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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.lrs.gov/form990.

Open to Public Inspection

<u>A</u>	For th	e 2014 calendar year, or tax year beginning NOV 1, 2014 and c	enaing (CT 31, 20.	15					
В	Check if applicab	C Name of organization		D Employer ider	ntification number					
	Addre	Phillips County Farm Bureau								
	Name			71-0245792						
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone nun	nber					
	Final	P.O. Box 2429		870	<u>0-572-4099</u>					
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	180,090.					
	Amen	ded West Helena, AR 72390		H(a) Is this a grou						
	Appli	F Name and address of principal officer.MIRE RIGI		for subordina	ates? Yes X No					
_	Pendi	ng same as C above		H(b) Are all subordina	tes included? Yes No					
		empt status 501(c)(3) 501(c)(5) < (insert no.) 4947(a)(1) o	or 527	If "No," attac	h a list (see instructions)					
		te:▶ www.arfb.com/phillips		H(c) Group exemp						
		forganization: X Corporation Trust Association Other	L Year	of formation: 196	4 M State of legal domicile: AR					
P	art I	Summary								
ģ	1	Briefly describe the organization's mission or most significant activities. Agric	cultur	<u>al Promot:</u>	ion					
Activities & Governance										
Ę	2	Check this box If the organization discontinued its operations or dispos	ed of more	than 25% of its ne						
Š	3	Number of voting members of the governing body (Part VI, line 1a)			3 21					
<u>م</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)		-	4 21					
ies	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		.	5 3					
Ζį	6	Total number of volunteers (estimate if necessary)			6 3 22					
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	•		7a 138,719.					
_	b	Net unrelated business taxable income from Form 990-T, line 34			7b 6,064.					
Revenue			<u> </u>	Prior Year 3.5	Current Year					
	8	Contributions and grants (Part VIII, line 1h)		Minn -	0.					
	9	Program service revenue (Part VIII, line 2g)		3.2,-0.4(
Ŗ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	2,320						
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	,	148,75						
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		183,113						
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,040							
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>		0.					
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	95,90						
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	,	······	0.					
X	Ь	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>	EA 011	70 477					
	17	Other expenses (Part IX, column (A), lines 11a·11d, 11f-24e)	<u> </u>	54,012						
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	 - -	150,959						
	19	Revenue less expenses Subtract line 18 from line 12		32,152						
Net Assets or Fund Balances		T. I (D. 1) I (D)	Ве	ginning of Current Ye						
SSE	20	Total assets (Part X, line 16)	-	666,534 14,716						
e te	21	Total liabilities (Part X, line 26)		651,818						
	22 art II	Net assets or fund balances Subtract line 21 from line 20 Signature Block		031,610	004,024.					
		alties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents and to the hest of	of my knowledge and helief it is					
		ct, and complete. Declaration of preparer (other than officer) is based on all information of wh			ir my knowledge and belief, it is					
tiue	, corre	and complete. Declaration of prepare (other than officer) is based on an information of win	ion proparci	nas any knowicage.						
Sig	n	Signature of officer		Date	1 1 1					
He		Brian Thomas U.P.		\mathscr{L}	1-25-16					
110		Type or print name and title								
		Print/Type preparer's name Preparer's signature	[Date Check	PTIN					
Pai	d	Sherry Chesser, CPA Secus Chica	у ц. (2-10-16 if self-en	100 P00174819					
	parer	Firm's name Thomas & Thomas LLP		Firm's EIN						
	Only	Firm's address 201 E. Markham, Suite 500								
	,	Little Rock, AR 72201		Phone no.5	501-375-2025					
Ma	v the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No					

Form 990 (2014)

	1990 (2014) Phillips County Farm Bureau	<u>71-0245792</u>	Page 2
Рa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part !!!		
1	Briefly describe the organization's mission		
	Agricultural Promotion		
			
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	LX No
_	If "Yes," describe these new services on Schedule O.	<u> </u>	[]
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L;Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	• •	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	's, the total expenses, a	and
_	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ including grants of \$) (Revenue Countries \$))
	County Farm Bureau work is general in nature, helping fa		
	achieve educational improvements, economic opportunity,	and social	
	advancement.		
			
			
			
			
4b	(Code) (Expenses \$ including grants of \$) (Revenue	• \$)
			
			
4.	10	- 0	
4c	(Code) (Expenses \$) (Revenue	,\$	
			
			
			
			
			
			
	Other program services (Describe in Schedule O.)		
4d	Other program services (Describe in Schedule O) (Expenses \$) (Revenue \$)	1	
40	Expenses \$ including grants of \$) {Revenue \$		

Form **990** (2014)

Form 990 (2014) Phillips County Farm Bureau
Part IV Checklist of Required Schedules

1 is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2 is the organization inequired to complete Schedule B, Schedule of Contributions? 3 Did the organization required to complete Schedule B, Schedule C, Part II 4 Section 501(c)(3) organizations. Did the organization required to the organization required to the organization required to the organization required to provide schedule C, Part II 5 is the organization as often of 91(c)(4), 501(c)(5), or 501(c)(6) (organization that receives membership dues, assessments, or similar area of the organization as defined in Review Provides and 9419 If "Yes," complete Schedule C, Part II 5 is the organization associan 501(c)(4), 501(c)(5), or 501(c)(6) (organization that receives membership dues, assessments, or similar area organization associan 501(c)(4), 501(c)(5), or 501(c)(6) (organization that receives membership dues, assessments, or similar section of the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 6 Did the organization maintain any idenor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of whose distributions of vives of arth, historical treatives, or other similar assess? If "Yes," complete Schedule D, Part II 8 Did the organization distribution or investments of a fund or accounts of tisted in Part X, in or provide cord organization, hold assets in temporarily restricted endowments, permanent andowments, or quasiendowments? If "Yes," complete Schedule D, Part V II 1 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V II 2 Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V II 3 Did the organization's answer to any of the following questions is "Yes," the part V III is 10 that organization's account of the part V III is 10 (Fig. Yes," C					
If Yes, *complete Schedule In complete Schedule B, Schedule of Contributions* If the organization required to complete Schedule B, Schedule of Contributions* A				Yes	No
2 Is the organization required to complete Schedule 8, Schedule 6 Contributions? Did the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 50 (19(3) organizations. Did the organization engage in lobbying activities, or have a section 501(ii) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization assection 501(ii) 50 (51) (51) or 501(ii) 6) organization that receives membership dues, assessments, or similar amounts as defined in Neveruse Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or account's If "Yes," complete Schedule O, Part II Did the organization did a maintain any donor advised funds or any similar funds or account's If "Yes," complete Schedule O, Part II Did the organization maintain collections of works of art, instoncal treasures, or other similar assets If If "Yes," complete Schedule O, Part III Did the organization maintain organization assets in the organization maintain organization and the part X, ine 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 12 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 12 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 12 for escrow or custodial account liability; serve as a custodian for amounts for liability and the maintain part X, ine 13 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, ine 12 for the organization director or director and the organization and the organization and the organization organization and the organization and the organization and the organiz	1		Ì		
3 Dut the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public offered if "Ves," complete Schedule C, Part II 5 is the organization as section 501(b)(8), 501(b)(8), 501(b)(8), or 501(b)(8) organization that receives membership dues, assessments, or amiliar amounts as defined in Revenue Procedure 98:191 if "Ves," complete Schedule C, Part II 5 is the organization markinal any donor advested funds or any semilar 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 II 5 Dut the organization markinal any donor advested funds or any semilar funds or accounts? If "Yes," complete Schedule D, Part II 5 Dut the organization receive or hold a conservation easement, including assements to preserve open appace, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 6 Dut the organization report an amount or Part X, line 21, for section or custodial account liability; serve as a custodian for amounts not listed in Part X, ior provide circidit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 7 Dut the organization is answer to introducing assessing the program patients of the securities in Part X, line 10; If "Yes," complete Schedule D, Part IV 8 Dut the organization report an amount for land, buildings, and equipment in Part X, line 10; If "Yes," complete Schedule D, Part IVI 8 Dut the organization report an amount for investments: program plated in Part X, line 10; If "Yes," complete Schedule D, Part XI 9 Dut the organization report an amount for other assets 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 XI 11d X 11d X 12d Off the organization organization organization investments: program plated in Part X, line 12; that is 5% or mor	_				
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4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If Yes, "complete Schedule C, Part III 15. It be organization as 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 98-197 If Yes, "complete Schedule C, Part III 16. Did the organization reserved in vives in the organization reserved in the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment or accounts for which donors have the right to provide advice on the distribution or investment in such funds or accounts for which donors have the right to provide advice on the distribution or investments as the environment, historic land areas, or historic structures? If Yes, "complete Schedule D, Part III III III III III III III III III I	3	· · · · · · · · · · · · · · · · · · ·			
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13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b Dif "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	U		12b		Х
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b if "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		·			
					Λ_
	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		990 /	2014

Form 990 (2014) Phillips County Farm Bureau
Part IV Checklist of Required Schedules (continued)

			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	ļ	X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	ĺ		ĺ
_	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			.,
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	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,"			3.7
	complete Schedule L, Part II	26		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 family member	0.7		v
	of any of these persons? If "Yes," complete Schedule L, Part III	27		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).	000		Х
a	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		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	-	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
30	contributions? If "Yes," complete Schedule M	30	1	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	00		
٠.	If "Yes," complete Schedule N, Part I	31		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	32		X
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		X
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		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	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		
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	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2014)

Form Par	990 (2014) Phillips County Farm Bureau t V Statements Regarding Other IRS Filings and Tax Compliance	71-0245	792	Р	age 5
1 41	Check if Schedule O contains a response or note to any line in this Part V				_
	Officer in Controlled Contrains a response of ficte to arry line in this rate v			Τ	لبا
	Followiths a substance studies Do. O of Fo. or 4000 Feb. O. C. A. A. Albertia	1.1		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter ·0 ·if not applicable	1a 2	1		
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	<u> 1b </u>	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming	١.	7.2	
_	(gambling) winnings to prize winners?	i 1	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	,	ĺ	[[
	filed for the calendar year ending with or within the year covered by this return	2a 3	ł		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		_2b_	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	S)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		_3a_	X	ļ
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	•			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
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 A	ccounts (FBAR)			
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	iction?	5b		X
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	ne 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 contribut	ions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		Ĺ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?	I I	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti		_7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file February		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		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?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter	1 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		' I	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	1 1			
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			J	
	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.		ļ		
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				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1 1			
	organization is licensed to issue qualified health plans	13b			
С	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 Schedul	e O	_14b		

Form 990 (2014) Phillips County Farm Bureau 71-0245792 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 21									
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent 21									
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?									
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?									
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X						
6	Did the organization have members or stockholders?	6	X							
7a	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?	7a	х							
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	х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	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						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)									
-			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
b	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?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
	a 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?	12b	X							
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	_x_							
13	Did the organization have a written whistleblower policy?	13		X						
14	Did 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?									
а	The organization's CEO, Executive Director, or top management official	15a		X						
b	Other officers or key employees of the organization	1 <u>5</u> b		<u> </u>						
	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		<u> </u>						
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								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ► None									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le							
	for public inspection. Indicate how you made these available Check all that apply									
	Own website Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial							
	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 🕨									
	The Organization - 870-572-4099									
	P.O. Box 2429, West Helena, AR 72390									

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Phillips County Farm Bureau

1-0245792

Page 7

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	/do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both a		h an	compensation	compensation	amount of		
	week		officer and a director/trustee)		(tee	from	from related	other		
	(list any	ndwdual trustee or director						the	organizations	compensation
	hours for related	b or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ruste	l trus	i ,	9	uben u		(44-2/1099-141130)		and related
	below	dual t	Institutional trustee	_	Key employee	o st co				organizations
	line)	indra	Instit	Officer	Key e	Highest compensated employee	Р отшег			3
(1) Mike Rial	0.50									
President		Х		X			L	0.	0.	0.
(2) Brian Thomas	0.50									
Vice President	l	X		X				0.	0.	0.
(3) Steve Toney	0.50								_	
Secretary/Treasurer		Х	<u>_</u>	X		ļ		0.	0.	0.
(4) Kyle Cannon	0.50							_	_	_
Member		X					_	0.	0.	0.
(5) Chris Carnathan	0.50									
Member		X			<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(6) Allen Culp	0.50	١							•	•
Member	2 52	X		L	ļ	├-		0.	0.	0.
(7) Winston Foster	0.50	ł			İ				•	•
Member		X			├	├-	├	0.	0.	0.
(8) Kaleb Hall	0.50	l				l	ł			0
Member	0.50	X	_			-	-	0.	0.	0.
(9) Phil Hall	0.50									0
Member	0.50	X			-	├-	-	0.	0.	0.
(10) Kenny Holt	0.50						İ	_		•
Member	0.50	X	_			-	<u> </u>	0.	0.	0.
(11) Jim Hubbard	0.50	١.,				ĺ			•	•
Member	0.50	X				-	-	0.	0.	0.
(12) Gary Inman	0.50	, ,							0.	0
Member	0.50	X				├-		0.	0.	0.
(13) Elbert Jackson	0.50	X				1		0.	0.	0.
Member	0.50	_^	-		-	┝	-			<u></u>
(14) Gene Johnson	0.50	x						0.	0.	0.
Member	0.50	₽		_	-	┢╌			0.	<u> </u>
(15) James Lawrence	0.50	x					ļ	0.	0.	
Member	0.50	_	-		├-	┢	-	0.		<u> </u>
(16) Ronnie Loeschner	0.30	X						0.	0.	0.
Member (17) Wiles Work something	0.50	^			-	\vdash	 		<u> </u>	
(17) Mike Montgomery	0.50	x						0.	0.	0.
Member 422007 11-07-14		43						<u> </u>	<u></u> .	Form 990 (2014)

Part VII Section A. Officers, Directors, Tr (A)	(B)		(C)					(D)	(E)			(F)	
Name and title	Average hours per week	box	not c , unle	Pos heck ss pe	more erson	than is bot	th an	Reportable compensation from	Reportable compensation from related	on		stimat nount other	of
	(list any hours for	director	-					the	organization		I	pensa	
	related	ee or d	stee			nsated		organization (W-2/1099-MISC)	(W-2/1099-MI	SC)	i	om th	
	organizations below	al trus	onal tr.		loyee	E 2			l		1	d relat	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former) :		orga	anızatı	ions
(18) Frank Polk Member	0.50	x						0.		0.			0.
(19) Joey Quinn	0.50	1	1	 		-		-	_	<u> </u>			
Member		X			ļ			0.		0.	<u> </u>		0.
(20) Brian Stoner	0.50	·						0		^			٥
Member (21) Leslie Turner	0.50	X			-	-	-	0.		0.	<u> </u>		0.
Member Turner	0.50	x					L	0.		0.			0.
		-								_	. _		
		-											
									-				<u> </u>
						_							
1b Sub-total		<u> </u>	L			l	▶	0.		0.			0.
c Total from continuation sheets to Part	VII, Section A						•	0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	0.	L	0.	L		0.
2 Total number of individuals (including bu compensation from the organization	t not limited to th	nose	liste	ed al	bove	e) wh	no re	eceived more than \$100	,000 of reportab	le			0
compensation from the organization				-			-				_	Yes	No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J fo			e, ke	y er	nplo	yee	, or I	highest compensated ei	mployee on		3		х
4 For any individual listed on line 1a, is the and related organizations greater than \$									the organization		4		х
5 Did any person listed on line 1a receive of							elate	ed organization or indivi	dual for services				
rendered to the organization? If "Yes," co	omplete Schedul	<u>e J f</u>	or s	uch	pers	<u>son</u>	_				5		X
Complete this table for your five highest	compensated in	depe	ende	nt c	ontr	acto	ors t	hat received more than	\$100,000 of com	npens	ation f	rom	
the organization Report compensation f	or the calendar y	ear	end:	ng v	vith	or w	ıthın		/ear				
(A) Name and busine	ss address	N	INC	<u> </u>				(B) Description of s	ervices	С	(Compe		n
			-										<u> </u>
							-				<u></u>		
	·						-			_			
2 Total number of independent contractors	s (including but r	not lu	mite	d to	tho	se le	sted	above) who received m	ore than				
\$100,000 of compensation from the orga	-					0							
											Form 9	990 c	2014)

تــــــــــــــــــــــــــــــــــــــ		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
			<u> </u>	S. Hoto to diff in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
इइ	1 a	Federated campaigns	1a					
ou a	ь	Membership dues	1b					
A P	С	Fundraising events	1c					
	d	Related organizations	1d					
S,E	е		ions) 1e					
is S	f	All other contributions, gifts, gran	ts, and					
호		similar amounts not included abo	ve 1f					
물의	g	Noncash contributions included in lines	1a-1f \$					
<u> </u>	h	Total. Add lines 1a-1f						
l				Business Code				
8	2 a	Membership Dues	<u> </u>	110000	32,132.	32,132.		
او ڲٙ	b							
\(\frac{1}{2} \)	С				·			
e a	d		_ _					<u> </u>
9	е							<u> </u>
ਕ	f	All other program service reve	enue				··	
		Total. Add lines 2a-2f	<u> </u>		32,132.			
	3	Investment income (including	dividends, interes	est, and				
l		other similar amounts)		▶	2,093.			2,093.
	4	Income from investment of ta	x-exempt bond p	proceeds 🕨				
ļ	5	Royalties		<u>, </u>	2,946.			2,946.
			(i) Real	(ii) Personal				
	6 a		4,200.					
	b	•	0.					1
	С	, ,	4,200.	L	4 200			4 200
		Net rental income or (loss)		P	4,200.		 .	4,200.
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory		 				
	b	Less: cost or other basis						
		and sales expenses						
ĺ		Gain or (loss)	L					
		Net gain or (loss)	a avanta (nat					
ᇍ	ва	Gross income from fundraisin including \$	g events (not of	1	ĺ			
er Revenue		contributions reported on line						
<u>~</u>		Part IV, line 18	а	1	·			
Ē	b		b					
Other Revenu		Net income or (loss) from fund	_	—		ļ		
		Gross income from gaming ac	_					
		Part IV, line 19	а	1				
	b	Less direct expenses	b			l		
		Net income or (loss) from gam	ning activities	•				
l		Gross sales of inventory, less	-					
		and allowances	а					
	b	Less, cost of goods sold	b					
		Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenu	10	Business Code				
	11 a	Insurance Servi	ce Fees	524298	138,719.		138,719.	<u> </u>
	b						<u></u> ,	
	С							
	d	All other revenue					.	ļ
	е	Total. Add lines 11a-11d		>	138,719.		120 510	
	12	Total revenue See instructions.			180,090.	32,132.	138,719.	9,239.

Form 990 (2014) Phillips County Farm Bureau
Part IX Statement of Functional Expenses

Secu	ion 50 (c)(3) and 50 (c)(4) organizations must comp			ompiete column (A).	
_	Check if Schedule O contains a respons	(A)	(B)	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,390.			
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			1	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
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	Other salaries and wages	85,732.			
8	Pension plan accruals and contributions (include				<u></u>
	section 401(k) and 403(b) employer contributions)	2,579.			
9	Other employee benefits				
10	Payroll taxes	7,106.			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	600.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	3,963.			
13	Office expenses	18,719.			
14	Information technology				
15	Royalties				
16	Occupancy	20,722.	<u> </u>		
17	Travel			ļ	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,281.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,586.			
23	Insurance	986.			
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 0.)				
		F 275			
	Youth and Safety	5,275.			
	Other Taxes	4,002.		<u> </u>	
	Miscellaneous Dues	150.			
		150.	 	 	
	All other expenses Total functional expenses Add lines 1 through 24e	167,284.			
<u>25</u> 26	Joint costs. Complete this line only if the organization	107,204.			
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Phillips County Farm Bureau Form 990 (2014) 71-0245792 Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 340 340. Cash - non-interest-bearing 499,820. 521,864. Savings and temporary cash investments 2 2 Pledges and grants receivable, net 3 3 237. 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 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 instr) Complete Part II of Sch L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 328,825. 10a 172,781. 165,629. 156,044. 10b b Less accumulated depreciation 10c 11 Investments - publicly traded securities 11 12 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 745. 745. 15 15 Other assets See Part IV, line 11 666,534. 679,230. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 <u>1,997</u>. 2,162. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 12,719. 12,444. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21

24 Unsecured notes and loans payable to unrelated third parties 24 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 25 Schedule D 14,716. 14,606. 26 Total liabilities. Add lines 17 through 25 26 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 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here

Loans and other payables to current and former officers, directors, trustees,

key employees, highest compensated employees, and disqualified persons

Secured mortgages and notes payable to unrelated third parties

and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds

651,818. 664,624. 32 651,818. 664,624. Total net assets or fund balances 666,534. 679,230. Total liabilities and net assets/fund balances

0.

0.

22

23

29

30

31

0.

0.

Net Assets or Fund Balances

30

31

32

33

22

23

Complete Part II of Schedule L

<u>-orm</u>	1990 (2014)Phillips County Farm Bureau	/ 1_	-0245/92	Pag	je 12
Pa	rt 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	180	0,09	90.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16'	7,28	84.
3	Revenue less expenses. Subtract line 2 from line 1	3	12	2,80	06.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	651	L,8:	18.
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			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	664	1,62	2 4 .
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other]]		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	[]		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u> _
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both		1 1	ĺ	
	Separate basis Consolidated basis Both consolidated and separate basis				
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 audited on a separate	e basis	,		
	consolidated basis, or both			ļ	
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt	,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C)		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit		
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (2	2014)

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 Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

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

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

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

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

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

• s	ection 50)1(c)(4), (5), or (6) organizat	ons: Complete Part III			
	of organ				Empl	loyer identification number
		Phillip		71-0245792		
Par	t I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 o	rganization.
			ation's direct and indirect politic		ın Part IV	
		•			- Ψ	· —————
3	Voluntee	rnours				
Par	t I-B	Complete if the org	anization is exempt und	ler section 501(c)		
		-	ncurred by the organization und		> \$	
2 1	Enter the	amount of any excise tax	5 ▶\$			
3	lf the org	anization incurred a sectio		Yes No		
4a \	Was a co	rrection made?				Yes No
<u>b</u> '		describe in Part IV				
Par	t I-C	Complete if the org	anization is exempt und	ler section 501(c)	, except section 501(c)(3).
1	Enter the	amount directly expended	by the filing organization for se	ction 527 exempt func	tion activities > \$	
2	Enter the	amount of the filing organ	zation's funds contributed to of	her organizations for se		
(exempt f	unction activities			▶\$	
3	Total exe	mpt function expenditures	Add lines 1 and 2. Enter here a	and on Form 1120-POL		
1	line 17b				▶\$	
4	Did the fi	ling organization file Form	1120-POL for this year?			Yes No
5	Enter the	names, addresses and en	ployer identification number (El	N) of all section 527 pc	olitical organizations to whic	h the filing organization
1	made pa	yments For each organiza	tion listed, enter the amount pai	d from the filing organi	zation's funds. Also enter th	e amount of political
	contribut	ions received that were pro	emptly and directly delivered to	a separate political org	anization, such as a separa	te segregated fund or a
1	political a	ction committee (PAC) If	additional space is needed, prov	ide information 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 and promptly and directly delivered to a separate political organization If none, enter -0-
			-			
						

Part II-A Complete if the organizat				ed Form 5768 (0245/92 Page 2 election under
section 501(h)).		•			
A Check ► if the filing organization belo	ngs to an affi	liated group (and list in	n Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share of exce	ess lobbying	expenditures)			
B Check > if the filing organization chec	ked box A a	nd "limited control" pro	ovisions apply		
Limits on Lo (The term "expenditures")	(a) Filing organization's totals	(b) Affiliated group totals
			<u></u>		
1a Total lobbying expenditures to influence pu		-	}		
b Total lobbying expenditures to influence a I	-	dy (direct lobbying)	<u> </u>		
c Total lobbying expenditures (add lines 1a a	nd 1b)		<u> </u>		
d Other exempt purpose expenditures		.	-		
e Total exempt purpose expenditures (add lir			h		
f Lobbying nontaxable amount. Enter the am		· · · · · · · · · · · · · · · · · · ·			
If the amount on line 1e, column (a) or (b) is:		bying nontaxable am			
Not over \$500,000	 -	the amount on line 1e 00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,000,000	 	00 plus 10% of the exc			
Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000		00 plus 5% of the exce			
Over \$17,000,000	\$1,000		33 0401 \$1,500,000		
Over \$17,000,000	<u>η ψη,ουο,</u>				
g Grassroots nontaxable amount (enter 25%	of line 1f)				
h Subtract line 1g from line 1a If zero or less,	•				
i Subtract line 1f from line 1c. If zero or less,					
i If there is an amount other than zero on eith		line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this year?					Yes No
		eraging Period Under			
(Some organizations that made So		01(h) election do not ate instructions for li		f the five columns t	pelow.
Lot	bying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in) (a	2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount		ĺ			
(150% of line 2a, column(e))					<u> </u>
		1			
c Total lobbying expenditures					
d Grassroots nontaxable amount		1	.		
e Grassroots celling amount		-	 		
(150% of line 2d, column (e))		1			

Schedule C (Form 990 or 990 EZ) 2014 Phillips County Farm Bureau 71-0245792 Page 3

[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)).

or each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
f the lobbying activity.	Yes	No	Amo	ount
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			i	
or referendum, through the use of	1			
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 similar means?				
i Other activities?				
j 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)?				
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), sect 501(c)(6).	ion 501(c)	(5), or se	ection	
001(0)(0).			Yes	N
1 Were substantially all (90% or more) dues received nondeductible by members?		1	x -	
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		1	X x	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		2 3 (5), or se	X	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		2 3 (5), or se R (b) Par	X	
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members 	d "No," OF	2 3 (5), or se	X	
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures) 	d "No," OF	2 3 (5), or se R (b) Par	X	
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SCHEDULE D

Department of the Treasury

Internal Revenue Service

(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.lrs.gov/form990.

Open to Public Inspection

Name of the organization

Phillips County Farm Bureau

Employer identification number

71-0245792 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 Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 tax year. Held at the End of the Tax Year 2a a Total number of conservation easements Total acreage restricted by conservation easements 2b 2c Number of conservation easements on a certified historic structure included in (a) d 'Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 year 🕨 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? 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 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) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		s County F								2 Page 2
Par	t III Organizations Maintaining C									
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following tha	t are a sig	nificant L	use of its	collection	items
	(check all that apply)									
а	Public exhibition	c	, <u> </u>	Loan or exc	hange progra	ams				
b	Scholarly research	•	• 🗌	Other						
C	Preservation for future generations									
4	Provide a description of the organization's continuous	ollections and explai	ın how ti	ney further t	he organization	on's exem	pt purpo	se in Par	t XIII	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or othe	er sımılar a	ssets		_	
	to be sold to raise funds rather than to be m	aintained as part of	the orga	nızatıon's co	ollection?				Yes	No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered '	'Yes" to Fo	orm 990,	Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	sets not in	cluded	_	_	
	on Form 990, Part X?							<u> </u>	」Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						_ 1f			
	Did the organization include an amount on F	•				-	/?	L.	」Yes	∐ No
	If "Yes," explain the arrangement in Part XIII									Щ
Par	t V Endowment Funds. Complete	if the organization ar			T					
		(a) Current year	(b) F	rior year	(c) Two year	s back (d) Three ye	ears back	(e) Four	years back
1a	Beginning of year balance		-							
b	Contributions .				ļ					
С	Net investment earnings, gains, and losses									
d	Grants or scholarships			<u>-</u>						
e	Other expenditures for facilities		ł		1	1			}	
	and programs									
f	Administrative expenses				ļ. 		- <u>-</u> .	<u>-</u>		
g	End of year balance	L	<u></u>						<u> </u>	
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as.					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c should									
За	Are there endowment funds not in the posse	ession of the organiz	ation the	at are held a	ınd admınıste	red for the	organiza	ation	_	
	pà.									<u>Yes No</u>
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(II)	
ь	If "Yes" to 3a(ii), are the related organization	•							3b	
4	Describe in Part XIII the intended uses of the		owment	funds						
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answere									
	Description of property	(a) Cost or o		, · · /	or other		umulated	d	(d) Book	value
		basis (investi	ment)		(other)	aepre	ciation			C2.C
1a	Land				2,636.		22 00	-		<u>,636.</u>
b	Buildings			23	0,235.	Τ(03,88	14.	126	<u>,353.</u>
С	Leasehold improvements	<u> </u>			0 046	· 	SE 30	<u> </u>		1.61
d	Equipment			 	0,846.		55,38			,461.
	Other			(D) (: 1	5,108.		3,51	++-		,594. ,044.
I otal	I. Add lines 1a through 1e (Column (d) must e	equal rorm 990, Part	: A, COIUI	un (ø), line 1	(UC)				TOO	,∪44•

Schedule D (Form 990) 2014

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2014

B . W. B	ty Farm Bureau 71-0245792 Page 71-0245792
Part XI Reconciliation of Revenue per Audite	d Financial Statements With Revenue per Return.
Complete if the organization answered "Yes" to F	orm 990, Part IV, line 12a.
1 Total revenue, gains, and other support per audited final	ncial statements 1
2 Amounts included on line 1 but not on Form 990, Part V	II, line 12:
a Net unrealized gains (losses) on investments	2a
b Donated services and use of facilities	2b
c Recoveries of prior year grants	2c
d Other (Describe in Part XIII.)	2d
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but no	t on line 1.
a Investment expenses not included on Form 990, Part VI	I, 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	
Part XII Reconciliation of Expenses per Audit	ed Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" to F	orm 990, Part IV, line 12a
1 Total expenses and losses per audited financial stateme	nts 1
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
4 Amounts included on Form 990, Part IX, line 25, but not	on line 1:
a investment expenses not included on Form 990, Part VII	I, line 7b 4a 4
b Other (Describe in Part XIII)	4b
c Add lines 4a and 4b	4c
5 Total expenses Add lines 3 and 4c. (This must equal For	m 990, Part I, line 18) 5
Part XIII Supplemental Information.	
	Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9, F	Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, his part to provide any additional information
Provide the descriptions required for Part II, lines 3, 5, and 9, F	
Provide the descriptions required for Part II, lines 3, 5, and 9, F	
Provide the descriptions required for Part II, lines 3, 5, and 9, F	
Provide the descriptions required for Part II, lines 3, 5, and 9, F	
Provide the descriptions required for Part II, lines 3, 5, and 9, F	
Provide the descriptions required for Part II, lines 3, 5, and 9, F	
Provide the descriptions required for Part II, lines 3, 5, and 9, F	
Provide the descriptions required for Part II, lines 3, 5, and 9, F	

Schedule D (Form 990) 2014

432054 10-01-14

SCHEDULE'O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Phillips County Farm Bureau

Employer identification number 71-0245792

Form 990, Part VI, Section A, line 6:
The Organization is a mutual benefit organization with members.
Form 990, Part VI, Section A, line 7a:
The board is elected annually by the general membership. Officers are
elected by the board.
Form 990, Part VI, Section A, line 7b:
Policy resolutions are subject to member approval.
Form 990, Part VI, Section B, line 11:
The 990 is submitted to the Board President who reviews and signs it.
Form 990, Part VI, Section B, Line 12c:
Informally, the board enforces the policy as problems arise.
Form 990, Part VI, Section B, Line 15:
The Organization does not have compensated officers or management
officials.
Form 990, Part VI, Section C, Line 19:
These documents are not available to the public.