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**Short Form**

**Return of Organization Exempt From Income Tax**

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

**2014**

**Open to Public Inspection**

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

**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  
 Final return  
 Amended return  
 Application pend

**C** Hardee County Farm Bureau  
1017 US HWY 17 N  
Wauchula, FL 33873-8751

**D** Employer identification no. 59-0752041

**E** Telephone number (863) 773-3117

**F** Group Exemption Number .... ▶ 1805

**G** Accounting method:  Cash  Accrual Other (specify) ▶ \_\_\_\_\_

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

**I** Website: ▶ N/A

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

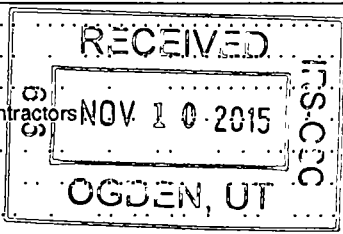
**K** Form of organization:  Corporation  Trust  Association  Other

**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ..... ▶ \$ 174,827.

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

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

REVENUE	1	Contributions, gifts, grants, and similar amounts received	1	0.
	2	Program service revenue including government fees and contracts	2	2,851.
	3	Membership dues and assessments	3	46,797.
	4	Investment income	4	165.
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
6b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceed \$15,000)	6b		
6c	Less: direct expenses from gaming and fundraising events	6c		
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a	10,342.	
7b	Less: cost of goods sold	7b	11,006.	
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	-664.	
8	Other revenue (describe in Schedule O)	8	114,672.	
9	<b>Total revenue</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	163,821.	
EXPENSES	10	Grants and similar amounts paid (list in Schedule O)	10	21,320.
	11	Benefits paid to or for members	11	0.
	12	Salaries, other compensation, and employee benefits	12	59,352.
	13	Professional fees and other payments to independent contractors	13	0.
	14	Occupancy, rent, utilities, and maintenance	14	25,287.
	15	Printing, publications, postage, and shipping	15	1,557.
	16	Other expenses (describe in Schedule O)	16	26,857.
17	<b>Total expenses</b> Add lines 10 through 16	17	134,373.	
TOTALS	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	29,448.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	154,936.
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	988.
	21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20	21	185,372.



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**Part II Balance Sheets.** (see the instructions for Part II.)

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

	(A) Beginning of the year	(B) End of year
22 Cash, savings, and investments	127,239.	22 160,693.
23 Land and Buildings	24,589.	23 23,952.
24 Other assets (describe in Schedule O)	4,179.	24 1,706.
25 Total assets	156,007.	25 186,351.
26 Total liabilities (describe in Schedule O)	1,071.	26 979.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	154,936.	27 185,372.

**Part III Statement of Program Service Accomplishments** (see the Instructions for Part III.)

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

**Expenses**  
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others)

What is the organization's primary exempt purpose? Education Information Economic

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

28 See Schedule O.

(Grants \$ ) If this amount includes foreign grants, check here  28a

29

(Grants \$ ) If this amount includes foreign grants, check here  29a

30

(Grants \$ ) If this amount includes foreign grants, check here  30a

31 Other program services (attach schedule)

(Grants \$ ) If this amount includes foreign grants, check here  31a

32 Total program service expenses (add lines 28a through 31a) 32

**Part IV List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated. (see the instructions for Part IV.)

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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable Compensation (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
David B Royal President	8	0.	0.	0.
Greg L Shackelford VP	2	0.	0.	0.
Bo Rich Treas/Sec.	1	0.	0.	0.
Joseph B Cherry Director	1	0.	0.	0.
Steve A Johnson Director	1	0.	0.	0.
Corey M Lambert Director	1	0.	0.	0.
Scott B Henderson Director	1	0.	0.	0.
Daniel H Smith Director	1	0.	0.	0.
Tommy Watkins Director	1	0.	0.	0.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions

for Part V.) Check if the organization used Schedule O to respond to any question in this Part V . . . . . [X]

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . . 33 Yes No
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) . . . . . 34 X
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on line 2, 6a, and 7a, among others)? . . . . . 35a X
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O . . . . . 35b X
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . . 35c X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . . 36 X
37 a Enter amount of political expenditures direct or indirect, as described in the instructions. [ 37a ] 0 . . . . .
b Did the organization file Form 1120-POL for this year? . . . . . 37b X
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return? . . . . . 38a X
b If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . . 38b
39 Section 501(c)(7) organizations. Enter:
a Initiation fees and capital contributions included on line 9 . . . . . 39a
b Gross receipts, included on line 9, for public use of club facilities . . . . . 39b
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 [ ] ; section 4912 [ ] ; section 4955 [ ]
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 900-EZ? If "Yes," complete Schedule L, Part I . . . . . 40b
c Section 501(c)(3) 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . .
d Section 501(c)(3) 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization . . . . .
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . . 40e X
41 List the states with which a copy of this return is filed. [ Florida ]
42 a The organization's books are in care of [ Leona Nickerson ] Tel. no. [ 863-773-3117 ]
Located at [ 1017 US Hwy 17 N, Wauchula, FL ] ZIP + 4 [ 33873-8751 ]
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . . 42b Yes No X
If "Yes", enter the name of the foreign country: [ ]
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . . 42c X
If "Yes", enter the name of the foreign country: [ ]
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041-- Check here [ ] and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . [ 43 ]
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . . 44a X
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . . 44b X
c Did the organization receive any payments for indoor tanning services during the year? . . . . . 44c X
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . . 44d
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . . 45a X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instr.) . . . . . 45b

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

Table with columns Yes, No and row 46 with 'X' in the No column.

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

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

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

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

Table with columns Yes, No and row 47.

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

Table with columns Yes, No and row 48.

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

Table with columns Yes, No and row 49a.

b If "Yes," was the related organization(s) a section 527 organization?

Table with columns Yes, No and row 49b.

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

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation from the organization, (d) Health benefits contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation.

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

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

Table with 3 columns: (a) Name and address of each independent contractor, (b) Type of service, (c) compensation.

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

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

Yes No

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

Sign Here: Signature of officer (David B. Royal), Date (10-22-2015), Type or print name and title (President).

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

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](http://www.irs.gov/forms990).

OMB No. 1545-0047

2014

Open to Public  
Inspection

Name of the organization  
Hardee County Farm Bureau

Employer identification number  
59-0752041

Part I, Line 8 - Other Revenue

Service Fees	114,097.
Adjuster Reimb	550.
Miscellaneous	25.
	<u>114,672.</u>

Part I, Line 10 - Expenses - Grants and similar amounts paid

Florida Farm Bureau Federation Dues	<u>21,320.</u>	
Totals:	<u>21,320.</u>	<u>0.</u>

Part I, Line 16 - Other Expenses

<u>Description</u>	<u>Total</u>
Meetings & Travel	7,008.
Eqpt Rent/Lease	6,963.
Special Projects/Promo	5,871.
Office Expense	5,562.
Employee Education	1,010.
Dues & Subscriptions	165.
Contributions	150.
Miscellaneous	78.
Awards	50.
Totals:	<u>26,857.</u>

Part I, Line 20 - Other changes in net assets or fund balances

Unrealized gain on investment	<u>988.</u>
	<u>988.</u>

Part II, Line 24 - Other Assets

Inventory	1,205.
Pre-Paid Gift Cards	501.
	<u>1,706.</u>

Name of the organization

Hardee County Farm Bureau

Employer identification number

59-0752041

Part II, Line 26 - Other Liabilities

Federal Income Taxes	0.
Payroll Liabilities	979.
	<u>979.</u>

Page 2, Part III - Line 31, Other Program ServicesDescription

28) We participated in Ag fest, this is an annual event held to educate 4th grade students on the importance of agriculture and where their food comes from. There were 28 different commodity stations. Children learned about hay production, caladiums, phosphate, food nutrition, citrus, cattle horticulture dairy, horses, and wildlife management. In an effort to educate our county we provide this hands on education hoping that the students will go home and share what they have learned with their families.

29) We support youth education in our county by holding a youth speech contest. This is used as an opportunity for local high school students to research an ag-related topic. The purpose of the essay contest is for youth to appreciate and have a better understanding of the vital role that agriculture plays in every day living.

30) We participated in the Bonnie Cabbage Program. Local elementary students in the county received a cabbage plant to grow and nurture and a care sheet. This program was an opportunity for elementary students to engage in agriculture first hand and become knowledgeable about the food system and the basics of gardening. This program promotes the betterment of agriculture by developing valuable life lessons.