

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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> _	or th	e 2014 calendar year, or tax year beginning $NOV 1, 2014$ and	ending (OCT 31, 2015				
В	Check if applicat	C Name of organization		D Employer identifi				
	Addre	e POIK County Farm Bureau						
	Name	Doing business as		71-0	71-0392023			
	initial return	Number and street (or P.O. box if mail is not delivered to street address)	E Telephone numbe					
	Final	P.O. Box 1139	479-	394-3650				
	term: ated			G Gross receipts \$	166,655.			
	Amer return	Mena, Ar /1955		H(a) Is this a group re				
L	Appli	F Name and address of principal officer Allen Scewarc		for subordinates	? Yes X No			
	pend	same as C above		H(b) Are all subordinates in				
_		empt status \bigcirc 501(c)(3) \bigcirc 501(c) (5) \triangleleft (insert no.) \bigcirc 4947(a)(1)	or 527	If "No," attach a	list. (see instructions)			
		te: ► www.arfb.com/polk		H(c) Group exemptio				
		forganization: X Corporation Trust Association Other	L Year	of formation: 1959 N	State of legal domicile: AR			
P	art I	Summary						
ģ	1	Briefly describe the organization's mission or most significant activities. Agri	cultur	ral Promotio	<u>n</u>			
Activities & Governance								
ē	2	Check this box if the organization discontinued its operations or dispo	sed of more	I				
õ	3	Number of voting members of the governing body (Part VI, line 1a)		3	$\frac{14}{14}$			
ಷ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	14			
ies	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	<u>3</u>			
₹	6	Total number of volunteers (estimate if necessary)		6				
AC	l.	Total unrelated business revenue from Part VIII, column (C), line 12		7a	111,992.			
	<u> </u>	Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
	_			Prior Year 0 •	Current Year 0.			
üe	8	Contributions and grants (Part VIII, line 1h)	48,007.	47,809.				
Revenue	9	Program service revenue (Part VIII, line 2g)	25.	<u>47,809.</u> 25.				
Æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		116,704.	118,821.			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	164,736.	166,655.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	100,033.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	59,581.	68,947.			
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	}	0.	00,547.			
ë	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.		<u>0.</u>			
ă	1"	Total fundraising expenses (Part IX, column (D), line 25)		67,693.	74,352.			
	11/	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	$\overline{}$	127,274.	143,299.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12	~U	37,462.	23,356.			
<u>– 4</u>	3	Nevertue less expenses Subtract line 10 from line 12	NO BE	eginning of Current Year	End of Year			
ets (20	Revenue less expenses Subtract line 18 from line 12 Total assets (Part X, line 16)	6 101	592,327.	603,036.			
ASS	21	Total liabilities (Part X, line 26)	19 Jah	97,969.	85,322.			
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 204.	11	494.358	517.714.			
ΓĒ	art II	Signature Block alties of perjury, I declare that I have examined this return, including accompanying schedule	3					
Und	der per	alties of perjury. I declare that I have examined this return, including accompanying schedule	es and statem	nents, and to the best of m	y knowledge and belief, it is			
true	e. corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of w	hich prepare	r has any knowledge.				
	,	1 (1) Sent (1)						
Sig	ın	Signature of officer	` /	1 Date	0 11			
He		ALLEN STEWART TRESI	Jer	T 6-	9-16			
		Type or print name and title						
		Print/Type preparer's name Preparer's signature	ſ	Date Check	PTIN			
Pai	d	Sherry Chesser, CPA Shum Cho	ou!	526-16 self-employ	ed P00174819			
Pre	parer	Firm's name Thomas & Thomas LLP		Firm's EIN	71-0271741			
Use Only Firm's address 201 E. Markham, Suite 500								
_		Little Rock, AR 72201		Phone no. 50	1-375-2025			
Ma	y the	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			
	001 11		ions.		Form 990 (2014)			

	rt III Statement of Program Service Accomplishments	2023	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?	☐ Yes 🖸	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? 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 measured by	expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total ex-		d
	revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	County Farm Bureau work is general in nature, helping farm fam:	<u>llies</u>	
	achieve educational improvements, economic opportunity, and so	<u>:ial</u>	
	advancement.		
4b	(Code) (Expenses \$) (Revenue \$))
	,		
4c	(Code) (Expenses \$)
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses	Form 990	(2014)
		1 01111 330	14014)

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

				Τ
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	Γ——	Yes	No
-	If "Yes," complete Schedule A	1		x
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			
	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		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5	X	
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X_
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?	_		7.7
	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	40		x
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10_		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X]
_	as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	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	.,		
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			_
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	_	X
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		
ь	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	14b		X
4-	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140	_	
15	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			
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	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	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
		Form	990 ((2014)

Port IV | Checklist of Required Schedules (continued)

	- the families of the families (continues)			
04	Did the exception was at the discount of the control of the contro		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	l		
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> X</u>
~~	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	00		₹.
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_ <u>X_</u>
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		J	7.7
04-	Schedule J	23		<u>X</u>
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	04.	1	v
	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	04-	1	
	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	05.		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
р	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		ì	
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051	ł	
	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,"	000	İ	v
	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	[[ĺ	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		Ì	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)	00-	}	v
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-	ĺ	v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20	l	v
	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?		j	X
	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32	ĺ	X _
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33	l	X
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34	l	<u>X</u>
	Part V, line 1	35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b		
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
36		36	ł	
	If "Yes," complete Schedule R, Part V, line 2	30		
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
00	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31		
38		38	x	
	Note. All Form 990 filers are required to complete Schedule O			2014)
		, 3,11)		

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 2 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1¢ 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X За b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O X **3b** 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **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 Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c 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 organization solicit X any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 7c to file Form 8282? 7d d If "Yes." indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 8 sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a 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 Section 501(c)(7) organizations. Enter 10 a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Entera Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a 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 13b organization is licensed to issue qualified health plans 13c c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a

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

Form 990 (2014) Polk County Farm Bureau 71-0392023 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			\mathbf{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 14			
	If there are material differences in voting rights among members of the governing body, or if the governing	}	ł	1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	}		l
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14		,	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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	1	İ	
	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	İ		ł
	more members of the governing body?	7a	X	<u></u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	ĺ		1
	persons other than the governing body?	7b	X	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			ł
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	_
10a		10a	<u> </u>	<u> X</u>
ъ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	X	
11a		110	-22	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	х	i
12a	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	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
C	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	Х	
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
	Other officers or key employees of the organization	15b	_	X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1
	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) a	ıvaılab	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	l 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 - 479-394-3650			
	P.O. Box 1139, Mena, AR 71953			

Form	ggn	(2014)	
1 01111	330	120141	

Polk County Farm Bureau

71-0392023

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.

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) Name and Title	(B) Average hours per week	box,	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Allen Stewart	0.50	x		X		}		0.	0.	0.
President	0.50	A	_		┢╌		 			
(2) Ronney Fields Vice President	0.50	x	}	x])		0.	ο.	0.
(3) Terry Keener	0.50				<u> </u>		_		<u></u>	<u></u>
Secretary/Treasurer	- 0.00	\mathbf{x}	ĺ	x		1	1	0.	0.	0.
(4) Stephen Barney	0.50			-						
Member		X	1	}	ł		ŀ	0.	0.	0.
(5) Farrell Cole	0.50									
Member		X					<u> </u>	0.	0.	0.
(6) Don Craig	0.50									
Member	<u> </u>	X		<u> </u>		-	ļ	0.	0.	0.
(7) Bill Hoek	0.50	↓				1	l			
Member	 	X	_	_	_		ļ _	0.	0.	0.
(8) Greg Hunter	0.50		ļ			}			0.	0
Member	0.50	X	 	 -	-	}	├—	0.	U .	0.
(9) Dennis Philpot	0.50	X				ł		0.	0.	0.
Member	0.50	A	├	-	-	┼─	┼	0.		<u> </u>
(10) Terry Terrell Member	0.50	X					Ì	0.	ο.	0.
(11) Mitchell Tidwell	0.50		\vdash							
Member		X	l	ł		ŀ	1	0.	0.	0.
(12) James Watkins	0.50						Π			
Member		X	١.		<u> </u>	_		0.	0.	<u> </u>
(13) Duane Webb	0.50								'	
Member		X	L		L	_	_	0.	0.	0.
(14) Rodney Bowen	0.50	1	1	ł	Ì				_ '	,
Member	ļ	X	<u> </u>	├	-	┼-	-	0.	0.	0.
		1								<u> </u>
		{								
		_				1				
	<u> </u>	<u>L_</u>	L	<u>_</u>	L,	_		L	L	5 000 (224))

	Section A. Officers, Directors, Trus	tees, Key Lin	PIUY	662	aiii	<u>u , , , , , , , , , , , , , , , , , , ,</u>	give	31 C	Jumpensaled Employe	es (continueu)				
	(A)	(B) Average	Po		(C) Position				(D)	(E)			(F)	
	Name and title	hours per		not c	heck	more	than is bot		Reportable compensation	Reportable compensation		Estimated amount of		
		week	offic				or/trus		from	from related			other	Oi
		(list any	director				}		the	organizations	rganizations		pensa	
		hours for related	- G	寶		İ	sated		organization (W-2/1099-MISC)	(W-2/1099-MISC	SC) from the organization and relationships and relationships are set of the			
		organizations	trustee or	al trus		ᇎ	ma m		(***271099******3C)					
		below	Individual	Institutional trustee	cer	Key employee	Highest compensated employee	Former		3	İ		ınızatı	-
		line)	皇	重	Officer	, Ke	星島	ĕ			4			
											1			
		 				-			<u> </u>		_			
											\perp			_
			-	-		-	-	-	 		\dashv			
							L.			· 	\perp			
										1				
		 	_	-		-	-	-	 	1	+			
						<u> </u>	<u> </u>	<u> </u>			_			
			_	-				-			十			
							_	_			_			
		ļ									1			
	Sub-total	L		L		L	L	<u> </u>	0.).			0.
	Total from continuation sheets to Part VI	I, Section A						•	0.	().			0.
	Total (add lines 1b and 1c)							<u> </u>	0,).			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wh	no r	eceived more than \$100	0,000 of reportable				0
	compensation from the organization												Yes	No.
3	Did the organization list any former officer,	director, or tru	ıste	ə, ke	y en	npic	yee	, or	highest compensated e	mployee on	Γ			
	line 1a? If "Yes," complete Schedule J for s											3		X
4	For any individual listed on line 1a, is the su									the organization	-		ı	
	and related organizations greater than \$150										-	4		<u>X</u>
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com							elat	ted organization or indivi	idual for services		5	1	X
Sec	tion B. Independent Contractors	piete Scriedui	<u> </u>	01_50	<u>ICII</u>	Ders	SUII					<u> </u>		<u></u> -
1	Complete this table for your five highest co										nsat	tion f	rom	
	the organization Report compensation for	the calendar y	ear e	endı	ng v	vith	or w	ıthır		year				
	(A) Name and business	address	NO	NI	3			ļ	(B) Description of s	ervices	Со	(C mper	i) Isatioi	1
										}				
					_									
								ł		1				
					_									
								ᆜ	 					
2	Total number of independent contractors (is \$100,000 of compensation from the organic		ot lu	mite	d to		se li: O	stec	above) who received m	nore than				
	# 100,000 of compensation from the organi	Zation			_	<u> </u>	<u>-</u>		·		F	orm 9	990 (2	2014)

Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded from tax under Total revenue Related or exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1<u>e</u> 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** 2 a Membership Dues 110000 47,809. 47,809. Program Service Revenue f All other program service revenue 47,809 g Total. Add lines 2a-2f investment income (including dividends, interest, and 25 25. other similar amounts) Income from investment of tax-exempt bond proceeds 4 2,629. 2,629. Royalties 5 (ı) Real (II) Personal 4,200. 6 a Gross rents 0. b Less rental expenses 4,200. c Rental income or (loss) 4,200 4,200. d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of 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** 111,992. 111,992. 524298 11 a Insurance Service Fees d All other revenue 111,992. e Total. Add lines 11a-11d 47,809. 111,992. 166,655. 6.854. Total revenue, See instructions.

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

Section	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must c	omplete column (A)	
	Check if Schedule O contains a respon				
	ot include amounts reported on lines 6b, 3b, 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			<u> </u>	
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			1	
	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		la .		
	persons (as defined under section 4958(f)(1)) and		H		
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	63,671.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5,276.			
11	Fees for services (non-employees):	ļ		}	
а	Management				
b	Legal				
c	Accounting	600.		l	
d	Lobbying		<u> </u>	 	
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.)		<u> </u>		
12	Advertising and promotion	7,774.		 	
13	Office expenses	12,049.		 	
14	Information technology			 	
15	Royalties	16 114		 	
16	Occupancy	16,114.	 	 	
17	Travel		 		<u> </u>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	15 707		 	
19	Conferences, conventions, and meetings	15,787. 2,407.	 	 	
20	Interest	2,407.		 	
21	Payments to affiliates Depreciation, depletion, and amortization	14,760.		1	
22	Insurance	392.			
23 24	Other expenses. Itemize expenses not covered	3,72.		 	
Z4	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Youth and Safety	4,012.			
b	Miscellaneous	457.			· · · · · · · · · · · · · · · · · · ·
С					
d				ļ	
e	All other expenses			<u> </u>	
25	Total functional expenses. Add lines 1 through 24e	143,299.		<u> </u>	
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here		i	1	

Form 990 (2014)
Part X | Balance Sheet

Part X	Balance Sheet	·		
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing		1	
2	Savings and temporary cash investments	109,762.	2	134,213
3	Pledges and grants receivable, net		3	·
4	Accounts receivable, net		4	415
5	Loans and other receivables from current and former officers, directors,			
- 1	trustees, key employees, and highest compensated employees. Complete			
l	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		1	
3	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or other			
	basis Complete Part VI of Schedule D 10a 578,019.		1	
Ł	Less, accumulated depreciation 10b 109,631.	482,545.	10c	468,388
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	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	20.	15	2(
16	Total assets. Add lines 1 through 15 (must equal line 34)	592,327.	16	603,036
17	Accounts payable and accrued expenses	1,369.	17	1,558
18	Grants payable		18	
19	Deferred revenue	16,546.	19	16,302
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons		{ }	
22	Complete Part II of Schedule L	· 	22	
23	Secured mortgages and notes payable to unrelated third parties	80,054.	23	67,462
24	Unsecured notes and loans payable to unrelated third parties	 	24	
25	Other liabilities (including federal income tax, payables to related third]]	
]	parties, and other liabilities not included on lines 17-24) Complete Part X of]]	
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	97,969.	26	85,322
	Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and		1	
8	complete lines 27 through 29, and lines 33 and 34.		1	
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	· · - · · · · · · · · · · · · · · · · ·
29	Permanently restricted net assets		29	· ·····
3	Organizations that do not follow SFAS 117 (ASC 958), check here			
5	and complete lines 30 through 34.	_		
30	Capital stock or trust principal, or current funds	0.	30	<u>C</u>
31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0
27 28 29 30 31 32 31 32 30	Retained earnings, endowment, accumulated income, or other funds	494,358.	32	517,714
ž 33	Total net assets or fund balances	494,358.	33	517,714
34	Total liabilities and net assets/fund balances	592,327.	34	603,036 Form 990 (201

	1990 (2014) POIR County Farm Bureau	_ / <u>L</u> ~U3	92023	Pac	ge 12
Pa	rt XI Reconciliation of Net Assets				4
	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	166	, 6	55.
2	Total expenses (must equal Part IX, column (A), line 25)	2	143	, 2	99.
3	Revenue less expenses Subtract line 2 from line 1	3	23	, 3	56.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	494	, 3	<u>58.</u>
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	517	7:	<u> 14.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				ليا
			<u> </u>	Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other))	ļ	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a			2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both.			[
	Separate basis Consolidated basis Both consolidated and separate basis		1 1		
b	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u> _
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	1 1	1	
	consolidated basis, or both			Į.	
	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 audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	\rightarrow	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3а	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			v
	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 requi	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2014)

SCHEDULE C

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

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.

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

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

- 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

•	Section 501(c)(4), (5), or (6) organiza	tions [.] Complete Part III			
Nan	ne of organization			Emp	loyer identification number
	Polk Co	unty Farm Bureau			71-0392023
Pε	rt I-A Complete if the org	ganization is exempt unde	r section 501(c)	or is a section 527 of	organization.
2	Provide a description of the organia Political expenditures Volunteer hours	zation's direct and indirect political	campaign activities	_	S
Pa	art I-B Complete if the ord	ganization is exempt unde	r section 501(c)	(3).	
	Enter the amount of any excise tax			▶ 9	
	Enter the amount of any excise tax	· ·			S
	If the organization incurred a section				Yes No
	Was a correction made?	,	•		Yes No
	If "Yes." describe in Part IV				
	art I-C Complete if the org	ganization is exempt unde	r section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expende	d by the filing organization for sect	ion 527 exempt func	tion activities	8
	Enter the amount of the filing organ				
	exempt function activities				S
3	Total exempt function expenditures	s. Add lines 1 and 2 Enter here an	d on Form 1120-POL	-1	
	line 17b			▶ 9	S
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and en	mployer identification number (EIN) of all section 527 pc	olitical organizations to whi	ch the filing organization
	made payments For each organization contributions received that were propolitical action committee (PAC). If	romptly and directly delivered to a	separate political org	anization, such as a separa	he amount of political ate segregated fund or a
			T		(-) Amount of political
	(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

Schedule C (Form 990 or 990-EZ) 2014	Polk County	<u>/ Farm Burea</u>	au	71-	0392023 Page 2
Part II-A Complete if the org	anization is exe	mpt under section	on 501(c)(3) and file	ed Form 5768 (election under
section 501(h)).				 	
A Check Lifthe filing organizat	ion belongs to an aff	iliated group (and list i	n Part IV each affiliated	group member's nai	ne, address, EIN,
expenses, and share	e of excess lobbying	expenditures).			
B Check Lifthe filing organizat	ion checked box A a	nd "limited control" pr	ovisions apply		-, - <u>-</u>
l imit	s on Lobbying Expe	nditures		(a) Filing	(b) Affiliated group
		unts paid or incurred	.)	organızatıon's totals	totals
1a Total lobbying expenditures to influ	ence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influ	ence a legislative bo	dy (direct lobbying)	ļ		<u> </u>
c Total lobbying expenditures (add lii	nes 1a and 1b)].		
d Other exempt purpose expenditure	s		ļ		J
e Total exempt purpose expenditures	s (add lines 1c and 1	d)	1		<u> </u>
f Lobbying nontaxable amount. Ente	r the amount from th	e following table in bo	th columns		<u> </u>
If the amount on line 1e, column (a) or	r (b) is: The lot	bying nontaxable an	nount is:		
Not over \$500,000	20% of	the amount on line 1e	·		
Over \$500,000 but not over \$1,000	,000 \$100,0	00 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,50	00,000 \$175,0	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,0	00 plus 5% of the exc	ess over \$1,500,000.		}
Over \$17,000,000	\$1,000	000			
	- -			· · · · · · · · · · · · · · · · · · ·	<u> </u>
g Grassroots nontaxable amount (en	ter 25% of line 1f)		1		
h Subtract line 1g from line 1a If zero	or less, enter -0-		<u> </u>		
i Subtract line 1f from line 1c. If zero	or less, enter -0-				<u> </u>
j If there is an amount other than zer	ro on either line 1h oi	line 1i, did the organi	zation file Form 4720		
reporting section 4911 tax for this	year?	<u> </u>			Yes No
	4-Year Av	eraging Period Unde	r section 501(h)		
(Some organizations th				f the five columns	below.
		ate instructions for I			
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year		# N 0040	(-) 0010	(-I) 0014	(-) Total
(or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
			 		
					1
2a Lobbying nontaxable amount			 		
b Lobbying ceiling amount					
(150% of line 2a, column(e))		 	 		
c Total lobbying expenditures		 	 		
d Grassroots nontaxable amount	 	 	 		
e Grassroots ceiling amount					1
(150% of line 2d, column (e))		 	 		
f Grassroots lobbying expenditures		<u> </u>			<u> </u>

Schedule C (Form 990 or 990-EZ) 2014 Polk County Farm Bureau 71-0392023 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)).

of the lobbying activity.	or each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		(b)	
	Yes	No	Am	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		1		
or referendum, through the use of:				
a Volunteers?			_]	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?]	
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>		
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)?		ļ		
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	Ĺ <u></u>	<u> </u>		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	tion 501(c)(5), or s	ection	
55 (AP)			Yes	No
		1	Х	
1 Were substantially all (90% or more) dues received nondeductible by members?				
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?		2	X	ł
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), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere	tion 501(c d "No," O)(5), or s	ection rt III-A, li	X ne 3, is
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), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	tion 501(c ed "No," O)(5), or s	ection	
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), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." 1 Dues, assessments and similar amounts from members	ed "No," O	3)(5), or s	ection	
 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 answered "Yes." Dues, assessments and similar amounts from members 	ed "No," O	3)(5), or s	ection	
 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures) 	ed "No," O	3)(5), or s	ection	
 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 	ed "No," O	3)(5), or s R (b) Pa	ection	
 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year 	ed "No," O	3)(5), or s PR (b) Pa	ection	
 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 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 	ed "No," O	3)(5), or s PR (b) Pa	ection	
 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total 	ed "No," O	3)(5), or s PR (b) Pa 1 2a 2b 2c	ection	
 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 	ed "No," O	3)(5), or s PR (b) Pa 1 2a 2b 2c	ection	
 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the prior year 	ed "No," O	3)(5), or s PR (b) Pa 1 2a 2b 2c	ection	

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Nam	e of the organization Polk County Farm E	Rureau	Employer identification number 71-0392023
Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts Complete of the
	organization answered "Yes" to Form 990, Part IV, Iir		Accounts. Complete if the
	organization answered Tes (OTOMIT990, Part IV, III	(a) Donor advised funds	(b) Funds and other accounts
	Tatal number at and of year	(a) Bonor advised failes	(b) turius and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		-
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	-	
_	are the organization's property, subject to the organization's		└ Yes
6	Did the organization inform all grantees, donors, and donor		
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose confe	<u> </u>
Pai	impermissible private benefit?		Yes No
			, line /.
1	Purpose(s) of conservation easements held by the organization	· ——	
	Preservation of land for public use (e.g., recreation or	·	•
	Protection of natural habitat	Preservation of a certified h	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form of a c	conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st		2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	inization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		<u></u>
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170(h)(4)(
	and section 170(h)(4)(B)(ii)?		└─ Yes └─ No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes the o	rganization's accounting for
	conservation easements	At Historical Transvers or Other	Cimilar Assats
Pai	t III Organizations Maintaining Collections		Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex		f public service, provide, in Part XIII,
	the text of the footnote to its financial statements that desc		
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of public so	ervice, 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		▶ \$
2	If the organization received or held works of art, historical tro		, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items.	
а	Revenue included in Form 990, Part VIII, line 1		\$
h	Assets included in Form 990, Part X		▶ \$

		unty Farm						<u>71-03</u>	<u>92023</u>	3 Pag	<u>е 2</u>
Pai	t III Organizations Maintaining C										
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	t are a sig	nıfıcant	use of its	collection	items	
	(check all that apply):										
а	Public exhibition	C	ı 🗀	Loan or exc	hange progra	ıms					
b	Scholarly research	•	• 🗀	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	in how th	ney further t	he organizatio	on's exem	pt purpo	ose in Par	t XIII		
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	sures, or othe	er sımılar a	assets				
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	nization's co	ollection?				Yes		No
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if the	organizatio	n answered "	Yes" to Fo	orm 990	, Part IV, I	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	s or other as:	sets not in	cluded				
	on Form 990, Part X?		•						Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:							
		•	Ū						Amount		
c	Beginning balance						1c				_
	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990. Part X. line	21. for	escrow or cu	ustodial accoi	unt liability			Yes		No.
	If "Yes," explain the arrangement in Part XIII						, -			Fi.	
Par											
		(a) Current year		rior year	(c) Two year			ears back	(e) Four	vears ba	ck
1.	Beginning of year balance	(a) Current year	15/	1101 3041	(0))	S BUSIN 10	<u>,,</u>	our o buon	1071001	<u> </u>	<u></u>
1a	·		 		 				ļ		
b	Contributions										
С.	Net investment earnings, gains, and losses		 								—
ď	Grants or scholarships		 								
е	Other expenditures for facilities					-					
_	and programs		 		 						
T	Administrative expenses				 						—
g	End of year balance	L							L		
2	Provide the estimated percentage of the cur	rent year end baland		g, column (a	a)) neid as:						
а											
b	Permanent endowment >	%									
C	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c should										
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administer	red for the	organiz	ation	_		
	by.								<u>_</u>	Yes N	<u> </u>
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(II), are the related organization:	s listed as required o	on Sched	dule R?					3b		
4	Describe in Part XIII the intended uses of the	organization's ende	owment	funds							
Pai	t VI Land, Buildings, and Equipm	nent.									
	Complete if the organization answere	d "Yes" to Form 990), Part IV	, line 11a. S	ee Form 990,	Part X, lin	ne_10				
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Acc	umulate	d	(d) Book	value	
	· · · · · · · · · · · · · · · · · · ·	basis (invest	ment)	basis	(other)	depr	eciation				
1a	Land			6	8,350.				68	,350).
	Buildings				4,330.		56,10	65.		,165	
	Leasehold improvements										_
	Equipment			5	5,339.		53,40	66.	1	,873	- 3.
	Other										_
	Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X colur	nn (B) line 1	1001				468	.388	₹

2. 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

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

)	dule D (Form 990) 2014 POIK County Farm Bureau		71-0392023 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Sta		ue per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line	12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 1	
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	_2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	_2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	_4b	
С	Add lines 4a and 4b		4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	domente With Evne	5
Pai	t XII Reconciliation of Expenses per Audited Financial Sta		nses per Heturn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line	12a	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 1	
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
C	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b			
U	Other (Describe in Part XIII.)	4b	
C	Other (Describe in Part XIII.) Add lines 4a and 4b	4b	4c
c 5	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18		4c 5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.)	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5
5 Pai	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TX XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b, l	5

SCHEDULE 0

(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.

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

Polk County Farm Bureau	71-0392023
Form 990, Part VI, Section A, line 4:	
The organization updated the Articles of Incorporation ar	nd Bylaws.
Form 990, Part VI, Section A, line 6:	
The Organization is a mutual benefit organization.	
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 reviewed and signed by the Board President.	
Form 990, Part VI, Section B, Line 12c:	
The policy is reviewed when bids are taken on a new job	or contributions
are made to any entity.	
Form 990, Part VI, Section B, Line 15:	
The Organization does not have compensated officers or ma	anagement
officials.	
Form 990, Part VI, Section C, Line 19:	
Those deguments are not available to the public.	