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Return of Organization Exempt From Income Tax

Cat No 11282Y

OMB No 1545-0047

Department of the Treasury

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

Open to Public

Inter	nal Rever	iue Service	▶ Information about Form 990 and its instructions is at www.irs.go	v/form990		Inspection
A	For the	2013 cale	ndar year, or tax year beginning 9-1 , 2013, and ending	8-3	31	, 20 14
В	Check if	applicable	C Name of organization Tulsa County Farm Bureau		D Employe	r identification number
[]	Address	change	Doing Business As			73-0669786
	Name cl	hange	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telephon	e numb e r
[7]	Initial rel	lurn	10777 S Memorial Dr	ľ		918 369 9990
	Termina	1ed	City or town state or province country, and ZIP or foreign postal code			
LJ	Amende	d return	Tulsa, OK 74133	i•	Gross red	ceipts \$ 608,693 06
1	Applicat	ion pending		H(a) is this a gro	up return for s	ubordinates? Yes No
		, 5	,			included? Yes No
1	Tax exe	mpt status	[501(c)(3)	II 'No	," attach a	list (see instructions)
J	Website			H(c) Group e	xemption i	number ▶ 1480
K	Form of	organization	✓ Corporation Trust Association Other L Year of formation	1942	M State	of legal domicile OK
P	art I	Summ			·———	
	1			al Member	ship Ora	anization
9	1	,			!	
Governance				·		
Ę	2	Check th	s box ▶ ☐ If the organization discontinued its operations or disposed of n	nore than	25% of r	ts net assets
ò	3		of voting members of the governing body (Part VI, line 1a)		3	6
	4		of independent voting members of the governing body (Part VI, line 1b)		4	
98	5		nber of individuals employed in calendar year 2013 (Part V, line 2a)		5	-0-
<u>₹</u>	6		nber of volunteers (estimate if necessary)		6	<u>~</u>
Activities &	7a		elated business revenue from Part VIII, column (C), line 12		7a	309,510 90
	b		ated business taxable income from Form 990-T. line 34		7b	55,952 79
	-		and business taxable meaning ment of the object of the obj	Pnor Yea		Current Year
	8	Contribut	ions and grants (Part VIII, line 1h) .	66	,157 00	60,355 00
Revenue	9		service revenue (Part VIII, line 2g)		,,137 00	00,333 00
ě	10	_	nt income (Part VIII, column (A), lines 3, 4, and 7d)		,400 64	11,499 83
æ	11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,095 74	309,510 90
	12		nue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,653 38	381,365 73
	13		nd similar amounts paid (Part IX, column (A), lines 1-3)		.,055 56	301,303 73
	14		paid to or for members (Part IX, column (A), line 4)	36	5,975 95	33,487 95
	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)		,018 91	224,987 62
Expenses	16a		The state of the s		,016 31	224,381 02
)eu	b	Total fun	draising expenses (Part IX, column (Þ), Ime 25).			
Ä	17			126	i,719 18	121 447 02
	18	Total eve	penses (Part IX, column (A), lines 11 and d, 11f-24e) enses Add lines 13-17 (must equal Part IX) column (A) 2 lines 25)		7,714 04	131,447 02 389,922 59
	19		less expenses Subtract line 18 from line 12		1,939 34	
- 6	 	neveriue		enning of Cur		(8,556 86) End of Year
35	20	Total acc	ets (Part X, line 16)	<u> </u>	+	
2 H	21		lities (Part X, line 26)		2,153 92	2,910,058 38
Net Assets or Fund Balances	22		s or fund balances Subtract line 21 from line 20		3,663 23	2,105,124.55
	17.11		ure Block	013	3,490 69	804,933 83
		<u> </u>	ry, I declare that I have examined this return, including accompanying schedules and statemen	ate and to th	e best of m	ay knowledge, and bolief it is
			ete. Declaration of preparer (other than officer) is based on all information of which preparer ha			ly knowledge and ballet it is
			dole of the		12.90	2-14
Siç	าก	Sign	1 Way 1 Williams	Date	1227	(-17
He	-	1	Teles Vallas Trelasures	54.	•	
110		Type	or print name and title			
		_	preparer s name preparer s signature Date		,	PTIN
Pa			DIS II. I AND THE PORT OF THE	hilis	Check [_] 4 [
	epare		LIS ITOMANOS (1- NOW / HAMA)	14/14_	self-emp	
Us	e On				s EIN 🟲	73-0382001
14-	u tha II		oddress > 2501 N Stiles, OKC, OK 73105	Phor	e no	405 523 2300
	<u></u>		s this return with the preparer shown above? (see instructions)			✓ Yes No
For	Papan	work Redu	ction Act Notice, see the separate instructions. Cat No	11282Y		Form 990 (2013)

Part	-	•								
	Check if Schedule O conta Briefly describe the organization's		any line in this Part	<u> </u>						
1	,									
	Agricultural Membership Organizati	<u>οπ</u>								
			• · · · · · · · · · · · · · · · · · · ·							
2	Did the organization undertake an prior Form 990 or 990-EZ?	ny significant program servi	ces during the year v	which were not listed on th	Yes 🛮 No					
	If "Yes" describe these new servi-	C ics Citto								
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?									
	If "Yes," describe these changes of	on Schedule O			Yes No					
4	Describe the organization's progrexpenses. Section 501(c)(3) and 5 the total expenses, and revenue.	am service accomplishmen 501(c)(4) organizations are i	required to report the							
4a	(Code) (Expenses \$	including gra	ants of \$) (Revenue \$)					
					••					
			-	** **						
				*						
				······						
4b	(Code) (Expenses \$	including gra	ants of \$) (Revenue \$)					
				*						
				**** *						
				**	***					

4C	(Code) (Expenses \$	including gri	ants of \$) (Revenue \$)					
		······								
					·					
		~~~~~~~~~								
		***************************************								
4d	Other program services (Describe	ın Schedule O )								
		iding grants of \$	) (Revenue \$	)						
4e	Total program service expenses	<b>&gt;</b>								

art	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		
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes" complete Schedule C, Part II	4		<b>√</b>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	<b>✓</b>	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<b>√</b>
7 8	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  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7 -		<b>✓</b>
	complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8		✓
9	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10_		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	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		1
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		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>√</b>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>✓</b>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
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		1
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		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	11

Part	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	r	Yes	No 
21	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5 000 of grants 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		✓
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		<b>√</b>
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
С	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		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
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		<b>✓</b>
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a b	A current or former officer, director trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>∀</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV. and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a		1
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R. Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		1
37	related organization? If "Yes," complete Schedule R. Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		ļ .
J.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38		1

Form 99	0 (2013)			Page 5
<b>Part</b>	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
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  1a		ĺ	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			ļ
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<b>✓</b>	<b>-</b> -
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes" enter the name of the foreign country	40		·
J	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		
	and services provided to the payor?	7a		ļ
b c	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
C	required to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		
9 h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del> </del>
8	If the organization received a contribution of cars boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h		
Ü	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organizations, but 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.			-
а	Did the organization make any taxable distributions under section 4966?	9a		]
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
11	Section 501(c)(12) organizations. Enter	1		
a b	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources	-		
U	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>	<u> </u>	ļ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<del> </del>
L	Note. See the instructions for additional information the organization must report on Schedule O			1
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans .   13b			
С	the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13b  13c	-		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<del> </del> -	<del> </del>
, 70	2.3 the digamental received any payments for mader talking services during the tax year	. 70	1	

b If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Part				
•	response to line 8a, 8b. or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI.	iee ins	struct	ons
Secti	on A. Governing Body and Management			- <del></del>
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6		Yes	No
10	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 6			
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		<b>/</b>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	_	1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<b>✓</b>
6 7a	Did the organization have members or stockholders?  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?	6 7a	<b>√</b>	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	✓	
ь 9	Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at	8b	✓	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode )	L
		r	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?  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?	10a		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No." go to line 13	12a		✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done .	12c	l 	
13	Did the organization have a written whistleblower policy?	13		✓
14 15	Did the organization have a written document retention and destruction policy?  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?	14		✓
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization .	15b		1
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	16a		<b>√</b>
Sacti	organization's exempt status with respect to such arrangements?  on C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed   Oklahoma			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.  Own website Another's website Upon request Other (explain in Schedule O)	n 501(	c)(3)s	only)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year	erest	policy	, and
20	State the name, physical address, and telephone number of the person who possesses the books and records organization ► Oklahoma Farm Burgau, 2501 N. Sules, OKC, OK, 73105	of the	;	

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
•	ndependent 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

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

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

Name and Title  Average hours per week (list any hours for related organizations of the decided organizations)  Average hours per week (list any hours for related organizations of the decided organization (do not check more than one book, unless person is both an officer and a director/trustee) compensation from related organization (w-2/1099-MISC) organization	F)
Name and Title  Average hours per week (list any hours for related organizations, below dotted line)  (1) Schedule Attached  (3)  Name and Title  Average hours per week (list any hours for related organizations, below dotted line)  (3)  (do not check more than one box, unless person is both an officer and a director/trustee)  (A)  (A)  (A)  (A)  (A)  (A)  (A)	F)
Name and Title  Average hours per week (list any hours for related organizations below dotted line)  Average hours per week (list any hours for related organizations below dotted line)  Average hours per week (list any hours for related organizations below dotted line)  Average hours per week (list any hours for related organizations below dotted line)  Average hours per week (list any hours for related organizations below dotted line)  Average hours per week (list any hours for related organizations the organization (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)  Average hours per week (list any hours for related organizations (W-2/1099-MISC)	
hours per week (list any hours for related organizations below dotted line)  (1) Schedule Attached  hours per week (list any hours for related organizations below dotted line)  hours for related of the companization from the organization (W-2/1099-MISC)  (2) Compensation from related organization (W-2/1099-MISC)  (3) Compensation from related organization (W-2/1099-MISC)  (4) Schedule Attached	
week (list any hours for related organizations below dotted line)    Total content of the organizations below dotted line)   Total content of the organizations organizations below dotted line)   Total content of the organization (W-2/1099-MISC)   Total content of the organizati	
hours for related organizations below dotted line)    Total control of the control of the organizations below dotted line)   Total control of the organizations below dotted line)   Total control of the organization (W-2/1099-MISC)   Total control of the organization (W-2/1099-M	her
(1) Schedule Attached  (2)	
(1) Schedule Attached  (2)	n the
(1) Schedule Attached (2) (3)	nzation
(1) Schedule Attached (2) (3)	elated
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(1) Schedule Attached (2) (3)	
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(12)	
(12)	
(13)	
(14)	

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	/ees		-	lighe	st C	ompensated E	mployees (conti	nued)			
•	40	(8)	<u> </u>			C) rtion			(D)	! ! (E)		(F	1	
	(A) Name and title	(B) Average					than o		(D) Reportable	(E) Reportable		Estima		
		hours per					or/trus		compensation	compensation from	ı	amou		
		week (list any hours for	6 9	Sul	<b>♀</b>	Σ ey	e m GH	Fo	trom the	related organizations		oth ompen		
		related organizations	Jr. od	tituti	Officer	em	ploy	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from organiz		
		below dotted	o a	onal		employee	8 8		(**-271099-141130)			and re		
		linei	Individual trustee or director	Institutional trustee		ee	Highest compensated employee				(	organiz	ations	
			•	8			sated		Ì					
(15)							<u> </u>	<u> </u>			-			
1,5/	·		İ											
(16)												•		
			<u> </u>											
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								<u> </u>			ļ			_
(18)														
(40)			-	_	<u> </u>	-					-			
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<del></del>			ļ		_			-			-			
(23)		<u> </u>	1											
(24)							ļ	-	<u> </u>		+			-
124)		†	1								1			
(25)						-		<b> </b>	-					-
d					_									
1b	Sub-total							<b>&gt;</b>			<u> </u>			
С	Total from continuation sheets to Part	VII, Section	n A					<b>•</b>						
d	Total (add lines 1b and 1c)							<u> </u>	<u> </u>					_
2	Total number of individuals (including bu reportable compensation from the organ		to tr	nose	e lisi	ted	abov	e) w	ho received m	ore than \$100,0	100 01			
	reportable compensation from the organ	ization P											res No	~
3	Did the organization list any former of	ficer, direc	tor, o	or tr	ust	ee,	key (	emp	oloyee, or high	nest compensat	ted [		100 110	_
	employee on line 1a? If "Yes," complete											3	1	
4	For any individual listed on line 1a, is the													
	organization and related organizations	greater th	an \$	150.	,000	)? [	f "Ye	es, "	complete Sch	nedule J for su	ıch			
	individual										.  -	4	<b>√</b>	
5	Did any person listed on line 1a receive of for services rendered to the organization									zation of individ	uai	_		
Cack	on B. Independent Contractors	11 163, (	p			1001	are U	.01	Julii persuri			5		_
Secure 1	Complete this table for your five highest	compensal	ed in	den	end	ent	cont	ract	ors that receive	ed more than \$1	100.00	Ω of		_
•	compensation from the organization Re												n's tax	
	year	,							,		J			
	(A)							T	(B)			(C)		
	Name and business add	iress							Description of s	services	Соп	препѕа	tion	
								Ļ.						
								$\perp$						
								+						
					—.			╁						_
	Total number of independent contractor	ors (includi	no h	ut r	not	lımı	ted t	0 1	hose listed ah	ove) who	<del></del>		<del></del>	_
~	received more than \$100,000 of compen							<b>υ</b> ιΙ	iistod ab					
				J									990 120	_

Part	VIII	Statement of Revenue					·
		Check if Schedule O contain	s a response or note to	any line in this l	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
S m	12				function revenue	ravenuc	under sections 512-514
ant	1a	Federated campaigns	1a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b 60,355 00			1	
Ar	C .	Fundraising events	1c			İ	
E E	đ	Related organizations	1d	į			
ns,	е	Government grants (contributions					
er S	1	All other contributions, gifts, grants	<b>‡</b>			1	
현		and similar amounts not included abor	<u> </u>				
E D	g	Noncash contributions included in lines	1a-1f \$	į			
	h	Total. Add lines 1a-1f	<b>&gt;</b>	60,355 00			
ne			Business Code				
Program Service Revenue	2a						
	Ь						
20	С						
ģ	d						
Ē	е						
g	f	All other program service reve	nue				
å.	g	Total. Add lines 2a-2f	<b>&gt;</b>				
	3	Investment income (including	g dividends interest,				
		and other similar amounts)	•	11,499 83		}	11,499 83
	4	Income from investment of tax-ex	cempt bond proceeds ▶				
	5	Royalties	<b>▶</b>				
		(i) R	eai (ii) Personal				
	6a	Gross rents 320	5,895 96			ľ	
	ь		7,327 33				
	С		9,568 63				
	d	Net rental income or (loss)	<b>&gt;</b>	99,568 63		99,568 63	
	7a	Gross amount from sales of (i) Sec	unities (ii) Other				
		assets other than inventory					
	ь	Less cost or other basis					
		and sales expenses					
	С	Gain or (loss)	·		ļ		
	d	Net gain or (loss)					
	"	iver gain or (1033)					
enne	8a	Gross income from fundraisin events (not including \$	g				
Other Reve		of contributions reported on line See Part IV, line 18	1c) a		1		
ž.	ь	Less direct expenses	b				
O	ł	Net income or (loss) from fund	draising events				
		Gross income from garning ac					
		See Part IV, line 19	а				
	ь	Less direct expenses	b				
	С	Net income or (loss) from gan	·- \	<u> </u>			
	_	Gross sales of inventory,	<u> </u>	-			· · · · · · · · · · · · · · · · · · ·
		returns and allowances	a				
	ь	Less cost of goods sold	b			}	
		Net income or (loss) from sale	- I				
	_ c	Miscellaneous Revenue	Business Code				
	110			7 5 4 5 5 5	1	3 5 4 5 5 5	
	Ι.	Office Commissions	524113	7,549 62		7,549 62	<del></del>
	b	Office Commissions	524126	178,673 37		178,673 37	
	C	Salary Reimbursement	524126	23,719 28	<del></del>	23,719 28	
	d	All other revenue	l				
	12	Total. Add lines 11a–11d  Total revenue. See instruction	ne .	209,942.27	60 355 00	309 510 90	
		TOTAL LEFEITUE, OCC HAULIU	110	. (20.1.165.77)	KAT KEE MAL	สาน ราก อกเ	11 400 93

Part IX	Statement of Func	tional Expenses			

Section	n 501(c)(3) and 501(c)(4) organizations must com			ns must complete coi	umri (A)
	Check if Schedule O contains a respons			J J-	(D)
Do no: 8b, 9b	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII	(A) Total expenses	(B) Program service expanses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	33,487 95			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	208,335 01			
9	Other employee benefits				
10	Payroll taxes	16,652 61			
11	Fees for services (non-employees)				
a b	Management Legal				
c	Accounting	480 00			<del></del>
d	Lobbying				
e	Professional fundraising services See Part IV line 17				
f g	Investment management fees Other (If line 11g amount exceeds 10% of line 25 column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	5,541 99			
13 14	Office expenses Information technology	11,850 00	<del>.</del>		
15	Royalties		······································		
16	Occupancy	32,285 85			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	14,807 13			
21	Payments to affiliates	10.071.74			
22 23	Depreciation depletion, and amortization Insurance	18,971 74 14,349 22			
23	Other expenses Itemize expenses not covered	14,545 22			
~ 7	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Federal Income Taxes	13,100 55			<del></del>
b	State Income Taxes	4,344 00			
c	Postage	812 55			
d e	All other expenses Misc	14,784 00 119 99		<del> </del>	
25	Total functional expenses. Add lines 1 through 24e	389,922 59			
26	Joint costs. Complete this line only if the	303,322 33	<del></del>		
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here Inf				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 1 Cash - non-interest-bearing 119,331 78 1 87,255 05 2 Savings and temporary cash investments 2 349,681 78 361,172 35 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 4 1,741 88 2,659 18 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 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 4ssets 7 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 12,128 14 13,200 00 10a Land, buildings and equipment cost or other basis. Complete Part VI of Schedule D. 10a 3,488,196.96 10b Less: accumulated depreciation b 1,042,425 16 2,529,270 34 10c 2,445,771 80 investments - publicly traded securities 11 11 12 Investments - other securities See Part IV, line 11 12 13 Investments-program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 3,012,153 92 2,910,058 38 17 Accounts payable and accrued expenses 17 1,830 00 12,732 34 18 18 Grants payable 19 Deferred revenue 19 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, Liabilities 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 Unsecured notes and loans payable to unrelated third parties 24 2,196,833 23 24 2,092,392 21 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 26 26 2,198,663 23 2,105,124 55 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 28 Temporarily restricted net assets 28 Fund 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34. Net Assets or 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 32 813,490 69 804,933.83 33 Total net assets or fund balances 33 813,490 69 804,933 83 34 Total liabilities and net assets/fund balances 34 3,012,153.92 2,910,058 38

		Pa	ge <b>12</b>			
_						
		381,3				
			22 59			
_			<u>56 86</u> )			
_		813,4	90 69			
•						
_						
		804,9	33 83			
			[]			
		Yes	No			
	2a		<b>✓</b>			
	2b		✓			

Par	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		;	381,3	65 73
2	Total expenses (must equal Part IX, column (A) line 25)	2			389,9	22 59
3	Revenue less expenses Subtract line 2 from line 1	3		(8,556 86		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	313,4	90 69
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		8	304,9	33 83
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			1		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olaın	in			
	Schedule O			Į		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		28	3		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	olled	or			
	reviewed on a separate basis, consolidated basis, or both				- (	ı
	[ ] Separate basis					
ь	Were the organization's financial statements audited by an independent accountant?		21	2		✓
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audite	d on	а			
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis			1		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	_	_		1	
	of the audit, review, or compilation of its financial statements and selection of an independent accounts.			۱ :		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	ın	ĺ		
_	Schedule O			ļ		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	1			
	the Single Audit Act and OMB Circular A-133?		34	3		<u> </u>
b	If "Yes" did the organization undergo the required audit or audits? If the organization did not undergo any undergo and departs on these telephones and a second and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organization and the organiza		ŗ			1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	JOILS	31		لي	
			F	om	990	(2013)

Form 990 (2013)

### **SCHEDULE C** (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

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

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. See separate instructions. Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

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

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

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

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

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

• S	ection 501(c)(4) (5), or (6) orga	inizations Complete Part III			
Name	of organization			Employer ide	entification number
Tulsa	County Farm Bureau				73-0669786
Part	I-A Complete if the	e organization is exempt un	der section 501(	c) or is a section 527	organization.
1	Provide a description of t	the organization's direct and indi	ect political campa	ign activities in Part IV	
2	Political expenditures			•	\$
3	Volunteer hours				
Part		e organization is exempt un			
1		excise tax incurred by the organi			\$
2		excise tax incurred by organization			\$
3	If the organization incurre	ed a section 4955 tax, did it file F	orm 4720 for this ye	ear?	∐ Yes ☐ No
4a	Was a correction made?				. Yes No
ь	If "Yes " describe in Part		1		4/-1/0)
		e organization is exempt un- ly expended by the filing organ			1(C)(3).
1	activities	ly expended by the filing organ	ization for section	•	\$
2		filing organization's funds contr	buted to other ora		Ψ
_	527 exempt function acti		buted to other org		\$
3	•	expenditures Add lines 1 and	2 Enter here and		<u> </u>
•	line 17b	sapononaros y los limbs i dila	2 2 1 1 2 1 1 2 2 2 1 2		\$
4		n file Form 1120-POL for this yea	r?		Yes No
5	Enter the names, address organization made paymente amount of political co	ses and employer identification nents. For each organization listed ontributions received that were profund or a political action commit	umber (EIN) of all s , enter the amount omptly and directly	paid from the filing orga delivered to a separate	nization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none enter -0-
(1)					
(2)					
(3)					
(4)					
(5)			-		
(6)				1	

_	•
Page	4

Pa	Complete if the organization section 501(h)).	is exempt u	nder section 50	11(c)(3) and file	d Form 5768 (elec	ction under
<b>A</b> (	Check ► ☐ if the filing organization beloname, address, EIN, expens					up member's
В	Check ► ☐ if the filing organization chec				•	
	Limits on Lobby (The term "expenditures" mea				(a) Filing organization's totals	(b) Affiliated group totals
1á	Total lobbying expenditures to influence p	ublic opinion	(grass roots lobby	ing)		
t						
(	Total lobbying expenditures (add lines 1a	and 1b)				
(	d Other exempt purpose expenditures					
•	<ul> <li>Total exempt purpose expenditures (add l</li> </ul>	ines 1c and 1	d)			
1	Lobbying nontaxable amount Enter th columns	e amount fr	om the following	table in both		
	If the amount on line 1e, column (a) or (b) is	The lobbying	nontaxable amount	is:		
	Not over \$500 000	20% of the am	ount on line 1e			
	Over \$500 000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000		
	Over \$1,000,000 but not over \$1 500,000	\$175,000 plus	10% of the excess of	over \$1,000,000		
	Over \$1 500,000 but not over \$17,000 000	\$225,000 plus	5% of the excess or	/er \$1,500,000		
	Over \$17,000,000	\$1,000,000				
Ç		•				
Ì	<u> </u>					
1	Subtract line 1f from line 1c. If zero or less	•	the or line to did	the executation	5lo Form 4700	
. <u></u> .	If there is an amount other than zero or reporting section 4911 tax for this year?	on enner line	in or line ii, did	the organization	i ille Form 4/20	Yes No
	4-Yea (Some organizations that mad columns below. S	e a section 5		not have to com		
	Lobbying I	Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	( <b>c</b> ) 2012	(d) 2013	(e) Total
2:	Lobbying nontaxable amount					
	Lobbying ceiling amount (150% of line 2a, column (e))					
	: Total lobbying expenditures					
(	d Grassroots nontaxable amount					
	Grassroots ceiling amount (150% of line 2d, column (e))					
1	Grassroots lobbying expenditures	· <u> </u>				

description of 1 During legisla	Yes," response to lines 1a through 1i below, provide in Part IV a detailed  -	(a	3)		(b)	
legisla referer	of the lobbying activity	Yes	No		lmoun	t
a Volunt	g the year, did the filing organization attempt to influence foreign, national, state or local ition, including any attempt to influence public opinion on a legislative matter or indum, through the use of					
	reers?					
<b>b</b> Paid s	taff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media	advertisements?					
<b>d</b> Mailing	gs to members, legislators, or the public?					
	ations, or published or broadcast statements?					
	s to other organizations for lobbying purposes?					
_	contact with legislators, their staffs, government officials, or a legislative body?			<u></u>		
	s, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	activities?					
-	Add lines 1c through 1i					
	e activities in line 1 cause the organization to be not described in section 501(c)(3)?			1		
	s," enter the amount of any tax incurred under section 4912					
d If the f	s," enter the amount of any tax incurred by organization managers under section 4912 filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), (	or se	ction		
					Yes	N
	substantially all (90% or more) dues received nondeductible by members?			1	1	ļ
	e organization make only in-house lobbying expenditures of \$2,000 or less?			2	1	<u> </u>
	e organization agree to carry over lobbying and political expenditures from the prior year?			3	<u> </u>	
Part III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."					3, i
	assessments and similar amounts from members		1			
	on 162(e) nondeductible lobbying and political expenditures (do not include amounts cal expenses for which the section 527(f) tax was paid).	of				
a Curren	nt year		2a			
<b>b</b> Carryo	over from last year		2b_			
c Total			2c	ļ		
	gate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	ļ.——		
	ces were sent and the amount on line 2c exceeds the amount on line 3, what portion of		}	ĺ		
	s does the organization agree to carryover to the reasonable estimate of nondeductible lobby olitical expenditure next year?	/ing				
excess	sitical experiordire flext year.	•	4	<del></del>		
excess and po	le amount of lebbuing and political expenditures (see instructions)					
excess and po	le amount of lobbying and political expenditures (see instructions)  Supplemental Information		5_	<u> </u>		_

Schedule 🤃 (Fori	m 990 or 990 EZI 2013	Page <b>4</b>
Part IV	Supplemental Information (continued)	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
➤ Attach to Form 990

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule D (Form 990) and its instructions is at www irs gov/form990.

Inspection

OMB No 1545-0047

Tulsa C	ounty Farm Bureau	73-0669786
Par		ds 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	
	Aggregate contributions to (during year)	
	Aggregate grants from (during year)	
	Aggregate value at end of year	
	Did the organization inform all donors and donor advisors in writing that the assets he funds are the organization's property, subject to the organization's exclusive legal contro	
6	Did the organization inform all grantees, donors, and donor advisors in writing that gran only for charitable purposes and not for the benefit of the donor or donor advisor, or for conferring impermissible private benefit?	t funds can be used or any other purpose
		Yes No
Part		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	
	Purpose(s) of conservation easements held by the organization (check all that apply)	h
	Preservation of land for public use (e.g., recreation or education)	* *
		a certified historic structure
	[7] Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution	a in the form of a conceniation
2	easement on the last day of the tax year	Held at the End of the Tax Year
_	Total number of conservation easements	2a
a b	Total acreage restricted by conservation easements	2b
	Number of conservation easements on a certified historic structure included in (a)	2c
	Number of conservation easements included in (c) acquired after 8/17/06, and not of	
	historic structure listed in the National Register	2d
	Number of conservation easements modified, transferred, released, extinguished, or term tax year ▶	
	Number of states where property subject to conservation easement is located >	
	Does the organization have a written policy regarding the penodic monitoring, insp	paction handling of
	violations and enforcement of the conservation easements it holds?	Yes No
	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	
U	L	easements during the year
	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ease. \$ \inc \\$	ments during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements o (i) and section 170(h)(4)(B)(ii)?	
	In Part XIII, describe how the organization reports conservation easements in its revenue	Yes No
9	balance sheet, and include, if applicable, the text of the footnote to the organization's final organization's accounting for conservation easements	
Part		Other Similar Assets
rait	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	Other Similar Assets.
12	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its	revenue statement and balance chae
	works of art, historical treasures, or other similar assets held for public exhibition, ed	
	public service, provide, in Part XIII, the text of the footnote to its financial statements that	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its is works of art, historical treasures, or other similar assets held for public exhibition, ed public service, provide the following amounts relating to these items.	revenue statement and balance shee
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
	(ii) Assets included in Form 990, Part X	▶ \$
	If the organization received or held works of art, historical treasures, or other similar following amounts required to be reported under SFAS 116 (ASC 958) relating to these it	
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
	Assets included in Form 990, Part X	S

SCHEOU	e O from ago) 2013								rage -
Part	Organizations Maintaining Using the organization's acquisition, a								
3	collection items (check all that apply)	accession, and o	mer recor	us, checi	k any or th	e ioliov	ving that are a	significant t	ise oi iis
а	Public exhibition		તા	7 Loan	or exchang	e prog	rams		
	Scholarly research		-	Other	_				
C	Preservation for future generations		.						
4	Provide a description of the organizat		and expla	in how th	nev further	the ord	ianization's exe	empt purpos	e in Part
,	XIII		aa,		,		,		
5	During the year, did the organization assets to be sold to raise funds rather								□ No
Part			airied as p	art or the	Organizati	0113 00		Yes	_ No
ran	Complete if the organization 990, Part X, line 21	•	" to Forn	n 990, Pa	art IV, line	9, or 1	reported an ar	mount on F	orm
1a	Is the organization an agent, trustee,	custodian or oth	ner interm	ediary fo	r contribut	ions or	other assets i	not	
10	included on Form 990, Part X?	oudiodium or on	10, 111101111	odidiy io		10110 01	out of document		. □ No
b	If "Yes," explain the arrangement in Pa	art XIII and compl	ete the fol	lowing ta	ble				
_	,	- · · · · · · · · · · · · · · · · · · ·		3				Amount	
С	Beginning balance					10	:		
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amour	nt on Form 990, P	art X, line	217				☐ Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII Check her	e if the ex	planation	has been	provide	ed in Part XIII		
Part									
	Complete if the organization	. — . — — — — — — — — — — — — — — — — —							
	į	(a) Current year	(b) Pric	r year	(c) Two year	s back	(d) Three years ba	ck (e) Four ye	ears back
1a	Beginning of year balance								
þ	Contributions								
С	Net investment earnings, gains, and losses .					- <u>-</u> -			
đ	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance				· · ·				
2	Provide the estimated percentage of t	he current year e	nd balanc	e (line 1g,	, column (a)) held	as		
а	Board designated or quasi-endowmer	nt 🕨	%						
b	Permanent endowment	%							
С	Temporarily restricted endowment	%							
	The percentages in lines 2a, 2b, and 2								
3a	Are there endowment funds not in the	e possession of t	ne organiz	zation tha	at are neid	and ad	iministered for		
	organization by							r 	es No
	(i) unrelated organizations							3a(i)	-
	(ii) related organizations			- 0-1	-1- D O			3a(ii)	
	If "Yes" to 3a(ii), are the related organi							3b	
4	Describe in Part XIII the intended uses		on s endo	willelit	inos				
Part	Land, Buildings, and Equip Complete if the organization		" to Forn	n 990 P	art IV line	112	See Form 990	Part Y lin	10 م
	Description of property	(a) Cost or o			other basis		Accumulated	(d) Book	
	Description of property	(investo			ther)		epreciation	(4) 500	value
1a	Land				670,222 66			6	70,222 66
b	Buildings	ļ			640,822.54		867,088 23		73,734 31
c	Leasehold improvements				,, -		22.7000 20		
d	Equipment				188,442 03		186,627 20		1,814.83
e	Other .								
	Add lines 1a through 1e (Column (d) n	nust equal Form 9	990. Part)	(column	(B), line 10	2(c) J	•	2.6	45.771.80

Part VII	Investments – Other Securiti Complete if the organization a		n 990 Part IV line	11h See Form 990	i Part Y line 12
	(a) Description of security or cated (including name of security)	 ,	(b) Book value	(c) Method of Cost or end-of-ye	valuation
(1) Financial					
(2) Closely-h	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D) (E)					
(F)					
(G)					
(H)					
Total (Column (b) must equal Form 990, Part X, col (B) line 12)	>			
Part VIII	Investments-Program Rela				
	Complete if the organization a		n 990, Part IV, line	11c. See Form 990	, Part X, line 13
	(a) Description of investment		(b) Book value	(c) Method of Cost or end-of-year	
(1)					
(2)					
(3)					
(4)					
(6)					
(7)			-		
(8)				····	
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	>			
Part IX	Other Assets.				
	Complete if the organization a		n 990, Part IV, line	11d See Form 990	
		(a) Description			(b) Book value
(1)			··· ·· ·· · · · · · · · · · · · · · ·		-
_(2)					<u>-</u>
(3)		· · · · · · · · · · · · · · · · · · ·			······································
<u>(4)</u> (5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X	(, col (B) line 15)		•	
Part X	Other Liabilities.	–			
	Complete if the organization a	inswered "Yes" to Forr	n 990, Part IV, line	11e or 11f. See Fo	rm 990, Part X,
	line 25	6101			
1.	(a) Description of liability	(b) Book value			
(1) Federal in	ICOLLIA (9782)				
(2)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col (B) line 25.)	P			
2. Liability fo	r uncertain tax positions. In Part XIII, p	rovide the text of the footno	ote 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

Par	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		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1	1 1	3		
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			
С	Add lines 4a and 4b		4c		
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line		5		
Part			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		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1 1		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	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		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	investment expenses not included on Form 990, Part VIII, line 7b	4a			
ь	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b		4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, lir	ne 18)	5		
Part	XIII Supplemental Information.				
	le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a ar				
2, Par	t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part	t to provide any additional	information		

			•		

Schedule D'(For	m 990) 2013	Page 5
Part YIII	Supplemental Information (continued)	
Lenteviii.	oupplemental information (continued)	

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service ► 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.

Open to Public Inspection

Name of the organization	Employer identification number
Tulsa County Farm Bureau	73-0669786
The Organization does not have stockholders but it does have members. There are two types of me	mbers One is an Associate
member and the other is a Voting member. An Associate member includes someone who runs or of	perates a farm but whose average
gross agricultural income is less than half their total income. An Associate member also includes s	omeone working in Agribusiness
Someone who is not directly related to Agriculture is an Associate member. Lastly, an Associate me	ember can hold their membership
through a church, FFA chapter, an association, or by a corporation not producing agricultural produ	icts. A Voting member can be a family
that gets the majority of its average gross income from the sale of agricultural products. A Voting m	nember can also be held by a retired
agricultural person living on an income or social security accrued and not employed full time in ano	ther occupation. A Voting member
agricultural person living on an income of social security accraed and not employed full time in and	ther occupation. A voting member
can also be held by a partnership or corporation receiving the majority of income from the sale of ac	pricultural products
	·

NAME:

Tulsa County Farm Bureau

TAX NO.

73-0669786

TAX YEAR ENDING

8/31/2014

LIST OF OFFICERS, DIRECTORS AND TRUSTEES

(A) NAME AND ADDRESS	(B)	(C)	(D)	(E)
Wayne Herriman		NONE	NONE	NONE
PRESIDENT	4 HRS A MONTH			
Chuck Selman		NONE	NONE	NONE
VICE-PRESIDENT	4 HRS A MONTH			
Robert Kirk		NONE	NONE	NONE
SECRETARY	4 HRS A MONTH			
Melvin Keller		NONE	NONE	NONE
TREASURER	4 HRS A MONTH			
Mike Spradling		NONE	NONE	NONE
DIRECTOR	4 HRS A MONTH			
Jon Vantrease		NONE	NONE	NONE
DIRECTOR	4 HRS A MONTH	<u> </u>		