See a Social Security Number? Say Something!
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Or call the IRS Identity Theft Hotline at 1-800-908-4490

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
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-EZ and its instructions is at *www.irs.gov/form990.*

OMB No 1545-1150

2013

Open to Public Inspection

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

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

C Name of organization
Anne Arundel County Farm Bureau, Inc.

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
5643 Greenock Road

City or town | State | ZIP code
Lothian | MD | 20711-9765

Foreign country name | Foreign province/state/county | Foreign postal code

D Employer identification number
52-1282045

E Telephone number
(410) 741-9212

F Group Exemption Number ► n/a

G Accounting Method ☒ Cash ☐ Accrual Other (specify) ►

I Website: ► www mdfarmburea.com

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

J Tax-exempt status (check only one) — ☐ 501(c)(3) ☒ 501(c) (5) ◄ (insert no) ☐ 4947(a)(1) or ☐ 527

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

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, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ ► $ 81,520

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 ☐

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Revenue	1	Contributions, gifts, grants, and similar amounts received		1	1,106
	2	Program service revenue including government fees and contracts		2	3,990
	3	Membership dues and assessments		3	72,448
	4	Investment income		4	1,706
	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	0
	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	2,270	
	c	Less direct expenses from gaming and fundraising events	6c	2,804	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	-534
	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	0
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		► 9	78,716
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	14,250
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	15,895
	13	Professional fees and other payments to independent contractors		13	575
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe in Schedule O)		16	27,731
	17	**Total expenses.** Add lines 10 through 16		► 17	58,451
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	20,265
	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)		19	407,920
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20		► 21	428,185

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For Paperwork Reduction Act Notice, see the separate instructions. Form **990-EZ** (2013)

HTA

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Part II Balance Sheets. (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II . . . ☒

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		22	
23	Land and buildings		23	
24	Other assets (describe in Schedule O)		24	
25	**Total assets**	408,403	25	428,748
26	**Total liabilities** (describe in Schedule O)	483	26	563
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	407,920	27	428,185

Part III Statement of Program Service Accomplishments (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III . ☐

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

What is the organization's primary exempt purpose? To promote farming interest

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28	The economic, social, and educational interest of farmers were protected, promoted, and/or represented through meetings, conventions, and a varity of other activities to better the farmer's position, and educate the public.		
	(Grants $) If this amount includes foreign grants, check here . ▶ ☐	28a	
29			
	(Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	
30			
	(Grants $) If this amount includes foreign grants, check here . . ▶ ☐	30a	
31	Other program services (describe in Schedule O)		
	(Grants $) If this amount includes foreign grants, check here . ▶ ☐	31a	
32	**Total program service expenses.** (add lines 28a through 31a) . . . . ▶	32	0

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated – see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV . . . X

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			

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
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		X
34	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)	34		X
35 a	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)?	35a		X
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	35b		
c	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	35c		X
36	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	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38 a	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?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations Enter			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► , section 4955 ►			
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	40b		
c	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 ►			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ►			
e	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	40e		X

41 List the states with which a copy of this return is filed ► MD

42 a The organization's books are in care of ► Christine M Griffith Telephone no. ► (410)741-9212

Located at ► 5643 Grenock Rd City Lothian ST MD ZIP + 4 ► 20711-9765

			Yes	No
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 ► See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**	42b		X
c	At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country ►	42c		X

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 ► 43

			Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		X
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	44b		X
c	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	44d		X
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
45 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)	45b		X

			Yes	No
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	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 ☐

			Yes	No
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	47		
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		
49 a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		
b	If "Yes," was the related organization a section 527 organization?	49b		

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	(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
Name None Title	Hr/WK .00			
Name Title	Hr/WK 00			
Name Title	Hr/WK .00			
Name Title	Hr/WK 00			
Name Title	Hr/WK 00			

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 business address of each independent contractor	(b) Type of service	(c) Compensation
Name None Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		

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

Christine M Griffith — Signature of officer — Date 4-22-14

Christine M Griffith, Secretary-Treasurer — Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Robert B Carico, CPA	Robert B. Carico, CPA	4/19/14		P01068208

Firm's name ▶ Robert B Carico, Inc. — Firm's EIN ▶ 52-1379982

Firm's address ▶ 1583 Underwood Rd., Gambrills, MD 21054 — Phone no 410-721-299

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.**

▶ **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

Anne Arunel County Farm Bureau, Inc.

Employer identification number

52-1282045

Grants and Allocations – Page 1, Line 10

Grantees' Activity	Grantee's Name & Address	Relationship to Grantor	Amount of Grant
Promoting agricultural activities and education	Anne Arundel Economic Development Corp 2660 Riva Road, Suite 200 Annapolis, MD 21401	None	$ 1,500
	Maryland FFA Foundation P.O. Box 3241 Silver Spring, MD 20918	None	150
Education Scholarships And Grants	Shelby Lawson 112 Beverley Ave Edgewater, MD 21037	None	1,500
	Jessica Hardy 19 Hardwood Drive Hardwood, MD 20776	None	500
	Joseph Degreenia 317 Pertch Rd. Severna Park, MD 21146	None	1,500
	Victoria Willis 1727 Grandview Rd. Pasadena, MD 21122	None	3,000
	Alyssa Degreenia 317 Pertch Rd. Severna Park, MD 21146	None	1,500
	Courtney Metcalf 6009 Shady Side Rd. Shady Side, MD 20764	None	1,500
	Raymond Duvall 5802 Brooks Wood Rd. Lothian, MD 20711	None	1,000
	Sothern High School FAA Alumni-Horse Judging Team 4400 Solomons Island Road Harwood, MD 20776	None	2,000
	University of Maryland Soil Judging Team Rm 1109 H.J. Patterson Hall College Park, MD 20742	None	100
	Total Grants & Allocations		$14,250

Name of the organization: Anne Arundel County Farm Bureau, Inc.
Employer identification number: 52-1282045

Other Expenses, Page 1, Ln 16:

Conferences, Conventions, and Meetings	$20,163
Insurance	3,773
Misc. Donations	652
Telephone	72
Agi Education	305
Office Supplies and Expense	2,610
State Farm Bureau Dues – Honorary Members	156
Total Other Expenses	$27,731

Total Liabilities, Part II, Page 2, Line 16:	Beg of Year	End of Year
Payroll Taxes held in Reserve for Payment of Quarterly Taxes	$483	$563

List of Current Officers, Directors, Trustees, and Key Employees - Part IV, Page 2:

Name and Address	Title and Average Hours per Week Devoted To Position	Compensation	Contributions To Employee Benefit Plans & Deferred Compensation	Expense Account and Other Allowances
Officers:				
Jeffrey W. Griffith 5643 Greenock Road Lothian, MD. 20711	President 8 hours	None	None	$700.00
Milly B. Welsh 3355 Davidsonville Rd. Davidsonville, MD 21035	Vice President 3 hours	None	None	$500.00
Christine M. Griffith 5643 Greenock Road Lothian, MD. 20711	Secretary/Treasurer 25 Hours	$1,060/mo.	None	$1,400.00
Board of Directors.				
C. Jean Carico 1583 Underwood Road Gambrills, MD. 21054	Membership Comm. 2 hours	None	None	None
John Faber 1197 Gwynne Ave. Churchton, MD. 20733	Livestock/Poultry Chair 2 hours	None	None	$100.00
Earl Griffith 5571 Greenock Road Lothian, MD. 20711	Membership Chair 4 hours	None	None	$200.00

Name of the organization: Anne Arundel County Farm Bureau, Inc.

Employer identification number: 52-1282045

List of Current Officers, Directors, Trustees, and Key Employees - Part IV, Page 2 (Continued):

Name and Address	Title and Average Hours per Week Devoted To Position	Compensation	Contributions To Employee Benefit Plans & Deferred Compensation	Expense Account and Other Allowances
Board of Directors (Continued):				
Ross E Moreland 818 Holly Landing Rd. West River, MD 20778	Scholarship Comm. 6 hours	None	None	None
Steuart Pittman, Jr. 440 Dodon Road Davidsonville, MD 21035	Equine Chair 3 hours	None	None	None
Frank Tremel 4735 Sudley Road West River, MD 20778	Livestock/Poultry 3 hours	None	None	$200.00
Herbert P. Wayson 1555 Governor Bridge Road Davidsonville, MD. 21035	Member Benefits Chair. 2 hours	None	None	None
Martin Zehner 3O11 Patuxent River Road Davidsonville, MD. 21O35	Farmers Market Chair 3 hours	None	None	None
Directors At Large:				
Lisa Barge 677 Loch Haven Rd. Edgewater, MD. 21037	Education Comm. 5 hours	None	None	None
Florence Carr 3365 Riva Road Davidsonville, MD. 21035	Education Chair. 3 hours	None	None	None
Brittany Faber 1197 Gwynne Ave. Churchton, MD. 20733	Young Farmers Chair. 2 hours	None	None	None
Lillian M. Griffith 5571 Greenock Rd. Lothian, MD. 20711	Scholarship Chair. 3 hours	None	None	$200.00
Oscar grimes 3527 Birdsville Road Davidsonville, MD 21035	Information Chair 2 hours	None	None	$200.00