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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2014

Department of the Treasury
Internal Revenue Service

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.

Open to Public
Inspection

A For the 2014 calendar year, or tax year beginning 07/01, 2014, and ending 06/30, 2015

- B Check if applicable:
- ☒ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ App. pending

C

Florida Farm Bureau Federation
PO Box 147030
Gainesville, FL 32614-7030

D Employer identification no.

59-0642950

E Telephone number

(352) 378-1321

G Gross receipts \$, 680,826.

F Name and address of Principal Officer

John L Hoblick
5700 SW 34 Street
Gainesville, FL 32608

H(a) Is this a group return for affiliates? ☐ Yes ☒ NoH(b) Are all affiliates included? ☐ Yes ☐ No

If "NO" attach a list. (See instructions)

H(c) Group exemption no. 1805

I Tax Exempt Status ☐ 501(c)(3) ☒ 501(c)(5) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: floridafarmbureau.org

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

L Year of Formation 1941 M St. of legal domicile FL

Part I Summary

A c t i v i t y e s & a n c e	1	Briefly describe the organization's mission of most significant activities.	
		We apply joint and collective effort at the county, state and national level to the solution of problems of agriculturists and rural communities in economic, educational and social fields.	
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets	
	3	Number of voting members of the governing body (Part VI, line 1a)	25.
	4	Number of independent voting members of the governing body (Part VI, line 1b)	25.
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	40.
	6	Total number of volunteers (estimate if necessary)	2,137.
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	565,407.
	7b	Net unrelated business taxable income from Form 990-T, line 34	298,883.

R E V E N U E			Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)		2,326,610.	2,292,808.
9	Program services revenue (Part VIII, line 2g)		220,995.	229,229.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		41,570.	46,178.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9e, 10c and 11e)		4,111,147.	4,086,076.
12	Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,700,322.	6,654,291.
E X P E N S E S	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	19,250.	11,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,239,513.	3,306,676.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25)		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,750,187.	2,778,795.
	18	Total Expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,008,950.	6,096,471.
	19	Revenue less expenses. Subtract line 18 from line 12	691,372.	557,820.
A S S E T S			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	17,827,526.	18,690,332.
	21	Total liabilities (Part X, line 26)	2,717,708.	2,610,663.
	22	Net assets or fund balances Subtract line 21 from line 20	15,109,818.	16,079,669.

Part II Signature Block

Sign
Here

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.

Signature of officer

John L Hoblick (President)

Type or print name and title

Date

2/9/16

Print preparer's name

Preparer's signature

Date

Check if self-
employed ☐

PTIN

Paid
Preparer
Use Only

Firm's name

Firm's address

Firm's EIN

Phone no

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

☐ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2014)

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in Part III ☐**1** Briefly describe the organization's mission:

We apply joint and collective effort at the county, state and national level to the solution of problems of agriculturists and rural communities in economic, educational and social fields.

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 ☐ 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 ☐ No
If "Yes," describe these changes on Schedule O.**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organization and 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 service reported.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$)
The Florida Farm Bureau Women's Program has as its mission, to harness the talents & skills of our women to the task of implementing Farm Bureau policy, goals and objectives. It focuses the unique talents of women to make Farm Bureau more effective in it's organizational, legislative, educational & promotional efforts. Any woman that is a Farm Bureau member is eligible to participate in local, state and national activities. The Florida Farm Bureau Federation's Women's Leadership Committee is comprised of a District Women's Chair from each field district and a representative from the Young Farmer and Rancher Committee. The committee hosts the annual State Women's Conference, develops an annual plan and helps coordinate county Women's Committee activities that support state initiatives.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
The overarching mission of Florida Farm Bureau's Young Farmer and Rancher program is to ensure Florida Farm Bureau Federation will have effective leadership in the future. The program includes the State YF&R Leadership Group, a select group of individuals between 18 and 35 years of age who participate in a two year leadership curriculum that includes instruction and travel experiences. This group also hosts the annual Young Farmer and Rancher Conference that is attended by members from around the state. Attesting to the effectiveness of this program is the fact that both our State President and various board members are alumni of the program.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
The County Recognition Program is designed to recognize county Farm Bureaus for outstanding achievements in meeting their members' needs and supporting state policy implementation goals. It provides a means for county Farm Bureaus to share successful program ideas. It also aims to provide a "Roadmap for Success" that will help county leaders plan and execute programs that benefit members and support Farm Bureau policy goals.

4d Other program services (Describe in Schedule O)

(Expenses \$ including grant of \$)(Revenue \$)

4e 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		X
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instruction)?		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 1		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		
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	X	
6 Did the organization maintain any donor advised funds or any accounts where 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		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; 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		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part 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	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	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		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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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		X
12a Did the organization obtain separate, independent audited financial statements for the year? If "Yes," complete Schedule D, Part XI, XII, and XIII	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, Part XI, XII, and XIII is optional		
13 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report 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)		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		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		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (Continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		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	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principle 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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		
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 Form 990 or 990EZ? If "Yes," complete Schedule L, Part I		
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 "Yes," complete Schedule L, Part II		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 a family member of any of these persons? If "Yes," complete Schedule L, Part III		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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c	An entity of which a current or former officer, director, trustee, key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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		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		
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. 1a 12.		
b	Enter the number of Forms W-2G included in Line 1a. Enter -0- if not applicable. 1b 0.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wages and Tax Statements filed for the calendar year ending with or within the year covered by this return. 2a 40.		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 3b	X	
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)?		X
b	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.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		X
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T? 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b	X	
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? 7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year. 7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the org. file a Form 1098-C? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	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:		
a	Initiation fees and capital contributions included on Part VIII, line 12. 10a		
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:		
a	Gross income from members or shareholders. 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) Non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		
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.		
a	Is the organization licensed to issue qualified health plans in more than one state? 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. 13b		
c	Enter the amount of reserves on hand. 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year? 14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management

	1a	25	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	25		
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	25		
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, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5			X
6 Does the organization have members or stockholders?	6		X	
7a Did the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X	
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		X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		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 Service Code)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates and branches to ensure their operations are consistent with those of the organization's exempt purposes?	10b	X
11a Has the organization provided a copy of the Form 990 to all members of its governing body before filing the form?	11	X
b Describe in Schedule O the process, if any, the organization uses to review the Form 990		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with policy? If "Yes," Describe in Schedule O how this is done	12c	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does 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	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," has the organization adopted 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?	16b	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed **FL**

18 IRC Section 6104 requires an organization to make its Form 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 ☒ 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, address, and telephone number of the person who possesses the organization's books and records:
See schedule

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

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

Form 990 (2014)

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

(A) Name and Title	(B) Average hours per week (describe hours for related org's below line)	(C) Position (check all that apply)							(D) Reportable compensation from the organizations (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
		I	t	O	K	H	E	F			
		n	r	r	e	i	m	o			
		d	s	f	y	g	p	r			
		i	s	i	E	h	e	m			
		v	t	c	m	l	e	e			
		i	e	e	p	o	s	r			
		d	e	r	l	y	t				
		u	a		o	c	c				
		a	i		y	e	e				
(15) Sarah Carte	2										
Director	.25	X							0	3650	0
(16) R. Mark Wilson	2										
Director	.25	X							0	11298	0
(17) John L. Hoblick	36										
President	4			X					0	160687	51259
(18) Brantley Shirard, Jr.	3										
Vice President	.25			X					0	13898	0
(19) Mark Byrd	2										
Director	.25	X							0	5298	0
(20) Robert Richardson	35										
Executive Dir/Dir of Fi	5					X			127788	0	47390
(21) Roy Singleton	0										
Director of Mktg FAMA	40					X			0	137714	63715
(22) Kevin Morgan	38										
Asst to President	2					X			136470	0	43335
(23) Jeb Smith	2										
Director	.25	X							0	11398	0
(24) Kelly Rice	2										
Director	.25	X							0	11298	0
(25) Dan West	2										
Director	.25	X							0	11498	0
1b Sub-total									264258	509145	205699
c Total from continuation sheets to Part VII, Section A										33694	
d Total (add lines 1b and 1c)									264258	542839	205699

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

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee Line 1a? If "Yes," complete Schedule J for such individual	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	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		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 in compensation from the organization **2**

Continuation Sheet for Form 990, Part VII

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

Florida Farm Bureau Federation

Employer Identification number

59-0642950

Part I Continuation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees

[illegible]

Part VIII Statement of RevenueCheck if Schedule O contains a response to any question in this Part VIII ☐

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Contributions, gifts, grants and other similar amounts						
1a Federated campaigns	1a	0.				
b Membership Dues	1b	2,292,808.				
c Fundraising events	1c	0.				
d Related organizations	1d	0.				
e Government grants (contributions)	1e	0.				
f All other contributions, gifts, grants, & similar amounts not included above	1f	0.				
g Noncash contributions included in 1a-1f. \$		0.				
h Total. Add lines 1a-1f		2,292,808.				
Program Service Revenue						
		Business Code				
2a Sponsorships		541800	126,188.	126,188.	0.	
b Project Revenue		561000	103,041.	103,041.	0.	
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f			229,229.			
3 Investment income (including dividends, interest and other similar amounts)			46,272.	0.	0.	46,272.
4 Income from investment of tax-exempt bond proceeds			0.			0.
5 Royalties			3,494,188.	0.	0.	3,494,188.
6a Gross Rents	(i) Real	(ii) Personal				
	0.	0.				
b Less rental expenses	0.	0.				
c Rental income or (loss)	0.	0.				
d Net rental income or (loss)			0.	0.	0.	0.
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	0.	0.				
b Less cost or other basis and sales expenses	0.	94.				
c Gain or (loss)	0.	-94.				
d Net gain or (loss)			-94.	0.	0.	-94.
8a Gross amount from fundraising events (not including \$ 0. of contributions reported on line 1c). See Part IV, line 18	a	0.				
b Less: direct expenses	b	0.				
c Net income or (loss) from fundraising events			0.	0.	0.	0.
9a Gross income from gaming activities. See Part IV, line 19	a	0.				
b Less: direct expenses	b	0.				
c Net income or (loss) from gaming activities			0.	0.	0.	0.
10a Gross sales of inventory, less returns and allowance	a	111,474.				
b Less: cost of goods sold	b	26,441.				
c Net income or (loss) from sales of inventory			85,033.	0.	85,033.	0.
Miscellaneous Revenue						
		Business Code				
11a Commissions		524298	279,577.	0.	279,577.	
b Member Services & Reim		561110	194,756.	26,481.	168,275.	
c Inter Co Cost Sharing		561110	32,522.	0.	32,522.	
d All other revenue						
e Total. Add lines 11a-11d			506,855.			
12 Total Revenue See instructions			6,654,291.	255,710.	565,407.	3,540,366.

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 to any question in this Part IX ☐

Do not include amounts reported on line 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 U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	11000			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees and key employees	264258			
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	1833713			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	589416			
9	Other employee benefits	459778			
10	Payroll taxes	159511			
11	Fees for services (non-employees):				
a	Management	0			
b	Legal	22780			
c	Accounting	13125			
d	Lobbying	17628			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, col (A) amount, list line 11g expenses on Schedule O)	187914			
12	Advertising and promotion	75285			
13	Office Expenses	348038			
14	Information technology	30987			
15	Royalties	0			
16	Occupancy	129660			
17	Travel	532095			
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions, and meetings	54965			
20	Interest	0			
21	Payments to affiliates	632134			
22	Depreciation, depletion, and amortization	21854			
23	Insurance	45815			
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	Dues & Subscriptions	517411			
b	Award/Contribution/Misc	106085			
c	Vehicle Rent/Maint&Eqpmt	186743			
d	Accrued Expenses	-160494			
e	All other expenses	16770			
25	Total functional expenses. Add lines 1 through 24e	6096471			
26	Joint Costs. Check ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance SheetsCheck if Schedule O contains a response to any question in this Part X ☐

		(A) Beginning of year		(B) End of year
A S S E T S	1 Cash-non-interest-bearing	809,466.	1	371,245.
	2 Savings and temporary cash investments	11,246,688.	2	12,050,910.
	3 Pledges and grants receivable, net	0.	3	
	4 Accounts receivable, net	28,505.	4	214.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	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	0.	6	
	7 Notes and loans receivable, net	299,196.	7	776,953.
	8 Inventories for sale or use	2,211.	8	3,250.
	9 Prepaid expenses and deferred charges	52,961.	9	69,191.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 433,680.		
	b Less: accumulated depreciation	10b 319,423.	10c	114,257.
	11 Investments-publicly-traded securities		11	
	12 Investments-other securities. See Part IV, line 11	4,873,134.	12	5,304,312.
	13 Investments-program-related. See Part IV, line 11		13	
	14 Intangible assets	0.	14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add 1 through 15 (must equal line 34)	17,827,526.	16	18,690,332.	
L I A B I L I T I E S	17 Accounts payable and accrued expenses	590,322.	17	628,077.
	18 Grants payable	0.	18	
	19 Deferred revenue	0.	19	
	20 Tax-exempt bond liabilities	0.	20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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	0.	23	
	24 Unsecured notes and loans payable to unrelated third parties	0.	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	2,127,386.	25	1,982,586.
	26 Total liabilities. Add lines 17 through 25	2,717,708.	26	2,610,663.
N E T A S S E T S F U N D B A L A N C E S	Organizations that follow SFAS 117 (ASC 958), check here ☐ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	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	25,000.	30	25,000.
	31 Paid-in or capital surplus, or land, building, and equipment fund	0.	31	0.
	32 Retained earnings, endowment, accumulated income, or other funds	15,084,818.	32	16,054,669.
	33 Total net assets or fund balances	15,109,818.	33	16,079,669.
	34 Total liabilities and net assets/fund balances	17,827,526.	34	18,690,332.

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,654,291.
2	Total Expenses (must equal Part IX, column (A), line 25)	2	6,096,471.
3	Revenue less expenses. Subtract line 2 from line 1.	3	557,820.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,109,818.
5	Net unrealized gains (losses) on investments	5	33,916.
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	378,115.
10	Net assets or fund balances at the end of year. Combine lines 3 through 9 (Must equal Part X, line 33, column (B))	10	16,079,669.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question 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		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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	2a	X
b Were the organization's financial statements audited by an independent accountant? 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	2b	X
c If "Yes" to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	
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	3b	

Schedule C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

▶ Information about Sch. C (Form 990 or 990-EZ) and its instr. is at www.irs.gov/form990.

OMB No. 1545-0047

2014

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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. 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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions) then

- Section 501(c)(4), (5), or (6) organizations: complete Part III.

Name of organization

Florida Farm Bureau Federation

Employer identification no.

59-0642950

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$

3 Volunteer hours ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction Made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$

4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received & promptly & directly delivered to a separate political organization. If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and shares of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures- (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other similar means?			
i Other activities?			
j Total lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	X	
2 Did the organization make only in-house lobby expenditures of \$2,000 or less?		X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see separate instructions); and Part II-B, line 1. Also, complete this part for any additional information

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

► **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

Florida Farm Bureau Federation

Employer identification number

59-0642950

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 value of contributions to (during year)		
3 Aggregate value of 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 may be used only for charitable purposes and not for the benefit of the donor or donor advisor or 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)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

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 year.

	Held at the end of the 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 taxable 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 or 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 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

1a 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.

1a 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 why in Part XIII and complete the following table:

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation 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
1a 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 year end balance (line 1g) 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%.

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

- (i) unrelated organizations
(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a (ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV 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 Investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land	0.	12,920.		12,920.
b Buildings	0.	90,040.	60,228.	29,812.
c Leasehold improvements	0.	99,509.	59,855.	39,654.
d Equipment	0.	92,933.	70,484.	22,449.
e Other		138,278.	128,856.	9,422.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))				114,257.

Schedule D (Form 990) 2014 **Florida Farm Bureau Federation****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		
(3) Other <u>Stock BanCorp</u>	459,900.	C
(A) <u>Preferred BanCorp Stock</u>	200,000.	C
(B) <u>Stock FFBE</u>	10,000.	C
(C) <u>Stock Holding Corp</u>	58,563.	C
(D) <u>Stock Investment Corp</u>	240,000.	C
(E) <u>FFBE Equity Ret Earnings</u>	4233873.	
(F) <u>Holding Corp Equity Ret Earn</u>	45,853.	
(G) <u>Invstmt Corp Equity Ret Earn</u>	56,123.	
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.) ►	5304312.	

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)		
Total. (Column (b) must equal Form 990, Part X, col. (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)	
Total. (Column (b) must equal Form 990, Part X, col. (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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <u>Post Retirement Benefit.</u>	1146406.
(3) <u>Pension Benefit Payable.</u>	836,180.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	1982586.

2. Liabilities for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the org'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	7116528.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	33,916.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	432,571.
e	Add lines 2a through 2d	2e	466,487.
3	Subtract line 2e from line 1	3	6650041.
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	4,250.
c	Add lines 4a and 4b	4c	4,250.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6654291.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expense 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	5900228.
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	5900228.
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	196,243.
c	Add lines 4a and 4b	4c	196,243.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6096471.

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, line 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D, Part VI - Other fixed assets held for investment

Investment description	Cost or Other Basis (Investment)	Cost or Other Basis (Other)	Depreciation	Book value
Furniture & Fixtures		104,025.	95,932.	8,093.
Computer Software		34,253.	32,924.	1,329.
		138,278.	128,856.	9,422.

Part XI, line 2d - Other on Financial stmt/not on Revenue

Equity in Earnings of Subsidiaries 432,576
Rounding -5

Part XI, line 4b - Other on Revenue/not on Financial stmt

Reclass Refund Contribution 4,250

Part XIII **Supplemental Information.** (continued)Part XII, line 4b - Other on Func exp/not on Financial

FASB 158 Pension Adjustment	185,781
Post Retirement Benefit	6,217
Reclass Expense Reduction	4,250
Rounding	-5

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

2014

**Open to Public
Inspection**

Name of the organization
Florida Farm Bureau Federation

Employer identification number
59-0642950

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) <u>Polk County Farm B</u> <u>Schedule Attached</u>	59-0686513 501(c)(5)	6,000.			See Attached
(2) <u>Dade County Farm B</u> <u>Schedule Attached</u>	59-0688990 501(c)(5)	5,000.			See Attached
(3) _____ _____					
(4) _____ _____					
(5) _____ _____					
(6) _____ _____					
(7) _____ _____					
(8) _____ _____					
(9) _____ _____					
(10) _____ _____					
(11) _____ _____					
(12) _____ _____					

- 2 Enter total number of section 501(c)(3) and government organizations ▶
- 3 Enter total number of other organizations ▶ **2**

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.** Complete this part to provide the information required in Part I, line 2, and any other additional information

The County Action Partnership (CAP) Program will provide funding for approved projects. An application is filled out and successful applicants will be selected by the CAP Committee and must be approved by the Florida Farm Bureau Board of Directors. This innovative program has been created to provide financial assistance for County Farm Bureaus interested in implementing projects of significant importance to Florida agriculture.

Schedule I Part II - Addresses, Description and Purpose

<u>Name, Address and Purpose of Grant</u>	<u>Description of Non-Cash Assistance</u>
Polk County Farm Bureau 1715 US HWY 17S Bartow, FL 33830-6621 County Action Partnership Program	
Dade County Farm Bureau 1850 Old Dixie Hwy Homestead, FL 33033-3212 County Action Partnership Program	

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

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.

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

OMB No 1545-0047

2014

**Open to Public
Inspection**

Florida Farm Bureau Federation

Employer identification number

59-0642950

Part I Questions Regarding Compensation

1a 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 | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☒ Payments for business use of personal residence |
| ☐ 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

	Yes	No
1a		
1b	✓	

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

2	✓	
---	---	--

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.

- | | |
|---|---|
| ☒ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☐ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ 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? | 4a | ✓ |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | ✓ |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | ✓ |

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), 501(c)(4), and 501(c)(29) 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? | 5a | |
| b Any related organization? | 5b | |

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? | 6a | |
| b Any related organization? | 6b | |

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 column (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 in column (B) reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1 Brad Austin, Director	(i)		10,898				10,898	11,490
2 John L. Hoblick, President	(i)							
3 Robert Richardson, Executive Director/Director of Finance	(i)	127,788			33,353	14,037	175,178	219,175
4 Roy Singleton, Director of Marketing for FAMA	(i)	137,714			49,677	14,038	201,429	191,193
5 Kevin Morgan, Assistant to the President	(i)	136,470			34,624	8,711	179,805	175,712
6	(i)							
7	(i)							
8	(i)							
9	(i)							
10	(i)							
11	(i)							
12	(i)							
13	(i)							
14	(i)							
15	(i)							
16	(i)							

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/forms990.

OMB No 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

Florida Farm Bureau Federation

Employer identification number

59-0642950

Part VI, Line 2 - Officer has family/business relationship with other officer
Henry McCrone and Jeffery Pittman have a business relationship.

Part VI, Line 6 - Organization has members or stockholders
Florida Farm Bureau Federation is a membership based organization.

Part VI, Line 7a - Persons/Groups who can elect any members of governing body
The members elect the President, Vice President and Board of Directors at our annual meeting.

Part VI, Line 7b - Governing body decisions are subject to approval by:
The opportunity for members to challenge or question the actions of the governing body is made available in the general business sessions and the policy development segment of the annual meeting.

Part VI, Line 11b - Process used by the organization to review this 990 return
Prior to mailing, the 990 is reviewed by the Board of Directors and management.

Part VI, Line 12c - Monitoring and enforcement of conflict of interest policy
The organization, through the Assistant to the President, monitors any conflicts of interest that may arise.

Part VI, Line 15a/15b - Compensation review process
Vice President, Treasurer and Secretary serve as compensation committee for the President/CEO. They review comparables with other associations in similar positions. President/CEO's salary is subject to approval by board of directors.

Name of the organization

Florida Farm Bureau Federation

Employer identification number

59-0642950

Part VI, Line 19 - How Org. makes Documentation, Policies & Statements public

As an organization exempt under the IRC 501(c)(5) we make our documents available upon request.

Part VI, Section C, Line 20 - Person in charge of books and records

Robert Richardson
(352)378-1321

5700 SW 34 Street
Gainesville, FL 32608

Part XI, Line 9 - Reconciliation changes in net assets or fund balances

Equity in earnings of subsidiaries	432,576
Income Tax Expense	-53,426
Holding Minority Interest	-1,036
Rounding	1

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2014

**Open to Public
Inspection**

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.

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

Name of the organization

FLORIDA FARM BUREAU FEDERATION, INC

Employer identification number

59-0642950

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)						
(4)						
(5)						
(6)						

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) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	FLORIDA FARM BUREAU SCHOLARSHIP, INC. 59-1662473							
	5700 SW 34TH STREET GAINESVILLE, FL 32608	813000	FL	501(c)(3)	Line 11A FFBF			✓
(2)	CENTER FOR AG ED AND TECH, INC. 45-2824894							
	5700 SW 34TH STREET GAINESVILLE, FL 32608	611710	FL	501(c)(3)	LINE 7 FFBF			✓
(3)								
(4)								
(5)								
(6)								
(7)								

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50135Y

Schedule R (Form 990) 2014

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?		(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	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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) Section 512(b)(13) controlled entity?	
								Yes	No
(1) FFB ENTERPRISES, INC. 59-1091243 5700 SW 34TH STREET GAINESVILLE, FL 32608	561000	FL	FFBF	C			0		✓
(2) FL AG MARKETING ASSN 59-1228820 5700 SW 34TH STREET GAINESVILLE, FL 32608	424400	FL	ENTERPRISES	C			0		✓
(3) FL FARM BUREAU HOLDING CORP. 59-2492747 5700 SW 34TH STREET GAINESVILLE, FL 32608	551112	FL	FFBF	C			0		✓
(4) FFBF INVESTMENT CORP. 26-3787305 5700 SW 34TH STREET GAINESVILLE, FL 32608	551112	FL	FFBF	C			0		✓
(5) AG ED SVCS & TECH INC. 45-2824959 5700 SW 34TH STREET GAINESVILLE, FL 32608	611710	FL	ENTERPRISES	C			0		✓
(6)									
(7)									

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1		Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		☒	☐
b Gift, grant, or capital contribution to related organization(s)		☐	☒
c Gift, grant, or capital contribution from related organization(s)		☐	☒
d Loans or loan guarantees to or for related organization(s)		☐	☒
e Loans or loan guarantees by related organization(s)		☐	☒
f Dividends from related organization(s)		☐	☒
g Sale of assets to related organization(s)		☐	☒
h Purchase of assets from related organization(s)		☐	☒
i Exchange of assets with related organization(s)		☐	☒
j Lease of facilities, equipment, or other assets to related organization(s)		☐	☒
k Lease of facilities, equipment, or other assets from related organization(s)		☐	☒
l Performance of services or membership or fundraising solicitations for related organization(s)		☐	☒
m Performance of services or membership or fundraising solicitations by related organization(s)		☐	☒
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		☐	☒
o Sharing of paid employees with related organization(s)		☐	☒
p Reimbursement paid to related organization(s) for expenses		☒	☐
q Reimbursement paid by related organization(s) for expenses		☒	☐
r Other transfer of cash or property to related organization(s)		☐	☒
s Other transfer of cash or property from related organization(s)		☐	☒

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) FLORIDA AGRICULTURAL MARKETING ASSOCIATION	A	111,341	% OF SALES
(2) FLORIDA FARM BUREAU ENTERPRISES	O	212,256	ALLOCATION
(3) FLORIDA FARM BUREAU ENTERPRISES	P	419,878	ALLOCATION
(4) FLORIDA FARM BUREAU ENTERPRISES	Q	32,522	ALLOCATION
(5)			
(6)			

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 sections 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).....													
(9).....													
(10).....													
(11).....													
(12).....													
(13).....													
(14).....													
(15).....													
(16).....													