennifer Lewis Director	11.54 0.42	X						9,046.	11,500.	0.
(11) Douglas Darling Director	12.40 0.42	X						8,256.	11,500.	0.
(12) Michael Fusilier Director	14.33 0.42	X						9,726.	11,500.	0.
(13) Carl Bednarski Executive Committee Director	10.29 0.32	X						9,046.	11,000.	0.
(14) Alan Garner Director	12.40 0.42	X						8,966.	11,500.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15) David Bahrman Director	11.44 0.42	X						9,626.	11,500.	0.
(16) Michael Deruiter Director	6.44 0.10	X						5,236.	0.	0.
(17) Andrew Hagenow Vice President	20.07 1.93	X		X				17,436.	11,500.	0.
(18) Wayne H. Wood President	30.00 10.00	X		X				272,717.	10,000.	17,828.
(19) Andrew J. Kok Secretary/General Counsel	26.46 13.54			X				260,416.	0.	35,358.
(20) Douglas J. Kammann Treasurer	19.10 0.90			X				184,007.	0.	3,332.
(21) Scott Piggott Chief Operating Officer	22.54 17.46			X				196,145.	0.	5,210.
(22) David VanderHaagen Senior Counsel	9.00 13.00			X				242,834.	0.	11,961.
(23) Thomas G. Wiseman Human Resource Director	4.00 36.00					X		205,387.	0.	11,489.
(24) Patrick Blanchett Director of Internal Audit	3.00 37.00					X		188,731.	0.	9,536.
(25) Dennis E. Rudat Director of Info. & Public Relations	23.50 16.50					X		145,141.	0.	18,858.
1 b Sub-total ▶								1,849,638.	170,500.	113,572.
c Total from continuation sheets to Part VII, Section A ▶								279,988.	0.	37,361.
d Total (add lines 1b and 1c) ▶								2,129,626.	170,500.	150,933.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 18

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*	3	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If 'Yes' complete Schedule J for such individual*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS						
1a Federated campaigns	1a					
b Membership dues	1b	6,663,036.				
c Fundraising events	1c					
d Related organizations	1d	853,000.				
e Government grants (contributions)	1e	93,983.				
f All other contributions, gifts, grants, and similar amounts not included above	1f	125,300.				
g Noncash contributions included in lines 1a-1f: $						
h **Total.** Add lines 1a-1f ►			7,735,319.			
PROGRAM SERVICE REVENUE		**Business Code**				
2a AG PROMOTION AND EDUCATION		900099	182,483.	182,483.	0.	0.
b LEADERSHIP CONFERENCES		900099	50,396.	50,396.	0.	0.
c AG LEGISLATIVE SERVICES		900099	78,950.	78,950.	0.	0.
d AG ENVIRONMENTAL		900099	48,901.	48,901.	0.	0.
e REGULATORY AND SAFETY		900099	42,493.	42,493.	0.	0.
f All other program service revenue			7,586.	7,586.	0.	0.
g **Total.** Add lines 2a-2f ►			410,809.			
OTHER REVENUE						
3 Investment income (including dividends, interest and other similar amounts) ►			4,175,225.	0.	0.	4,175,225.
4 Income from investment of tax-exempt bond proceeds ►						
5 Royalties ►			29,494.	0.	0.	29,494.
	(i) Real	(ii) Personal				
6a Gross rents						
b Less: rental expenses						
c Rental income or (loss)						
d Net rental income or (loss) ►						
	(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory		123,031.				
b Less: cost or other basis and sales expenses						
c Gain or (loss)		123,031.				
d Net gain or (loss) ►			123,031.	123,031.	0.	0.
8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	a					
b Less: direct expenses	b					
c Net income or (loss) from fundraising events ►						
9a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities ►						
10a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory ►						
Miscellaneous Revenue		**Business Code**				
11a ANNUAL MEETING AND CONVENTIONS		900099	59,127.	59,127.	0.	0.
b PRINTING AND VIDEO SERVICES		900099	310,241.	0.	310,241.	0.
c SERVICE FEE REVENUE		900099	48,462.	0.	48,462.	0.
d All other revenue						
e **Total.** Add lines 11a-11d ►			417,830.			
12 **Total revenue.** See instructions ►			12,891,708.	592,967.	358,703.	4,204,719.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX . . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 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	80,900.			
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	2,250,152.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	2,051,967.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	728,481.			
9 Other employee benefits	450,916.			
10 Payroll taxes	294,395.			
11 Fees for services (non-employees):				
a Management				
b Legal	9,462.			
c Accounting	18,165.			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	199,805.			
12 Advertising and promotion	220,161.			
13 Office expenses	581,436.			
14 Information technology	325,615.			
15 Royalties	0.			
16 Occupancy	325,838.			
17 Travel	683,724.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	1,217,104.			
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	70,293.			
23 Insurance	46,587.			
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.)				
a BAD DEBT EXPENSE	24,471.			
b DONATIONS	3,755.			
c AFBF DUES	801,304.			
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	10,384,531.			
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)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash — non-interest-bearing		1	
	2	Savings and temporary cash investments	403,312.	2	1,396,478.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,611,163.	4	1,418,312.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	106,296.	9	273,017.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 2,160,901.			
	b	Less: accumulated depreciation — 10b: 1,545,677.	726,361.	10c	615,224.
	11	Investments — publicly traded securities	6,397,026.	11	5,200,165.
	12	Investments — other securities. See Part IV, line 11	2,496,638.	12	5,256,379.
	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 equal line 34)	11,740,796.	16	14,159,575.
Liabilities	17	Accounts payable and accrued expenses	1,941,500.	17	1,601,223.
	18	Grants payable		18	
	19	Deferred revenue	2,134,194.	19	2,211,790.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	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		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	4,075,694.	26	3,813,013.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ► ☒ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	7,665,102.	27	10,346,562.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	7,665,102.	33	10,346,562.
	34	Total liabilities and net assets/fund balances	11,740,796.	34	14,159,575.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,891,708.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,384,531.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,507,177.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,665,102.
5	Net unrealized gains (losses) on investments	5	174,283.
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	10,346,562.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☐

			Yes	No
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,' explain in Schedule O.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3 a	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?	3 a		X
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b		

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, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization: MICHIGAN FARM BUREAU

Employer identification number: 38-1718391

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► $

(ii) Assets included in Form 990, Part X ► $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► $

b Assets included in Form 990, Part X ► $

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1 c	
d Additions during the year	1 d	
e Distributions during the year	1 e	
f Ending balance	1 f	

2 a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explantion has been provided in Part XIII ☐

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment		1,756,890.	1,236,485.	520,405.
e Other		404,011.	309,192.	94,819.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ►				615,224.

Part VII Investments – Other Securities.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. 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) Financial derivatives		
(2) Closely-held equity interests	5,256,379.	Cost
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 12)* ►	5,256,379.	

Part VIII Investments – Program Related.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 13)* ►		

Part IX Other Assets.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, column (B), line 15)* ►	

Part X Other Liabilities.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, column (B) line 25)* ►	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1 Total revenue, gains, and other support per audited financial statements			1	12,100,097.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains on investments	2a	174,283.		
b Donated services and use of facilities	2b			
c Recoveries of prior year grants	2c			
d Other (Describe in Part XIII.)	2d			
e Add lines 2a through 2d			2e	174,283.
3 Subtract line 2e from line 1			3	11,925,814.
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	4a			
b Other (Describe in Part XIII.)	4b	965,894.		
c Add lines 4a and 4b			4c	965,894.
5 Total revenue Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	12,891,708.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements			1	9,418,634.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a Donated services and use of facilities	2a			
b Prior year adjustments	2b			
c Other losses	2c			
d Other (Describe in Part XIII.)	2d			
e Add lines 2a through 2d			2e	
3 Subtract line 2e from line 1			3	9,418,634.
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	4a			
b Other (Describe in Part XIII.)	4b	965,897.		
c Add lines 4a and 4b			4c	965,897.
5 Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	10,384,531.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Pt XI Line 4b Taxable Revenue and gain on sale of asset were reported
Pt XII Line 4b as revenue on the 990 whereas on the audited financials
these items were net with expense.
County Membership Growth was net with membership revenue
whereas on the audited financials this was included in
expense. AFBF Dues were reported as an expense on the
990 whereas they were net with membership dues for
audit presentation.

Part XIII Supplemental Information *(continued)*

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.
► Attach to Form 990.
► Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2013
Open to Public Inspection

Name of the organization: MICHIGAN FARM BUREAU
Employer identification number: 38-1718391

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☐ Yes ☒ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MICHIGAN STATE UNIVERSITY 300 SPARTAN WAY EAST LANSING MI 48824	38-6005984	3	45,000.				THE FFA FOUNDA
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ► 1

3 Enter total number of other organizations listed in the line 1 table . . . ►

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Pt I Line 2 TARGETED GRANT RECIPIENTS ARE REQUESTED TO SUBMIT GRANT PROPOSALS. ELIGIBILITY OF PROPOSAL IS DETERMINED AND 1/2 THE APPROVED GRANT AMOUNT IS AWARDED TO THE RECIPIENT. UPON COMPLETION OF THE GRANT PERIOD, RECIPIENTS SUBMIT DATES AND ACTIVITIES PERFORMED, EXPENSE DETAIL, AND NUMBER OF PARTICIPANTS. ACTIVITY AND DOCUMENTATION ARE REVIEWED FOR ELIGIBILITY AND EXPENSE SUBSTANTIATION. UPON APPROVAL REMAINING AMOUNTS DUE TO OR FROM RECIPIENTS ARE PAID OR COLLECTED. GRANT DOCUMENTATION IS KEPT IN ACCORDANCE WITH THE ORGANIZATIONS DOCUMENT RETENTION AND DESTRUCTION STANDARDS.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► **Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.**
► **Attach to Form 990.** ► **See separate instructions.**
► **Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No 1545-0047
2013
Open to Public Inspection

Name of the organization: MICHIGAN FARM BUREAU
Employer identification number: 38-1718391

Part I Questions Regarding Compensation

		Yes	No
1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
[ ] First-class or charter travel; [X] Housing allowance or residence for personal use; [ ] Travel for companions; [ ] Payments for business use of personal residence; [X] Tax indemnification and gross-up payments; [ ] Health or social club dues or initiation fees; [ ] Discretionary spending account; [ ] Personal services (e.g., maid, chauffeur, chef)			
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b	X	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
[X] Compensation committee; [ ] Written employment contract; [X] Independent compensation consultant; [X] Compensation survey or study; [ ] Form 990 of other organizations; [X] Approval by the board or compensation committee			
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:			
a Receive a severance payment or change-of-control payment?	4 a	X	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4 b	X	
c Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		X
If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a The organization?	5 a		
b Any related organization?	5 b		
If 'Yes' to line 5a or 5b, describe in Part III.			
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a The organization?	6 a		
b Any related organization?	6 b		
If 'Yes' to line 6a or 6b, describe in Part III.			
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7		
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III	8		
9 If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
1 Wayne H. Wood, President	(i)	229,279.	0.	43,438.	3,167.	14,661.	290,545.	0.
	(ii)	10,000.	0.	0.	0.	0.	10,000.	0.
2 Andrew J. Kok, Secretary/General Counsel	(i)	250,008.	0.	10,408.	16,009.	19,349.	295,774.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 Douglas J. Kammann, Treasurer	(i)	62,476.	0.	121,531.	407.	2,925.	187,339.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 Scott Piggott, Chief Operating Officer	(i)	186,371.	0.	9,774.	1,381.	3,829.	201,355.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 David VanderHaagen, Senior Counsel	(i)	49,787.	30,955.	162,092.	1,328.	10,633.	254,795.	87,046.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 Thomas G. Wiseman, Human Resource Director	(i)	190,829.	3,678.	10,880.	2,836.	8,653.	216,876.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 Patrick Blanchett, Director of Internal Audit	(i)	173,585.	3,309.	11,837.	2,671.	6,865.	198,267.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 Dennis E. Rudat, Director of Info. & Public Relations	(i)	131,841.	2,549.	10,751.	1,376.	17,482.	163,999.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 Thomas L. Nugent, Director of Field Operations	(i)	131,111.	2,552.	10,771.	0.	0.	144,434.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 Brian Preston, Former Director	(i)	1,495.	0.	0.	0.	0.	1,495.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 Brent Hotchkin, Former Director	(i)	1,840.	0.	0.	0.	0.	1,840.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12 John VanderMolen, Former Officer	(i)	2,486.	0.	0.	0.	0.	2,486.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, for Part II. Also complete this part for any additional information

Pt I Line 1a THE PRESIDENT IS A DAIRY FARMER IN MARLETTE, MI. HE IS PROVIDED A RESIDENCE LOCATED NEAR THE HEADQUARTERS OFFICE FOR THE CONVENIENCE OF THE ORGANIZATION BECAUSE THE DAILY COMMUTE IS 120 MILES ONE-WAY. WE GROSS UP THE PRESIDENT'S TAXABLE COMPENSATION AND PROVIDE CASH PAYMENT FOR ESTIMATED TAX COST FOR THE USE OF THE RESIDENCE. EXECUTIVE COMPENSATION PACKAGE INCLUDES A COMPANY VEHICLE. WE GROSS UP EXECUTIVE TAXABLE COMPENSATION FOR PERSONAL USE OF VEHICLES AND PROVIDE CASH PAYMENT FOR ESTIMATED TAX COST FOR PERSONAL USE OF VEHICLE.

Pt I Line 4a DOUGLAS KAMMANN WAS PROVIDED WITH A SEVERANCE PACKAGE IN THE AMOUNT OF $121,531.26

Pt I Line 4b DAVID VANDERHAAGEN IS A PARTICIPANT IN A SUPPLEMENTAL RETIREMENT PLAN FORM 990 SCHEDULE J, PT II, ITEM (B)iii INCLUDES $87,045.73 IN COMPENSATION FROM THIS PLAN AND IS ALSO INCLUDED IN ITEM (F).

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.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization: MICHIGAN FARM BUREAU

Employer identification number: 38-1718391

ADDITIONAL INFORMATION:

ALL LINES LEFT BLANK ARE NOT APPLICABLE TO THE ORGANIZATION

PART III, LINE 1:

MICHIGAN FARM BUREAU IS A MEMBER DIRECTED AGRICULTURAL ORGANIZATION WHOSE PURPOSE IS TO REPRESENT, PROTECT, AND ENHANCE THE BUSINESS, ECONOMIC, SOCIAL AND EDUCATIONAL INTERESTS OF OUR MEMBERS LOCATED THROUGHOUT THE STATE OF MICHIGAN.

PART III, LINE 4A - FIRST ACCOMPLISHMENT

POLICY DEVELOPMENT BEGINS WITH THE APPOINTMENT BY THE 67 COUNTY FARM BUREAUS OF A POLICY DEVELOPMENT COMMITTEE. IT INCLUDES REPRESENTATIVES FROM COMMUNITY ACTION GROUPS, YOUNG FARMERS, COUNTY COMMITTEES, OTHER SPECIAL COMMITTEES, AND INDIVIDUAL MEMBERS. THE POLICY DEVELOPMENT COMMITTEE HAS THE RESPONSIBILITY TO STUDY, DISCUSS AND DEVELOP FARM BUREAU POLICY RECOMMENDATIONS ON LOCAL, STATE, AND NATIONAL ISSUES. LOCAL, STATE AND NATIONAL POLICY RECOMMENDATIONS ARE MADE TO MEMBERS AND ARE VOTED ON AT THE COUNTY ANNUAL MEETING. A 20-MEMBER STATE POLICY DEVELOPMENT COMMITTEE IS APPOINTED WITH REPRESENTATION FROM ALL AREAS OF THE STATE. THIS COMMITTEE MEETS TO GATHER INFORMATION ON A WIDE RANGE OF ISSUES, REVIEW ALL OF THE COUNTY RECOMMENDATIONS, AND PRODUCES A SLATE OF PROPOSED ADDITIONS, CHANGES, AND DELETIONS TO THE POLICY AND FOR ACTION BY DELEGATES OF THE MFB ANNUAL MEETING. FARM BUREAU'S POLICY DEVELOPMENT PROCESS RESULTED IN ABOUT 1,100 POLICY RECOMMENDATIONS FROM THE COUNTIES. OTHER RECOMMENDATIONS INCLUDE THOSE FROM VARIOUS MFB ADVISORY COMMITTEES, FOR A TOTAL OF APPROXIMATELY

Name of the organization: MICHIGAN FARM BUREAU

Employer identification number: 38-1718391

1,200 POLICY RECOMMENDATIONS CONSIDERED BY THE MFB POLICY DEVELOPMENT COMMITTEE. FINAL POLICY DECISIONS ARE MADE BY THE VOTING DELEGATES FROM EACH COUNTY FARM BUREAU AT THE MFB ANNUAL MEETING

PART III, LINE 4 B - SECOND ACCOMPLISHMENT

THE MFB ANNUAL REPORT AND MEMBER BENEFITS GUIDE IS PUBLISHED ONCE A YEAR AND INSERTED INTO THE MICHIGAN FARM NEWS. THE ANNUAL REPORT UPDATES MEMBERS ON THE OPERATIONAL STATUS OF MFB. MFB PRODUCES AGRINOTES & NEWS EVERY WEEK FOR MORE THAN 300 MICHIGAN NEWSPAPERS, TELEVISION AND RADIO STATIONS. THIS PROVIDES THE LATEST BREAKING AGRICULTURAL NEWS AND INSIGHT ON HOW ISSUES MAY IMPACT MICHIGAN FARMERS.

FB UPDATE IS THE VIDEO NEWSLETTER OF THE MFB. PRODUCED QUARTERLY, THE 20 MINUTE FB UPDATE FOCUSES ON STORIES IMPORTANT TO AGRICULTURE AND IS DISTRIBUTED TO 110 AGRI-SCIENCE TEACHERS AND 160 MFB COMMUNITY ACTION GROUPS. BENEFITS ADVISOR IS A FOUR-COLOR NEWSLETTER MAILED QUARTERLY TO ASSOCIATE MEMBERS. IT IS PACKED WITH INFORMATION ABOUT MEMBER SERVICES. THE IPR DIVISION COORDINATES THE ACTIVITIES OF THE MICHIGAN AG COUNCIL. IT IS A COALITION OF SIX COMMODITY ORGANIZATIONS AND AGRI-BUSINESSES UNITED FOR THE PURPOSE OF IMPROVING AND ENHANCING THE PUBLIC IMAGE OF LEADERSHIP FOR SEVERAL REGIONAL AG PROMOTION CAMPAIGNS IN COOPERATION WITH COUNTY FARM BUREAUS. THESE CAMPAIGNS HAVE UTILIZED PROMOTIONAL MATERIAL CREATED BY MFB, INCLUDING RADIO SPOTS, THEATER ADVERTISEMENTS, PRINT ADS, AND A TOOL KIT FOR CONDUCTING FARM TOURS. THE COUNCIL HAS ALSO CONSOLIDATED CLASSROOM LESSON PLANS FROM ALL COALITION PARTNERS INTO TWO STATE-APPROVED CURRICULUM GUIDES FOR GRADES K-6.

Name of the organization: MICHIGAN FARM BUREAU

Employer identification number: 38-1718391

	PART III, LINE 4C - THIRD ACCOMPLISHMENT
	COUNTY FARM BUREAUS, LOCAL AGRICULTURAL LEADERS, FARMERS AND MEMBERS.
	THE REGIONAL REPRESENTATIVE'S INTERACTION IS HOW FARM BUREAU'S
	GRASSROOTS PROCESS PROVIDES EVERY FARM BUREAU MEMBER AN OPPORTUNITY
	TO PARTICIPATE AND VOICE THEIR CONCERNS REGARDING ISSUES PERTINENT
	TO THE AGRICULTURAL INDUSTRY.
Pt VI, Line 2	RENEE MCCAULEY AND TOM NUGENT HAVE A FAMILY RELATIONSHIP
Pt VI, Line 6	CLASSES OF MEMBERS OR STOCKHOLDERS THE ORGANIZATION HAS
	APPROXIMATELY 198,840 MEMBERS WHO PAY ANNUAL MEMBERSHIP
	DUES
Pt VI, Line 7a	THE MEMBERS OF THE ORGANIZATION ARE REPRESENTED BY A DELEGATE BODY OF MEMBERS
	WHO ELECT THE BOARD OF DIRECTORS OF THE ORGANIZATION
Pt VI, Line 7b	CHANGES IN THE ORGANIZATIONS BYLAWS MUST BE APPROVED BY THE DELEGATE BODY. IN
	ADDITION, THE DELEGATE BODY ANNUALLY RATIFIES ALL BOARD ACTIONS AND AUTHORIZES THE
	PRESIDENT OF THE BOARD TO APPOINT ALL NECESSARY COMMITTEES AND COMMITTEE CHAIRS.
Pt VI, Line 11b	THE BOARD OF DIRECTORS (BOARD) OF MICHIGAN FARM BUREAU IS THE GOVERNING BODY
	WHICH IS RESPONSIBLE FOR THE ANNUAL REVIEW OF THE FORM 990 RETURN. PRIOR TO THE
	FORMS FILING, THE AUDIT COMMITTEE OF THE BOARD, CONSISTING OF 7 OF THE 17 BOARD
	MEMBERS REVIEWS THE ANNUAL AUDITED FINANCIAL STATEMENTS TO BE USED AS BASIS OF
	PREPARATION FOR THE FORM 990 RETURN. THE FINAL PREPARATION AND REVIEW OF THE 990
	ARE PERFORMED BY THE DIRECTOR OF FINANCIAL SERVICES, THE PUBLIC ACCOUNTING FIRM
	AND THE SECRETARY AND GENERAL COUNSEL. THE AUDIT COMMITTEE WILL REVIEW THE
	COMPLETED RETURN PRIOR TO FILING AND COPIES ARE MADE AVAILABLE TO THE REMAINDER
	OF THE BOARD FOR THEIR REVIEW PRIOR TO FILING.
Pt VI, Line 12c	THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY AND A MOTION OF
	ACKNOWLEDGMENT IS MADE BY THE BOARD OF DIRECTORS (BOARD). AT THIS SAME TIME ALL

Name of the organization	Employer identification number
MICHIGAN FARM BUREAU	38-1718391

OFFICERS, BOARD MEMBERS, KEY EMPLOYEES, AND DIVISION DIRECTORS MUST ANNUALLY PROVIDE A SIGNED STATEMENT LISTING ALL POTENTIAL CONFLICTS OF INTEREST WHILE ACTING IN THEIR RESPECTIVE POSITIONS.

Pt VI, Line 15a MICHIGAN FARM BUREAU (MFB} USES A SALARY ADMINISTRATION PROGRAM DEVELOPED AND MAINTAINED BY AN OUTSIDE CONSULTANT, HEWITT ASSOCIATES. ALL POSITIONS ARE EVALUATED THROUGH THE POSITION EVALUATION PLAN; COMPETITIVE SALARY INFORMATION IS OBTAINED THROUGH SALARY SURVEYS AND PLACED INTO INDIVIDUAL SALARY RANGES. MERIT INCREASES ARE BASED ON: 1} AN EMPLOYEE'S PERFORMANCE; 2} MERIT INCREASE GUIDELINES, AND 3)THEIR CURRENT POSITION RELATIVE TO THE SALARY RANGE. MFB'S TOP MANAGEMENT EMPLOYEES ARE EVALUATED BY A FIVE PERSON EXECUTIVE COMMITTEE OF THE BOARD. THE PERFORMANCE REVIEW ALONG WITH ANY SALARY ADJUSTMENTS IS THEN REVIEWED WITH THE FULL 17 MEMBER BOARD OF DIRECTORS.

Pt VI, Line 15b MICHIGAN FARM BUREAU (MFB} USES A SALARY ADMINISTRATION PROGRAM DEVELOPED AND MAINTAINED BY AN OUTSIDE CONSULTANT, HEWITT ASSOCIATES. ALL POSITIONS ARE EVALUATED THROUGH THE POSITION EVALUATION PLAN; COMPETITIVE SALARY INFORMATION IS OBTAINED THROUGH SALARY SURVEYS AND PLACED INTO INDIVIDUAL SALARY RANGES. MERIT INCREASES ARE BASED ON: 1} AN EMPLOYEE'S PERFORMANCE; 2} MERIT INCREASE GUIDELINES, AND 3)THEIR CURRENT POSITION RELATIVE TO THE SALARY RANGE. MFB'S TOP MANAGEMENT EMPLOYEES ARE EVALUATED BY A FIVE PERSON EXECUTIVE COMMITTEE OF THE BOARD. THE PERFORMANCE REVIEW ALONG WITH ANY SALARY ADJUSTMENTS IS THEN REVIEWED WITH THE FULL 17 MEMBER BOARD OF DIRECTORS.

Pt VI, Line 19 NO GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990. ► See separate instructions.
► Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization: MICHIGAN FARM BUREAU

Employer identification number: 38-1718391

Part I Identification of Disregarded Entities Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity? Yes	No
(1) MICHIGAN FARMLAND AND COMMUNITY ALLIANCE 7373 W SAGINAW HWY LANSING, MI 48917 38-3434632	VIABILITY OF AG	MI	501 (C) 3	LINE 7	MFB	X	
(2) MICHIGAN FARM BUREAU POLITICAL ACTION COMMITTEE 7373 W SAGINAW HWY LANSING, MI 48917 38-2548952	LEGISLATIVE	MI	527		MFB	X	
(3) FARM BUREAU PAC (AKA SUPER PAC) 7373 W SAGINAW HWY LANSING , MI 48917 46-1116105	LEGISLATIVE	MI	527		MFB	X	
(4) MICHIGAN FOUNDATION FOR AGRICULTURE 7373 W SAGINAW HWY LANSING, MI 48917 27-0200380	MEMBERSHIP ASSOCIATION	MI	501 (C) 3	11A TYPE 1	MFB	X	

Part III **Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)												
(2)												
(3)												

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity? Yes	(i) No
(1) MICHIGAN AGRICULTURAL COOPERATIVE MARKETING ASSOCIATION 38-1659786 7373 W SAGINAW HWY LANSING, MI 48917	FRUIT & VEG MARTEING AND BARGAINING	MI	MFB	C	-42,513.	329,665.	55.21	X	
(2) FARM BUREAU LIFE INSURANCE COMPANY OF MICHIGAN 38-6056370 7373 W SAGINAW HWY LANSING , MI 48917	LIFE INSURANCE	MI	N/A	C				X	
(3) See Cont. Sheet for Sch. R, Part IV									

Part IV **Continuation of Identification of Related Organizations Taxable as a Corporation or Trust**

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership	(I) Section 512 (b)(13) controlled entity? Yes	No
COMMUNITY SERVICE ACCEPTANCE CORPORATION 38-1883116 7373 W SAGINAW HWY LANSING , MI 49817	INSURANCE AGENCY	MI	N/A	C				X	
FARM BUREAU GENERAL INSURANCE COMPANY OF MICHIGAN 38-6056228 7373 W SAGINAW HWY LANSING , MI 48917	PROPERTY CASUALTY INSURANCE	MI	N/A	C				X	
MICHIGAN FARM BUREAU FINANCIAL CORP 38-2961817 7373 W SAGINAW HWY LANSING , MI 48917	INSURANCE HOLDING COMPANY	MI	MFB	C	79,059,520.	585,649,266.	100.00	X	
FB EQUITY SALES CORPORATION OF MICHIGAN 38-3237412 7373 W SAGINAW HWY LANSING , MI 48917	INSURANCE BROKERAGE COMPANY	MI	N/A	C				X	
MFB, INC. 38-2102277 7373 W SAGINAW HWY LANSING , MI 48917	MEMBERSHIP BENEFITS AND PROMOTES AFFILIATES	MI	MFB	C	2,759,740.	5,827,568.	100.00	X	
FBL REAL ESTATE HOLDINGS, LLC 27-5177082 7373 W SAGINAW HWY LANSING , MI 48917	REAL ESTATE	MI	N/A	C				X	

Part V **Transactions With Related Organizations** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

		Line	Yes	No
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b		X
c	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s)	1d	X	
e	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f	X	
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	X	
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o	Sharing of paid employees with related organization(s)	1o		X
p	Reimbursement paid to related organization(s) for expenses	1p	X	
q	Reimbursement paid by related organization(s) for expenses	1q	X	
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) MICHIGAN FARM BUREAU FINANCIAL CORPORATION	F	1,500,000.	COST
(2) FARM BUREAU LIFE INSURANCE COMPANY OF MICHIGAN	K	567,946.	COST ALLOCATED BY USAGE
(3) MICHIGAN FARM BUREAU, INC.	L	1,104,167.	COST ALLOCATED BY USAGE
(4) FARM BUREAU LIFE INSURANCE COMPANY OF MICHIGAN	P	167,420.	COST ALLOCATED BY USAGE
(5) MICHIGAN FARM BUREAU INC.	P	208,214.	COST ALLOCATED BY USAGE
(6) See Continuation Sheet for Schedule R, Part V			

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(A) Name of related organization	(B) Transaction type (a-s)	(C) Amount involved	(D) Method of determining amount involved
FARM BUREAU LIFE INSURANCE COMPANY OF MICHIGAN	Q	944,470.	COST ALLOCATED BY USAGE
MICHIGAN FARM BUREAU, INC.	Q	395,456.	COST ALLOCATED BY USAGE
MICHIGAN AGRICULTRAL COOPERATIVE MARKETING ASSOCIATION	Q	144,543.	MANAGEMENT AGREEMENT AND COST
MICHIGAN FOUNDATION FOR AGRICULTURE	C	773,000.	QUALIFYING PROGRAM ACTIVITY COSTS
FARM BUREAU LIFE INSURANCE COMPANY OF MICHIGAN	C	80,000.	PROGRAM ACTIVITY COSTS

Part VI **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

Supporting Statement of:

Sch D, page 4/Part XI, Line 4b

Description	Amount
Taxable Revenue	358,703.
Gain on Sale of Vehicle/Capital Asset	123,031.
County Member Growth - Net with Membership	-65,690.
AFBF DUES - NET WITH MEMBERSHIP	801,304.
COST REIMBURSEMENT - NET WITH EXP	-251,454.
Total	965,894.

Supporting Statement of:

Sch D, page 4/Part XII, Line 4b

Description	Amount
TAXABLE REVENUE	358,703.
GAIN ON SALE OF VEHICLE/CAPITAL ASSET	123,031.
COUNTY MEMBERSHIP GROWTH - NET WITH MEMBERSHIP	-65,690.
Rounding on Audited Financials	3.
AFBF DUES	801,304.
COST REIMBURSEMENT NET WITH EXPE	-251,454.
Total	965,897.

Form 990

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

OMB No 1545-0047

2013

Name of the Organization: MICHIGAN FARM BUREAU

Employer Identification number: 38-1718391

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
26 Thomas L. Nugent Director of Field Operations	23.17 16.83					X		144,434.	0.	17,993.
27 Sarah Black Director of Public Policy	38.03 1.97					X		129,733.	0.	19,368.
28 Brian Preston Former Director	0.00						X	1,495.	0.	0.
29 Brent Hotchkin Former Director	0.00						X	1,840.	0.	0.
30 John VanderMolen Former Officer	0.00						X	2,486.	0.	0.