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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545 0047

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.

Department of the Treasury

Open to Public

inter	rial Rever	Fine Service Information about Form 990 and its instructions is at www in	s gov/form990.	Inspection
Ā	For the	e 2014 calendar year, or tax year beginning 9-1 , 2014, and endi	ng 8-31	, 20 15
В	Check if	applicable C Name of organization Okmulgee County Farm Bureau	DE	mployer identification number
3	Address	change Doing business as	· · ·	73-0770880
	Name c	hange Number and street (or P O box if mail is not delivered to street address) Room/s	uite E Te	elephone number
Ţ	Initial re	turn 610 E 6th St		918 756 7284
1	Final retu	urn, terminated City or town state or province country, and ZIP or foreign postal code		
	Amende	ed return Okmulgee, OK 74447	6 G	Gross receipts \$ 179,905 33
(-1	Applicat	tion pending F Name and address of principal officer Larry Harvey	H(a) Is this a group re	efurn for subordinates? Yes No
		2230 Grimes Rd , Beggs, OK 74421		rdinates included? Yes No
	Tax exc	mpt status [1501(c)(3)		ittach a list (see instructions)
J	Website		H(c) Group exer	mption number ► 1480
<u> </u>		organization		State of legal domicile OK
P	art I	Summary	<u></u>	<u></u>
	1 1	Briefly describe the organization's mission or most significant activities Agric	ultural Membersh	ip Organization
ė	į	<u> </u>		,g
Governance	ĺ		-	-
ern	2	Check this box ► [if the organization discontinued its operations or disposed	of more than 25	% of its net assets
ò	3	Number of voting members of the governing body (Part VI, line 1a)	1	3 ! 7
∞5	4	Number of independent voting members of the governing body (Part VI, line 1b	1	4
es	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	,	5 -0.
¥ .	6	Total number of volunteers (estimate if necessary)	1.	6
Activities	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a 129,001 04
•	. b	Net unrelated business taxable income from Form 990-T, line 34	1	7b 8,368 74
	1 2	Tree difficulties taxable integrite in integrite in the i	Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		46 50 17,137 50
	9	Program service revenue (Part VIII, line 2g)	19,0	17,137 30
ver	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2.0	45.00
R	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	140,6	45 00 1,345 06
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	161,7	23 97 147,483 60
	14	Benefits paid to or for members (Part IX, column (A), line 4)	10.5	27.22
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		27 23 9,925 18
Expenses	ì		82,9.	36 91 82,164 73
en	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
Ž	b	Total fundraising expenses (Part IX, column (D), line 25) ► Other expenses (Part IX, column (A), lines 11a-11d-11f-24e)		
	17 18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		92 04 65,786 83
	19		156,5	
	i 19 -	Revenue less expenses Subtract line 18 from line 12	Beginning of Curren	67 79 (10,393 14) t Year End of Year
ts or	20	Total assets (Part X, line 16)	-	
Asse Bala	20 21	Total liabilities (Part X, line 16)	848,40	
Net As:	22	Net assets or fund balances Subtract line 21 from line 20	629,9	
	art II	Signature Block	218,40	66 02 208,072 88
		alties of perjury Ligeclare that I have examined this return including accompanying schedules and state		
		ct and complete. Declaration of preparer (other than officer) is based on all information of which prepar		
		Joemes Pettman		1/5/1/2
Sig	an	Signalure of officer	Date	
He		James Litman , Preside	nt	
• • •		Type or print name and title	· · · · · · · · · · · · · · · · · · ·	
_			Date	PTIN
	aid	Cloic War Alexander		Check if self-employed
	epar		120/12	
Us	se On	lly Firms name ► Oklahoma Farm Bureau	firm's E	
140	ny tha !	Firm s address > 2501 N Stiles, OKC, OK 73105	Phone n	
		RS discuss this return with the preparer shown above? (see instructions)		✓ Yes ☐ No
Fo	r Paper	work Reduction Act Notice, see the separate instructions Cat	No 11282Y	Form 990 (2014)

1		Schedule O contains a the organization's missi					~ J		'´-
		nbership Organization				_	_		
		-			-				
2	Did the organiz	ation undertake any sigr or 990-EZ?	nificant program serv	ices during t	he year which	ch were not li	sted on the		 [∕ No
		be these new services or							
3	services?	zation cease conducting		ant changes	in how it	conducts, ar	ny program	i _∫.Yes	[<u>₹</u>] No
		be these changes on Sci			a.f. d.a. dla				
4	expenses Sect	ganization's program setion 501(c)(3) and 501(c) ses, and revenue, if any.	(4) organizations are	required to i	report the ai	mount of grai	am services nts and allo	s, as meas ocations to	surea by o others
4a	(Code) (Expenses \$	ıncludıng gı	rants of \$) (Revenue	= \$)
									-
		-	-						-
								-	
	-				-				-
							-		
	-	•							•
					-				
4b	Code) (Expenses \$	ıncluding gi	rante of \$) (Revenue			- '
70	(0000) (Expenses \$\psi\$	moldomy gi	·ainto or \$\psi\$		_ / (110001101	J		,
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		-							
	-								
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	-				••	-			
4c	(Code) (Expenses \$	including gi	rants of \$) (Revenu	e \$)
	-						-		
									-
							-		
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			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			-	
4 d	Other program (Expenses \$	services (Describe in Sc	chedule O)		enue \$				- -

Part	V Checklist of Required Schedules		-	- age O
			Yes	i No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	r —		ī -
	complete Schedule A	1 1		\
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	-	. 🗸
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	,		
	candidates for public office? If "Yes," complete Schedule C, Part I	3_	 ! -	↓ ✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	1		1
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	 	· <u> </u>
5	Is the organization a section 501(c)(4) 501(c)(5), or 501(c)(6) organization that receives membership dues,	!		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_ :	/	;
•		_ 5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
·	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	! -!		<u> </u>
	complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	-		
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			<u> </u>
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI,			
	VII, VIII IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
la.	complete Schedule D. Part VI	11a	✓	
Ð	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			
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b		1
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X. line 15 that is 5% or more of its total assets	110		- -
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes" complete Schedule D, Part X	11e		<u>√</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	,		; –
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			1
	Schedule D, Parts XI and XII	12a		ļ
ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	-		1
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	<u> </u>	<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking.	14a		/
b	fundraising, business, investment, and program service activities outside the United States, or aggregate	ļ	 ! !	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3 more than \$5,000 of grants or other assistance to or			ļ
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	 	1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	1		 -
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	 -	1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			ļ
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	! 	· 🗸
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	1		1
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
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	!	1	1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		1
_	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b	ļ	
	10 10 10 110 200, did the organization attach a copy of its addited financial statements to this feturn?	200	1	∀

Part	Checklist of Required Schedules (continued)			. age •
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		· 🗸
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		 :
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J			· · -
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	23 24a		
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		V
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 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	24d 25a		· /
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		/
26	Did the organization report any amount on Part X line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		 ·
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes." complete Schedule M	29 30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	 	· -
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		\ \ \
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	<u> </u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		→
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	<u></u>	1
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,		<u> </u>	-
38	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		/
	19? Note. All Form 990 filers are required to complete Schedule O	38	i L	1
		For	m 99 (0 (2014

οι ₍ 99	90 (201 1)		- 1	Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
_	Check if Schedule O contains a response or note to any line in this Part V			٠, ،
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors a reportable gaming (gambling) winnings to prize winners?	ind 1c		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			<u> </u>
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓	!
b	If "Yes" has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	√ .	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other author	rity		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	cial		
	account)?	4a		1
b	If "Yes" enter the name of the foreign country	_		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accou (FBAR)	nts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		. <u>/</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes' to line 5a or 5b, did the organization file Form 8886-T?	_5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the		
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes, did the organization include with every solicitation an express statement that such contributions	6a or		-
	gifts were not tax deductible?	6b		-
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	ods		İ
	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was a self-to-file form 20002			
	required to file Form 8282?	7c		/
d	If "Yes" indicate the number of Forms 8282 filed during the year			,
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract.			1
f	Did the organization during the year, pay premiums directly or indirectly, on a personal benefit contract?	71		
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	, ,-		√
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by			1
Ü	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			i
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		1
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		ļ
10	Section 501(c)(7) organizations. Enter			İ
а	Initiation fees and capital contributions included on Part VIII, line 12	1 1		
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			
а	Gross income from members or shareholders 11a			
ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts is the organization filing Form 990 in lieu of Form 1041	⁷ 12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.			
ь	Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	, 1		1

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

14a

14b

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b or 10b below, describe the circumstances, processes, or changes in Schedule O.S.			
	Check if Schedule O contains a response or note to any line in this Part VI	ee 1115	uucu	UIIS ,
Section	on A Governing Body and Management			700.00
Secin	The deventing body and management	1	Yes '	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
ь 2	Enter the number of voting members included in line 1a, above, who are independent 1b 7 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		✓.
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		✓
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6 7a	- <u>-</u> -	√ √ -
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а b 9	The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director trustee, or key employee listed in Part VII, Section A, who cannot be reached at	8a 8b	✓	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓_
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode) Yes	No
10a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a 10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	√	!
b 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers directors or trustees and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b		√
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		[[
13 14 15	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data and contemporaneous substantiation of the deliberation and decision?	13		✓ ✓
a b	The organization's CEO Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	15a 15b		-
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	_	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed Noklahoma Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply	n 501	(c)(3)s	s only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year			y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	5 >	
	Oklahoma Farm Bureau, 2501 N Stiles, OKC, OK 73105 405 523 2300			

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

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

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

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

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

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

Check this b	pox if neither the organization n	or any relate	a orga	anız			ompe	nsa	ited any currer	it officer, director	r, or trustee
		j			. (0				1		I
	(A)	(B)	(do n	ot ch		ition more	e than o	one	(D)	(E)	(F)
	Name and Title	Average					n an	Reportable	Reportable	Estimated	
		hours per week (list any	1	er and		,	or/trust	,— <u>—</u>	compensation from	compensation from related	amount of other
		hours for	or d	Inst	Officer	Key emplayee	emg*	Former	the	organizations	compensation
		related organizations	vidu	ŝ	cer	e	nest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		below dotted	it or	ona	İ	olo	⁸ ငရ	Ì	(00-271099-1013C)	i I	and related
		line)	Individual trustee or director	Institutional trustee	İ	èe	per		ļ		organizations
		Ì	1 6	Siee	ł		Highest compensated employee				
				ļ				-	ļ	 	
(1) Schedule At	tached										
(2)					-		<u> </u>	-			
(3)					<u> </u>						
(5)		-		1			i			1	
(4)											
				ļ	ļ			-		ļ	
(5)											
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(9)		ļ				}	1				
10)		-		- 	†	Ţ	†		1		
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11)		ļ	1	i	;			İ	1		1
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(12)			 	+	\vdash	+	 	+		 	
[13]		. †									1
(14)		-	-	1	+	T	İ				
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Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees		nd F	lighe	st C	ompensated E	mployees (conti	nued)	_	
	(A) Name and title	(B) Average hours per week (list any	Position (do not check more that box unless person is be officer and a director/tri					an (ee)	(D) Reportable compensation from	(E) Reportable compensation from related	am	(F) imated ount of other	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	comp fro orga and	iensatio im the nization related nizations	1
(15)		-							: 		- -		
(16)		† †		-							 		
(17)			ļ					_			<u> </u>		
(18)	· · · · · · · · · · · · · · · · · · ·										 		- /
(19)		ļ									i		
(20)													
(21)					_			-					
(22)	· · · · · · · · · · · · · · · · · · ·				 						<u> </u>		
(23)		<u> </u>						-					
(24)			 	_	-	 							
(25)				 		-			<u> </u>		<u> </u> - 		
1b c	Sub-total Total from continuation sheets to Part	VII Section) .n. A	L_		i	i	<u> </u>					
d	Total (add lines 1b and 1c)							>			L		-
2	Total number of individuals (including bu reportable compensation from the organ		to th	ose	list	ed	above	e) w	ho received m	ore than \$100,00	00 of	, , , ,	
3	Did the organization list any former of							emp	oloyee, or high	est compensate	ed [Yes	No
4	employee on line 1a? If "Yes," complete For any individual listed on line 1a, is the							on a	and other comp	pensation from t	3 he		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	organization and related organizations individual	greater th	an \$	150,	,000)? [f "Ye	s, "	complete Sch	nedule J for su	ch 4		 ! √
5	Did any person listed on line 1a receive of for services rendered to the organization		-				-		_	zation or individu	ıal 5		1
Section 1	on B. Independent Contractors Complete this table for your five highest									ed more than \$1		 f	<u> </u>
·	compensation from the organization. Re year												ax
	(A) Name and business add	dress							(B) Description of s	ervices	(C) Compen	sation	
++													
								H					
	Table and a second second	nun der aler d						L					
2	Total number of independent contractive received more than \$100,000 of compensations.) tr	iose listed ab	ove) wno			

Form 990 (2014)

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated business (D) Revenue excluded from tax (B) Related or exempt function (A) Lotal revenue under sections 512 514 revenue Grants and Other Similar Amounts 1a Federated campaigns 1a 1b b Membership dues 17,137 50 Fundraising events 1c С Contributions, Gifts, Related organizations 1d Government grants (contributions) 1e All other contributions gifts grants and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f h 17,137 50 **Business Code** Program Service Revenue 2a b С d All other program service revenue Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) 1,345 06 Income from investment of tax-exempt bond proceeds ▶ 4 5 Royalties (i) Real (ii) Personal Gross rents 46,800 00 6a b Less rental expenses 32,421 73 Rental income or (loss) С 14,378 27 Net rental income or (loss) ď 14,378 27 14,378 27 (ii) Other 7a Gross amount from sales of (i) Securities assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Other Revenue Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 Less direct expenses C Net income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19 Less direct expenses b С Net income or (loss) from gaming activities \blacktriangleright 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a Office Commissions 524113 3,031 57 3,031 57 b Office Commissions 524126 95,651 20 95,651 20 С Salary Reimbursement 524126 15,940 00 15,940 00 All other revenue d Total. Add lines 11a-11d 114,622 77 12 Total revenue. See instructions 147,483 60 17,137 50 129,001 04 1,345 06

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 respons	se or note to any lin		,	
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Lotal expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	!			
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees and key employees	9,925 18			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	76,066 06			
9 10 11	Other employee benefits Payroll taxes Fees for services (non-employees)	6,098 67			
a b	Management Legal				
c d e f g	Accounting Lobbying Professional fundraising services See Part IV line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25 column (A) amount list line 11g expenses on Schedule O)	360.00			
12 13	Advertising and promotion Office expenses	6,260 41 6,349 99			
14 15 16	Information technology Royalties Occupancy	18,368 46			
17 18	Travel Payments of travel or entertainment expenses for any federal state or local public officials				
19 20	Conferences, conventions, and meetings Interest	7,082 41			
21 22 23	Payments to affiliates Depreciation, depletion, and amortization Insurance	12,899 53 7,086 90			
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 b	Federal Income Tax State Income Tax	2,235 13 894 00		+	<u> </u>
c	Rent Expense	4,250 00		ļ	
d	All other evenesses			 	·
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	157,876 74			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if tollowing SOP 98-2 (ASC 958-720)	101,010,11			

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year Cash-non-interest-bearing 28,173 02 21,248 35 Savings and temporary cash investments 121,274 66 116,703 48 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)) persons described in section 4958(c)(3)(B) and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Assets 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 ۵ 2,100 00 2,300 00 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 862,391 87 Less accumulated depreciation | 10b 10c b 191,337 28 Investments -- publicly traded securities 11 11 Investments—other securities See Part IV, line 11 12 12 Investments-program-related See Part IV, line 11 13 13 Intangible assets 14 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 811,306 42 848.401.33 17 Accounts payable and accrued expenses 260 00 17 2,557 50 Grants payable 18 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 600,676 04 629,675 31 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 26 Total liabilities. Add lines 17 through 25 629,935 31 603,233 54 Organizations that follow SFAS 117 (ASC 958), check here and Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets Fund 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 📝 and complete lines 30 through 34. ŏ 30 Capital stock or trust principal, or current funds 30 Assets 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 218,466 02 208,072 88 Set 33 Total net assets or fund balances 218,466 021 33 208,072 88 Total liabilities and net assets/fund balances 848,401 33

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A) line 12)	1		147,4	83 60
2	Total expenses (must equal Part IX, column (A), line 25)	2		157,8	376 74
3	Revenue less expenses Subtract line 2 from line 1	3 '	_	(10,39	93 14)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33 column (A))	4		218,4	66 02
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		_	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line	;			
	33, column (B))	10		208,0	72 88
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			,	, .
				Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain in			
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled or			
	reviewed on a separate basis, consolidated basis, or both				
			0.		
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>
	If 'Yes," check a box below to indicate whether the financial statements for the year were audi separate basis, consolidated basis, or both	ted on a			
_	Separate basis Consolidated basis Both consolidated and separate basis If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for organization.	versiaht			1
¢	of the audit, review, or compilation of its financial statements and selection of an independent acco		2c	İ	
	If the organization changed either its oversight process or selection process during the tax year, e		20		
	Schedule O	лріші і і і			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth in		!	
Ja	the Single Audit Act and OMB Circular A-133?		3a		1
b	If "Yes" did the organization undergo the required audit or audits? If the organization did not und	lerao the			i. ∑ I
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such	_	3b		! !
				99n	(2014)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1515 0047

Open to Public Inspection

Department of the Treasury

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

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

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

If the organization answered "Yes," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Tax) (s	ee separate instructions	s), then			
		organizations Complete Part III			
Name	of organization			Employer ider	itification number
	gee County Farm Burea				73-0770880
Part		the organization is exempt un			organization.
1	Provide a description	of the organization's direct and ind	irect political campa		
2	Political expenditures	•		▶ \$	ı
3	Volunteer hours				
Part	I-B Complete if	the organization is exempt ur	der section 501(c)(3).	
1	Enter the amount of a	any excise tax incurred by the organ	ization under section	n 4955 ► \$	
2		any excise tax incurred by organizat			i
3	If the organization inc	ear?	Yes No		
4a	Was a correction mad	de?			Yes No
b	If "Yes," describe in F				
Part		the organization is exempt ur			(c)(3).
1		rectly expended by the filing orga	nization for section		
_	activities			> \$	
2		the filing organization's funds cont	ributed to other org		
2	527 exempt function	on expenditures. Add lines 1 and	2 Enter here and	► \$	
3	line 17b	on expenditures Add lines i and	2 Enter here and	on rom 1120-rot, ▶ \$	
4		ation file Form 1120-POL for this ye	or?	- 5	☐ Yes ☐ No
				nation 527 political grand	
5		fresses and employer identification in Tyments. For each organization lister	·	, ,	_
		al contributions received that were p			
		ated fund or a political action comm			
-	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization s	(e) Amount of political contributions received and
				funds if none enter 0-	promptly and directly delivered to a separate political organization if none enter -0-
(1)					
(2)					
(3)			-		;
(4)					
 (5)					'
					ļ
(6)			-1	İ	

S	omplete if the organizati ection 501(h)).	on is exempt u	nder section 50	1(c)(3) and filed	l Form 5768 (elec	stion under
A Check ▶ .						
	If the filing organization b					up member's
_	name, address, EIN, exp					
B Check ► L	if the filing organization of			ol" provisions a	bblă	
		bbying Expenditu		i	(a) Filing organization's totals in	(b) Affiliated group totals
	(The term "expenditures"					group totals
	bying expenditures to influence		•			
	bying expenditures to influent	_	dy (direct lobbying)		
	bying expenditures (add lines	1a and 1b)				
	empt purpose expenditures					
	mpt purpose expenditures (a		•			
f Lobbying columns	nontaxable amount Ente	r the amount fro	om the following	table in both		
If the amou	unt on line 1e, column (a) or (b)	ıs. The lobbying i	nontaxable amount	IS		
Not over \$5	500,000	20% of the am	ount on line 1e		[
Over \$500,	,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000		
Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000		
Over \$1 50	00 000 but not over \$17 000 000	\$225,000 plus	5% of the excess ov	rer \$1 500,000		
Over \$17,0	000,000					
g Grassroo	ts nontaxable amount (enter	25% of line 1f)				· · · · · · · · · · · · · · · · · · ·
h Subtract	line 1g from line 1a. If zero oi	less, enter -0-				
	line 1f from line 1c If zero or					
	s an amount other than ze section 4911 tax for this yea		1h or line 1i, did	the organization	file Form 4720	Yes No
(Some o	organizations that made a s	section 501(h) ele	Period Under sect ction do not have uctions for lines 2	to complete all	of the five column	s below.
	Lobbyi	ng Expenditures	During 4-Year Av	eraging Period		
Calend	lar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying	nontaxable amount					
, ,	g ceiling amount f line 2a, column (e))					
c Total lobi	bying expenditures				 	······································
d Grassroo	ots nontaxable amount					
					[
	ots ceiling amount f line 2d, column (e))					

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)).	led l	Form	5768
For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(6	3)	(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			
а	Volunteers?	,	,	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?			
d	Mailings to members, legislators, or the public?		<u> </u>	
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?		' ; 	
9	Direct contact with legislators their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
1	Other activities?		 -	
J 0-	Total Add lines 1c through 1i		! ⊦	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912		-	
b b	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	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), (or sec	tion
			-	Yes N
1	Were substantially all (90% or more) dues received nondeductible by members?			1 /
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 /
3 Part	Did the organization agree to carry over lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), (or sec	tion v
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."			
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of		
а	Current year		2a	
b	Carryover from last year		2b	
С	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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby			
_	and political expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
Par	Supplemental Information le the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated groups)	un lie	t) Dod	II A lines 1 a
	instructions), and Part II-B, line 1. Also, complete this part for any additional information	ир на	ы, ган	il-A, ilies i a
•				
•				
-				

Part IV	Suppler	nental information (continued)
-		
	-	
	-	
	- <u>-</u>	
	-	
	-	· · · · · · · · · · · · · · · · · · ·
		······································
		· · ··· · · · · · · · · · · · · · · ·

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990

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

2014

Open to Public Inspection

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Name o	f the organization		Employer identification number
<u>)km</u> ul	gee County Farm Bureau		73-0770880
Par		vised Funds or Other Similar Fund	
	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	1	
5	Did the organization inform all donors and donor funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a	ů ů	
Ū	only for charitable purposes and not for the bene conferring impermissible private benefit?	9 9	
Par	Conservation Easements.		
	Complete if the organization answered	"Yes" to Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recrea		a historically important land area
	Protection of natural habitat	_	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contribution	n in the form of a conservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easemen	ts	2b
С	Number of conservation easements on a certified		2c
d	Number of conservation easements included in	(c) acquired after 8/17/06, and not compared to the compared t	on a
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, trans	sferred, released, extinguished, or term	inated by the organization during the
	tax year ►		
4	Number of states where property subject to conse	ervation easement is located >	
5	Does the organization have a written policy reviolations, and enforcement of the conservation ea		pection, handling of
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation e	
_	>	, 3,	J - 7
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easer	ments during the year
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	e 2(d) above satisfy the requirements of .	section 170(h)(4)(B)(i) - 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		
	organization's accounting for conservation easem	ents	
Part	III Organizations Maintaining Collection	is 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 SF	AS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other similar	r assets held for public exhibition, edi	ucation, 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 Sworks of art, historical treasures, or other similar while seems are under the following amounts relative	r assets held for public exhibition, ed	
	public service, provide the following amounts rela	ung to these items	
	(i) Revenue included in Form 990, Part VIII, line 1		\$
_	(ii) Assets included in Form 990, Part X	L brokement trees as a second	\$
2	If the organization received or held works of an following amounts required to be reported under states.		.
а	Revenue included in Form 990, Part VIII, line 1		▶ \$
h	Assets included in Form 990, Part X		> \$

Part 3	Organizations Maintaining Using the organization's acquisition						
3	collection items (check all that apply)	accession and o		,		J	significant use of its
а	Public exhibition			oan or exchang	ge progr	rams	
	Scholarly research		e 🗀 C	Other			-
С	[] Preservation for future generations						
4	Provide a description of the organization XIII	tion's collections	and explain h	ow they further	the org	anization's exe	empt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather						ılar
Part							[] [C3 [_;, 140
	Complete if the organization 990, Part X, line 21		" to Form 99	0, Part IV, line	9, or r	eported an a	mount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?	, custodian or oti	ner intermedia	ry for contribut	tions or	other assets	not ☐ Yes ☐ No
b	If "Yes," explain the arrangement in \ensuremath{P}	art XIII and compl	ete the followi	ng table			
							Amount
С	Beginning balance				1c		
d	Additions during the year				1d		
е	Distributions during the year				1e	·	
f	Ending balance				11		
2a b	Did the organization include an amount if 'Yes' explain the arrangement in P						ty? ↓ Yes ↓ No
Pari		art Aill Check hel	e ii the explar	iation has been	provide	SO III FAIT AIII	
	Complete if the organization	answered "Yes	" to Form 99	0. Part IV. line	10		
		(a) Current year	(b) Prior yea			(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance						
b	Contributions				t		
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities and programs						
f	Administrative expenses						
g	End of year balance	 	 				
2							
а	Board designated or quasi-endowme		%				
b	Permanent endowment ►	%					
С							
	The percentages in lines 2a, 2b, and 2	2c should equal 1	00%				
3a	Are there endowment funds not in th organization by	e possession of t	he organizatio	n that are held	and ad	ministered for	Yes No
	(i) unrelated organizations						3a(ı)
	(ii) related organizations						3a(ıi)
b	If "Yes" to 3a(ii), are the related organ	izations listed as	required on Sc	chedule R?			3b
4	Describe in Part XIII the intended uses	s of the organizati	on's endowme	ent funds			
Part							
	Complete if the organization	answered "Yes	" to Form 99	0, Part IV, line	e 11a S	See Form 990	, Part X, line 10
	Description of property	(a) Cost or c		Cost or other basis (other)		Accumulated epreciation	(d) Book value
1a	Land			86,884 04			86,884 04
b	Buildings			763,638 10		179,640 59	583,997 51
С	Leasehold improvements						
d	Equipment			11,869 73		11,696 69	173 04
е	Other						
Total.	Add lines 1a through 1e (Column (d) r	nust equal Form 9	990, Part X, co	lumn (B), line 1	Oc) .	. ▶	671,054 59

Part VII	Investments - Other Securities.			
	Complete if the organization answered "Yes" to Fo	orm 990, Part IV, line	11b See Form 9	90, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value		od of valuation If year market value
(1) Financial	derivatives			
(2) Closely-h	neld equity interests			
(3) Other				
(A)				
(8)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.) ▶			
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" to Fo	orm 990, Part IV, line	11c See Form 9	90, Part X, line 13
	(a) Description of investment	(b) Book value		od of valuation f-year market value
(1)				
(2)				
(3)				
(4)			<u> </u>	
(5)				
(6)				
(7)				
(8)				
(9)		-		·
	b) must equal Form 990, Part X-col-(B) line 13) ▶	- 		·- ·- ·- ·- · · · · · · · · · · · · · ·
Part IX	Other Assets.			
	Complete if the organization answered "Yes" to Fo	orm 990 Part IV, line	11d See Form 9	990, Part X, line 15.
(1)	(2, 1111			(-,
(1)				
(3)				
(4)				
(5)				
(6)			· · · · · · · · · · · · · · · · · · ·	
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 15)		>	
Part X	Other Liabilities. Complete if the organization answered "Yes" to Fo	orm 990. Part IV. Iraa	110 or 11f Soo	Form 000 Part V
	line 25	onn 550, i ait iv, iille	i is or i ii. see	i onii 330, r all A,
1.	(a) Description of liability (b) Book value	;		
(1) Federal in				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(h) must so yel form 000 Ond V 1 /011 05 1 h			
	(b) must equal Form 990, Part X col (B) line 25) ▶			
	r uncertain lax positions. In Part XIII provide the text of the foc s liability for uncertain tax positions under FIN 48 (ASC 740). C			

	Marie Control Control	A- MACAL D	D-4	<u></u>
Pari			per Return.	
	Complete if the organization answered "Yes" to Form 990			
1	Total revenue, gains and other support per audited financial statemen	is	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	i 2a		
a	Net unrealized gains (losses) on investments	2b		
b	Donated services and use of facilities Recoveries of prior year grants	2c		
c d	Other (Describe in Part XIII)	2d	 	
e	Add lines 2a through 2d .	20		
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, III	ne 12)	5	
Part	XII Reconciliation of Expenses per Audited Financial State		s per Return.	
	Complete if the organization answered "Yes" to Form 990		•	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	line 10 \	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I,	ine ro)	5	
Part	Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a	and 4 Part IV lines 1h ar	od 2h Part V line 4	Dart Y line
	t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part XII.			art A, mic
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Schedule D (For	
Part XIII	Supplemental Information (continued)
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SGHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Okmulgee County Farm Bureau

► Attach to Form 990 or 990-EZ.

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

Employer identification number 73-0770880

The Organization does not have stockholders but it does have members. There are two types of members. One is an Associate
member and the other is a Voting member. An Associate member includes someone who runs or operates a farm but whose average
gross agricultural income is less than half their total income. An Associate member also includes someone working in Agribusiness.
Someone who is not directly related to Agriculture is an Associate member. Lastly, an Associate member can hold their membership.
through a church, FFA chapter, an association, or by a corporation not producing agricultural products. A Voting member can be a family
that gets the majority of its average gross income from the sale of agricultural products. A Voting member can also be held by a retired
agricultural person living on an income or social security accrued and not employed full time in another occupation. A Voting member
can also be held by a partnership or corporation receiving the majority of income from the sale of agricultural products
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