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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.

		Information about 1 orni 330 and its mad detions is at	10 10 10 .11 3	.govnorou	p-00		
<u>A 1</u>	Forti	e 2014 calendar year, or tax year beginning NOV 1, 2014 and end	ling ()	CT 31, 2015			
В	Check (i applicat	C Name of organization		D Employer identific	cation number		
	Addr chan	craighead County Farm Bureau	j				
	Nam chan	9 5		71-0	257512		
Ē	Initia		m/suite	E Telephone number			
	Final	P.O. Port 2397	, 00110	•	935-5533		
	returi termi ated			G Gross receipts \$	317,754.		
	Ame	nded Tomoghome 3D 72402		H(a) Is this a group re			
F	بارد Appli			for subordinates			
_	⊥ltiòn pend			H(b) Are all subordinates in			
$\overline{}$	Tay-03	tempt status	527		list (see instructions)		
		ite: www.arfb.com/craighead	327		,		
				H(c) Group exemption	State of legal domicile: AF		
	art I	f organization: X Corporation Trust Association Other ► Summary	L Year o	i tormation. 1936 N	State of legal domicile, A.F.		
			7 + 11 - 20	nl Dromotic			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities Agricul	ıcur	al Promotio			
Ē	2	Check this box (if the organization discontinued its operations or disposed of the continued its operations or disposed of the continued its operations.)	of more	than 25% of its net as			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	35		
ص مع	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	35		
es	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	6		
ξ	6	Total number of volunteers (estimate if necessary)		6	81		
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	234,736.		
•	b	Net unrelated business taxable income from Form-990-T-line 34		7b	-12,969.		
		RECEIVED		Prior Year	Current Year		
d)	8	Contributions and grants (Part VIII line 1h)		0.	0.		
Revenue	9	Program convice revenue (Part VIII line 2a)		70,974.	70,836.		
š	10	Investment income (Part VIII, column (A), lines 324 and 70)		952.	1,040.		
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		254,566.	245,878.		
	12	Total revenue - add lines 8 through 11 (must equal Part) (iii [Column (A) line 12)	-	326,492.	317,754.		
	13	Grants and similar amounts paid (Part IX, column-(A),-lines-1-3)		820.	225.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	211,077.	212,006.			
Expenses			<u> </u>	0.	0.		
ĕ	1	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	f				
ᅑ	ŀ		∸	115,678.	126,347.		
	l -	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	\vdash	327,575.	338,578.		
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	-				
<u>_ s</u>	19_	Revenue less expenses Subtract line 18 from line 12	-	_1,083.	-20,824.		
Net Assets or Fund Balances		T	Red	inning of Current Year	End of Year		
SSE	20	Total assets (Part X, line 16)	-	288,455.	<u> 267,374.</u>		
E E	21	Total liabilities (Part X, line 26)	-	34,115.	33,858.		
뜶	22	Net assets or fund balances Subtract line 21 from line 20		254,340.	233,516.		
	art II	Signature Block		 			
		alties of perjury, I declare that I have examined this return, including accompanying schedules and			knowledge and belief, it is		
true,	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which p	oreparer i	nas any knowledge.			
		Signature of others best liveling		Data	·		
Sign Signature of officer / Cureton President 6-15-16							
Here Joshua Cureton President 6-15-16							
		Type or print name and title			-17-0-TIN		
Print/Type preparer's name Preparer's signature. Paid Sherry Chesser, CPA Preparer's signature. Preparer's signature. Policy of the control of the cont							
Paid							
	arer	Firm's name Thomas & Thomas LLP		Firm's EIN	71-0271741		
Use	Only	Firm's address 201 E. Markham, Suite 500		ļ			
		Little Rock, AR 72201		Phone no. 50	<u>1-375-2025</u>		
May	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No		

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2014)

	nrt III Statement of Program Service Accomplishments	1-025/512 Page 2
	Check if Schedule O contains a response or note to any line in this Part III	
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? If "Yes," describe these new services on Schedule O.	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as me Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	-
	revenue, if any, for each program service reported	the total expenses, and
4a	(Code) (Expenses \$) (Revenue \$) (Revenue \$)	
	County Farm Bureau work is general in nature, helping far	
	achieve educational improvements, economic opportunity, a	
	advancement.	
 4b		
+0	(Code) (Expenses \$) (Revenue \$)	,
		
4c	(Code) (Expenses \$) (Revenue \$)
		,
4d	Other program services (Describe in Schedule O)	,
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶	
<u> </u>		Form 990 (2014)

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

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		res	NO
•	If "Yes," complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ū	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
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		х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
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 debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
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		X
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," complete Schedule D,			
	Part VI	11a	_X_	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			v
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d_		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
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		Х
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111		<u> </u>
120	Schedule D, Parts XI and XII	12a		X
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	izu		
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			•
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
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	17		<u>X</u> _
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	40		Y
20-	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		- 42
U	11 100 to mio 2001 did digamentation attach a copy of its abdited infancial statements to this feturit		990	0044

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

			Yes	<u>No</u>
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		<u> X</u>
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_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		ĺ	
	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		<u>X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	 	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	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,"		ļ	
	complete Schedule L, Part II	26		<u> X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		
	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		_X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		}	
	instructions for applicable filing thresholds, conditions, and exceptions).			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u>X</u>
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		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		ļ	
	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31_		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1 1	- 1	
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	_		7.7
_	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_33		<u>X</u> _
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		i	
	Part V, line 1	34		<u>X</u>
	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?	_	1	
 .	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			v
	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	<u>Χ</u> 990 α	2014
		FORM	33U ()	/U 14

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

X

Form 990 (2014) Craighead County Farm Bureau 71-0257512 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
<u>Sec</u>	tion A. Governing Body and Management		V	
4.	Enter the number of voting members of the governing body at the end of the tax year		Yes	No
1a				
	If there are material differences in voting rights among members of the governing body, or if the governing		1	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. Enter the number of voting members included in line 1a, above, who are independent 1b			
ь		1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		.	
_	officer, director, trustee, or key employee?	_2_	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		77
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
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	X	
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а		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
	Did the organization have local chapters, branches, or affiliates?	10a		<u> X</u>
ь	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		77
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		7.7	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u>X</u>	
b	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	İ		
	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		15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	}		
	taxable entity during the year?	16a_		X
b	If "Yes," 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) and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are section for the section of the section for the sect	avaılab	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	i finan	cıal	
	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 - 870-935-5533			
	P.O. Box 2397, Jonesboro, AR 72402			

Form	aan	(2014)	
COMM	990	(2014)	

Craighead County Farm Bureau

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

X 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)			((C)		_	(D)	(E)	(F)
Name and Title	Average	(40	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	rson	is bo	th an	,	compensation	amount of
	week		Cer ar	lo a o	rect	Jr/trus	stee)	from	from related	other
	(list any hours for	Juecto						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	10 95	stee			nsate		(W-2/1099-MISC)	(44-27 1033-141130)	organization
	organizations	tuste	al tru:	ĺ	yee	mbe	ĺ	(** = ** ******************************		and related
	below	Individual trustee or director	institutional trustee	5	Key employee	Highest compensated employee	ig.			organizations
	line)	Ē	lnstr	Officer	Ke	皇島	Former			
(1) Josh Cureton	0.50		Ì	Ì						
President		X		X			<u> </u>	0.	0.	0.
(2) Scott Gairhan	0.50									
1st Vice President		X		X	<u>L</u> _		L	0.	0.	0.
(3) Tony Bradley	0.50									
2nd Vice President		X		X			<u> </u>	0.	0.	0.
(4) Mike Mahan	0.50									
Secretary/Treasurer		X	<u> </u>	X				0.	0.	0.
(5) Mark Bowers	0.50									
Member		X					Ļ.,	0.	0.	0.
(6) Jerome Boyd	0.50									
Member		X					_	0.	0.	0.
(7) Kieth Boyd	0.50								:	
<u>Member</u>		X					L_	0.	0.	0.
(8) Tim Burcham	0.50									_
Member		X		<u>L</u> .			_	0.	0.	0.
(9) Eddie Burris	0.50		ĺ	ĺ	1	ĺ	ĺ			_
<u>M</u> ember		X				<u> </u>	<u> </u>	0.	0.	0.
(10) Joe Christian	0.50									_
Member		X	<u> </u>			_	ــــ	0.	0.	0.
(11) Richard Coy	0.50			!		ĺ				_
Member		X	<u> </u>		<u> </u>	_	├ _	0.	0.	0.
(12) Michael Cureton	0.50			 			}	_	_	_
Member		X	<u> </u>			<u> </u>	ļ	0.	0.	0.
(13) Barry Fielder	0.50						1		_	_
Member		X				<u> </u>	<u> </u>	0.	0.	0.
(14) Chris Damron	0.50								_	_
Member		X				<u> </u>	ļ	0.	0.	0.
(15) Joe Gammill	0.50					1				_
Member		X			<u> </u>	ļ	<u> </u>	0.	0.	0.
(16) Bob Griffin	0.50								_	_
Member		X	<u> </u>		<u> </u>	<u> </u>	Ļ _	0.	0.	<u> </u>
(17) Terry Hall	0.50						1	_	_	_
Member		X		L		<u>L</u>	L_	0.	0.	0.
432007 11-07-14										Form 990 (2014)

Par	Section A. Officers, Directors, T	rustees, Key Em	ploy	/ees	, an	d H	ighe	st (Compensated Employe	es (continued)			
	` (A)	(B)	(C)						(D)	(E)		(F)	
	Name and title	Average	Position (do not check more than one					one	Reportable	Reportable	E	stımat	.ed
	•	hours per	box	r, unle	ss pe	erson	is bot or/trus	th an	compensation	compensation	a	mount	
		week (list any	\vdash	T an	I	1 601	T	1	- 1 110m	from related	İ	other	
		hours for	or director				L		the organization	organizations (W-2/1099-MISC)		npens: from th	
		related	90	ig a			sated		(W-2/1099-MISC)	(***2/1099-101130)		ganıza	
		organizations	trustee	al trustee	ĺ	BE	mper	ĺ	(** 27 1033 (**100)		1	nd rela	
		below	qual	l ig	۰,,	l de	St CO					anızat	
_		line)	Individual	Institution	Officer	Key employee	Highest compensated employee	Former					
(18)	David Hodges	0.50									T		
Memb	er		X						0.	0			0.
(19)	Lennie Hogan	0.50									T		
Memb	er		X						0.	0	,		0.
(20)	David Gairhan	0.50				[7		-
Memb	er		X					L	0.	0	,		0.
(21)	Don Hosman	0.50											
Memb	er		X						0.	0.	,		0.
(22)	Bill Humphrey	0.50			Г		Γ				T		
Memb	er		X						0.	0 .	,		0.
(23)	David Hydrick	0.50											
Memb	er		X			}			0.	0.	<u></u>		0.
(24)	James Peachey	0.50						-					
Memb	er		X						0.	0 .			0.
(25)	James Pierce	0.50				}							
Memb	er		X						0.	0.	,		0.
(26)	Max Render	0.50				1							
Memb	er		X	Ĺ		<u> </u>		L	0.	0.			0.
1b	Sub-total							lacksquare	0.	0 .	+		0.
C	Total from continuation sheets to Par	t VII, Section A							0.	0.	$\overline{}$		0.
d	Total (add lines 1b and 1c)							<u> </u>	0.	0.	<u></u>		<u> 0 </u>
2	Total number of individuals (including but	ut not limited to th	ose	liste	ed al	bove	e) wł	no r	eceived more than \$100	,000 of reportable			_
	compensation from the organization	<u> </u>										Т	0
												Yes	No
3	Did the organization list any former office			e, ke	y er	nplo	yee	, or	highest compensated er	nployee on			
	line 1a? If "Yes," complete Schedule J fe							_			_3_	 -	X
4	For any individual listed on line 1a, is the	=							· ·	he organization	١.		
_	and related organizations greater than \$			-							4	 -	X
5	Did any person listed on line 1a receive	•				-		elat	ted organization or indivi-	dual for services	l _		٠,
Cast	rendered to the organization? If "Yes," o	omplete Schedul	e J 1	or su	ıch	pers	son_				5	Ь	X
	tion B. Independent Contractors								that recovered more than	\$100,000 of sames			
1	Complete this table for your five highest										sauon	nom	
	the organization Report compensation	ior the calendar y	ear	enai	ng v	vitri	Or W	LUIN		ear			
	(A) Name and busin	ess address	NT/	ONE	7				(B) Description of s	ervices		C) ensatio	n
			14/	TAT				-					
								\neg					
								}					
													-
2	Total number of independent contractor	rs (including but n	ot li	mite	d to	tho	se lis	stec	d above) who received m	ore than			
	0400 000 of					- 1	٦.						

71-0257512

Form 990 Craighea	<u>d Count</u>	<u> </u>	<u>. u.</u>	- 311	<u> </u>	<u> </u>	<u>- u </u>	<u> </u>	71-025	<u> </u>
Part VII Section A. Officers, Directors, Tr										
(A) Name and title	(B) Average hours			(C Posi	C) ition			(D) Reportable compensation from	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) Bill Shannon Member	0.50	X						0.	0.	0
28) John Sloan	0.50	x						0.	0.	0
(ember 29) Jeffrey Tubbs	0.50		<u> </u>							
ember 30) Jim Tubbs	0.50	X						0.	0.	
Member 31) Drew Davis	0.50	X						0.	0.	C
lember	0.50	X						0.	0.	
32) Dan Hosman Member		х						0.	0.	
33) Joseph Smith	0.50	X						0.	0.	(
34) Nathan Wells Member	0.50	x						0.	0.	(
(35) Scott Gibson	0.50									
Member		X						0.	0.	(
						'				
		_								<u>.</u>
		_							- 	
		_								·

Craighead County Farm Bureau Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded from tax under Related or Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f **Business Code** 70,836. 2 a Membership Dues 70,836. 110000 Program Service f All other program service revenue 70,836. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,040. 1,040. other similar amounts) Income from investment of tax-exempt bond proceeds 4 6,919. 6,919. 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 234,736. 11 a Insurance Service Fees 524298 234,736. ь Miscellaneous 524298 4,223. 4,223. d All other revenue 238,959. e Total, Add lines 11a-11d

317,754

70,836.

234,736.

12,182.

Form 990 (2014)

Total revenue. See instructions.

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

Sect	tion 501(c)(3) and 501(c)(4) organizations must con	plete all columns. All oth	ner organizations must d	complete column (A)	
	Check if Schedule O contains a respon	nse or note to any line in	this Part IX		
	not làclude amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	225.			
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	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	189,669.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)			<u> </u>	
9	Other employee benefits	6,331.			
10	Payroll taxes	16,006.		<u> </u>	
11	Fees for services (non-employees)				
а	Management				
b	Legal		· · · · · · · · · · · · · · · · · · ·		
С	Accounting	600.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				<u> </u>
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.)	0.605			
12	Advertising and promotion	9,635.			
13	Office expenses	32,987.			
14	Information technology			 	<u>-</u>
15	Royalties	41 604			
16	Occupancy	41,694.			
17	Travel			-	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	20 142			
19	Conferences, conventions, and meetings Interest	30,142.	· · · · · · · · · · · · · · · · · · ·	 	
20	· · · · ·			l	
21 22	Payments to affiliates Depreciation, depletion, and amortization	8,597.			
23	Insurance	0,357.		-	· · · · · · · · · · · · · · · · · · ·
24	Other expenses Itemize expenses not covered	-			
~7	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а		2,241.		ļ	
b	Micellaneous	451.			
C					
d				-	
	All other expenses	220 550			<u> </u>
<u>25</u>	Total functional expenses Add lines 1 through 24e	338,578.		 	
26	Joint costs. Complete this line only if the organization	ŀ			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check here	İ			
	Uneck Refe I I if following SOP 08-2 (ASC 059-720)	l l		į l	

Form 990 (2014) Craighead County Farm Bureau Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 268. 267. Cash - non-interest-bearing 196,641. 184,730. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 573. 0. 4 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 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 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 519,858. basis Complete Part VI of Schedule D 10a 437,481 90,973. 82,377. 10b b Less: accumulated depreciation 10c 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 Intangible assets 14 14 Other assets See Part IV, line 11 15 15 288,455. 267,374 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 6,011. 6,604. 17 Accounts payable and accrued expenses 17 18 18 Grants payable

Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third

Organizations that follow SFAS 117 (ASC 958), check here

Escrow or custodial account liability Complete Part IV of Schedule D

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons

parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25

complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets

Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33

254,340. <u>233,516.</u> 267,374. 288,455. 34 Form 990 (2014)

27,847.

33,858.

0.

0.

233,516.

27,511.

34,115.

19 20

21

22

23

24

25

26

27

28

29

30

32

33

0.

0. 31

254,340.

Net Assets or Fund Balances

29

19

20

21

Deferred revenue

Tax-exempt bond liabilities

Complete Part II of Schedule L

∙orn	<u> 1990 (2014) </u>	/1-02	5/51Z	Page 12
	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		<u>,754.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	338	,578.
3	Revenue less expenses Subtract line 2 from line 1	3	-20	,824.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	254	,340.
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	233	<u>,516.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			<u> </u>	es No
1	Accounting method used to prepare the Form 990 Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	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			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		
	consolidated basis, or both			1
	Separate basis Consolidated basis Both consolidated and separate basis			
C	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 O		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit		
	Act and OMB Circular A-133?		3a	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form 9	90 (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.lrs.gov/form990.

OMB No 1545-0047

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

,					
	on 501(c)(4), (5), or (6) organiza organization	tions Complete Part III			lavani da atification mumban
name or	•		_	Emt	oloyer identification number
Deat	Craighe	ad County Farm I	Bureau		71-0257512
Part I-	A Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527 (organization.
1 Pro	vide a description of the organiz	zation's direct and indirect politi	cal campaign activities	in Part IV	
2 Poli	tical expenditures			▶:	.
3 Volu	inteer hours				
_					
Part I-	B Complete if the org	ganization is exempt und	der section 501(c)	(3).	
1 Ente		incurred by the organization un		> :	5
2 Ente	er the amount of any excise tax	incurred by organization manage	ers under section 495	5 ▶ 9	ß
		on 4955 tax, did it file Form 4720			Yes No
	a correction made?				Yes No
	'es," describe in Part IV.				
Part I-		anization is exempt un	der section 501(c)	, except section 501	(c)(3).
1 Ente	<u></u>	by the filing organization for se		i	B
	_	ization's funds contributed to o			
	mpt function activities		and organizations for a	▶ 9	.
	'	Add lines 1 and 2 Enter here	and on Form 1120-POL		·
line	·	Add lines I and 2 Linter here	and on Form Fizor OL	-1 b (\$
	_	1120-DOL for this year?			Yes No
	the filing organization file Form	•	'INI) of all cootion EQ7 o	alitical arganizations to whi	
		nployer identification number (E ition listed, enter the amount pa			
	. ,	omptly and directly delivered to			
		additional space is needed, pro			ate dogregated fand of a
				T	4 > A
	(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
				idido il fiorio, oritor o	delivered to a separate
					political organization
		<u> </u>			If none, enter -0-
					<u> </u>
				<u> </u>	
			ı	1	1

Schedule C (Form 990 or 990-EZ) 2014 (<u> raighead (</u>	County Farm	<u>Bureau</u>	71-	<u>0257512 Page 2</u>	
Part II-A Complete if the orga	anization is exe	mpt under section	on 501(c)(3) and file	ed Form 5768(election under	
section 501(h)).	· · · · · · · · · · · · · · · · · · ·					
A Check 🕨 📖 if the filing organizat	on belongs to an aff	iliated group (and list i	n Part IV each affiliated	group member's nai	me, address, EIN,	
expenses, and share	of excess lobbying	expenditures)				
B Check ▶ If the filing organizat	on checked box A a	nd "limited control" pr	ovisions apply.			
Limit	s on Lobbying Expe	enditures	j	(a) Filing	(b) Affiliated group	
		unts paid or incurred	.)	organization's totals	totals	
<u> </u>		·				
1a Total lobbying expenditures to influ	ence public opinion	(grass roots lobbying)				
b Total lobbying expenditures to influence	ence a legislative bo	dy (direct lobbying)	Ļ			
c Total lobbying expenditures (add lin	es 1a and 1b)		ļ_		ļ	
d Other exempt purpose expenditure	S		-		ļ	
e Total exempt purpose expenditures	•	•	<u> </u> -			
f Lobbying nontaxable amount Enter	the amount from th	e following table in bo	th columns			
If the amount on line 1e, column (a) or	(b) is: The lob	bying nontaxable an	nount is:			
Not over \$500,000	Not over \$500,000 20% of the amount on line 1e.					
Over \$500,000 but not over \$1,000	,000 \$100,00	00 plus 15% of the ex	cess over \$500,000			
Over \$1,000,000 but not over \$1,50	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000					
Over \$1,500,000 but not over \$17,0	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000					
Over \$17,000,000	Over \$17,000,000 \$1,000,000.					
g Grassroots nontaxable amount (ent	•		-			
h Subtract line 1g from line 1a If zero						
i Subtract line 1f from line 1c If zero						
j If there is an amount other than zero		line 1i, did the organiz	ation file Form 4720		-	
reporting section 4911 tax for this y					Yes No	
(O		eraging Period Under		dala dina antonona	L	
(Some organizations the		out(n) election do not ate instructions for li		t the five columns	below.	
		nditures During 4-Ye				
	Lobbying Expe	Haitares Daring 4-16	ar Averaging Period		7	
Calendar year	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total	
(or fiscal year beginning in)	(4) 2011	(5) 25 12	(0) 20 10	(4) 2011	(6) / 512.	
2a Lobbying nontaxable amount					1	
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
				 -		
_ c Total lobbying expenditures						
						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))			1			
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2014 Craighead County Farm Bureau 71-0257512 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)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		a)	(b)	
of the lobbying activity.	Yes	No	Amount	
1 During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?		_		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?			<u> </u>	
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			L	
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), se	ection 501(c)	(5), or se	ection	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	X	
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 		1 2	X	
·	ection 501(c)	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), see 	ection 501(c)	2 3 (5), or se	X	X ne 3, is
 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), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members 	ection 501(c) ered "No," Of	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), second to the prior year? 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of part include amounts of p	ection 501(c) ered "No," Of	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), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members 	ection 501(c) ered "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.

► Attach to Form 990.

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

2014
Open to Public Inspection

Employer identification number

OMB No 1545-0047

Name of the organization

ov/torm990.

71-0257512 Craighead County Farm Bureau 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 2 Aggregate value of contributions to (during year) 3 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 a Total number of conservation easements 2a 2b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 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 6 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) and section 170(h)(4)(B)(ii)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) 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: a Revenue included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		ad County							<u>57512</u>		<u> 2</u>
Pa	rt III Organizations Maintaining (_		
3	Using the organization's acquisition, access	ion, and other record	ds, chec	ck any of the	following that	are a sigi	nificant u	ise of its	collection	ıtems	
	(check all that apply)										
а	Public exhibition	c	, 🗀	Loan or exc	hange progra	ms					
b	Scholarly research	e	, \square								
С	Preservation for future generations										_
4	Provide a description of the organization's c	ollections and explai	n how t	hev further t	he organizatio	n's exemi	ot purpo:	se in Par	t XIII		
5	During the year, did the organization solicit of	-		=	_						
_	to be sold to raise funds rather than to be m					-		[Yes_		No
Pai	t IV Escrow and Custodial Arran					Yes" to Fo	orm 990.	Part IV.		<u></u>	<u></u>
	reported an amount on Form 990, Pa		0.0 11 111	o organizan	4.1011010	100 1011	J 000,				
12		· · · · · · · · · · · · · · · · · · ·	diany for	contribution	e or other see	ets not in	cluded				_
ıa	Is the organization an agent, trustee, custod	ian or other intermet	Jiary IO	Contribution	is or other ass	ers not in	iciadea	_	Yes		No
	on Form 990, Part X?			A - I-1 -				L	」 tes	r	10
b	If "Yes," explain the arrangement in Part XIII	and complete the to	llowing	table							
							 		Amount		
С	Beginning balance						1c				
ď	Additions during the year						1d				—
е	e Distributions during the year										
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or c	ustodial accou	ınt liability	/?	L	Yes	<u> </u>	No
	If "Yes," explain the arrangement in Part XIII										
Pai	t V Endowment Funds. Complete	f the organization ar	swered	I "Yes" to Fo	rm 990, Part I	V, line 10.					
		(a) Current year	(b) f	Prior year	(c) Two years	back (d) Three ye	ears back	(e) Four	years ba	¢k_
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										_
	and programs							ļ			
f	Administrative expenses			-							_
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end haland	e (line 1	La column (a)) held as:						_
a	Board designated or quasi-endowment	, o , o o a balano	%	· 5 , • • · · · · · ·	-,,						
b	Permanent endowment		'								
c	Temporarily restricted endowment	^~ %									
C	The percentages in lines 2a, 2b, and 2c shot										
20		•	ation th	at ara bald a	and administer	ad for tha	organiza	ntion			
Sa	3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by Yes No										
	by									Yes N	<u>o</u> _
	(i) unrelated organizations								3a(i)		—
							3a(II)		—		
	b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?										
4	Describe in Part XIII the intended uses of the		wment	funds							
Pai											
	Complete if the organization answere	·									—
	Description of property	(a) Cost or o		1 ' '	or other		umulated	t l	(d) Book	value	
		basis (investr	nent)	basis	(other)	depre	eciation		 		_
1a	Land				8,200.					,200	
b	Buildings			29	3,658.	22	24,73	6.	68	1,922	<u>.</u>
С	Leasehold improvements										
d	Equipment			21	2,526.	20	7,37	11.	5	,155	
е	<u>Other</u>				5,474.		5,37	4.		100	<u>) .</u>
Total	. Add lines 1a through 1e (Column (d) must e	gual Form 990, Part	X. colu	mn (B), line	10c)				82	,377	

Craighead County Farm Bureau

71-0257512 Page 3

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014

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

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Craighead County Farm Bureau

Employer identification number 71-0257512

Form 990, Part VI, Section A, line 2:
Mark Bowers & Joe Christian - family relationship
Michael Cureton & Josh Cureton - family & business relationship
David Gairhan & Thomas Gairhan - family & business relationship
Scott Gibson & David Hodges - family & business relationship
Don Hosman & Dan Hosman - family & business relationship
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 presented in a board meeting to all board members in attendance.
Form 990, Part VI, Section B, Line 12c:
The conflict of interest policy in place requires officers to disclose
annually situations which may give rise to conflicts of interest. Any
board member refusing to sign will be removed from the board.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization Craighead County Farm Bureau	Employer identification number 71-0257512
The Organization does not have compensated officers or ma	nagement
officials.	
Form 990, Part VI, Section C, Line 19:	
These documents are not available to the public.	
	
	

Schedule O (Form 990 or 990-EZ) (2014)

432212 08-27-14