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Form

Department of the Treasury Internal Revenue Service

BCA

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

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.irs.gov/form990.

A FOR	the 2015	calendar year, or tax year beginning , 2015, a				, 20
B Check	c if cable	C Name of organization GRAND FORKS COUNTY FARM BURE	CAUp			
	ss change	Doing Business as		45-	-0235	538
╡	change	Number & street (or PO box if mail is not delivered to street address) Room/suite	E	Telephone nu	mber	
4	return	1287 22ND ST NE		•		-7286
Final	return	City or town, state or province, country, and ZIP or foreign postal code	G	A	\$	26292.
/termi	nated ided return	EMERADO ND 58228	<u> </u>	receipts	group retu	
Apple			—, '	• •	• .	Yes X No
pendi	ng	F Name and address of principal officer PAUL GALEGHER 601 CRESENT DR THOMPSON ND 58278	١.		rdinates?	
		L			ubordinate tach a list	s included?
Тах-е	xempt statu	5 501(c)(3) X 501(c)(5) ∢ (insert no) 4947(a)(1) or 5	27	(see instr		Yes No
Webs	ite: 🕨			H(c) Group ex	emption num	
	of organization	Corporation Trust X Association Other ► L Yea	r of format	ion	M State	of legal domicile ND
Part		nmary				· · · · · · · · · · · · · · · · · · ·
1		escribe the organization's mission or most significant activities. PROMOTIC	ON O	F AGRIC	CULTU	RE AND
	RELA	TED ACTIVITIES				
ב						
Activities & Governance						
₽ 2	Check t	his box Fig. if the organization discontinued its operations or disposed of mor	e than 2	5% of its net	assets	
3 3		of voting members of the governing body (Part VI, line 1a)			3	7
8 4		of independent voting members of the governing body (Part VI, line 1b).	•		4	•
g ¬		mber of individuals employed in calendar year 2015 (Part V, line 2a)			5	
§ §		mber of volunteers (estimate if necessary)			6	
6					7a	10800
7		related business revenue from Part VIII, column (C), line 12			\rightarrow	10000
	b Net unr	elated business taxable income from Form 990-T, line 34		· · ·	. 7b	
1				Prior Year		Current Year
8	Contrib	utions and grants (Part VIII, line 1h)				15433
9 10	Program	n service revenue (Part VIII, line 2g)	·			
10	Investn	ent income (Part VIII, column (A), lines 3, 4, and 7d)	·L			59
11	Other re	evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				10800
12	Total re	venue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)				26292
13	Grants	and similar amounts paid (Part IX, column (A), lines 1-3)				
14	Benefit	s paid to or for members (Part IX, column (A), line 4)				
n 15	Salarie	s, other compensation, employee benefits (Part IX, column (A), lines 5-10)				2690
දී ₁₆		ional fundraising fees (Part IX, column (A), line 11e)				
a 1		ndraising expenses, (Part IX, column (D), line 25) ▶				
۵ ₁₇		xpenses (Part IX, column (A), lines 11a-11d, 11f-24e)				27264
18		penses Add lines 13-17 (must equal Part IX, column (A), line 25)				29954
		le less expenses Subtract line 18 from line 12			+	-3662
19	nevent	RECEIVED	Bea	inning of Curr	rent	
2	T-4-1		-	Year 2574		223047
[20		sets (Part X, line 16)	ผู่—	25/4		223041
Fund Balances 21	lotal lia	sets (Part X, line 16) bilities (Part X, line 26) ets or fund balances Subtract line 21 from line 29 nature Block	⇒ ا	2574	00	222017
ਕੋ 22	Net ass		3	2574	ا. ۵۷	223047
Part	3		•			
		erjury, I declare that I have examined this return, including accompanying scriedures and state				
ind beli	et, it is true,	correct, and complete Declaration of preparer (other than officer) is based on all information	of which	· . ·	•	-
				0	5/13/	2016
Sign		Signature of officer		Da		
Here		JANICE SAUER MU SCHU SECRETA	RY/T	REASUR	ER	
		Type or print name and title				
Paid	Pni	nt /Type preparer's name Preparer's apprature Date		Check	X tf	PTIN
Prepa	l	RANCIS L OPHAUG 2 05/		016 self-er		P01256434
Jse C		n's name ► ARVILLA BOOKKEEPING & TAX SV	-, -	Firm's EIN		-0324892
J.55 C	· ·	n's address PO BOX 67				343-2312
	l -m	ARVILLA ND 58214-		_ FIIONE NO	, , ,	7.10 2012
	. 100 :					▽ □
		uss this return with the preparer shown above? (see instructions)		: · · · · · · · · · · · · · · · · · ·		X Yes No
For Pa	nerwork l	Reduction Act Notice, see the separate instructions.				Form 990 (20

Form	990 (2015) GRAND FORKS COUNTY FARM BUREAU	45-0235538	Page 2
Par	Statement of Program Service Accomplishments		[▽]
1 `	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	X
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 serv If "Yes," describe these changes on Schedule O	ices? Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations and revenue, if any, for each program service reported.		
4a	(Code 611430) (Expenses \$ 5906. including grants of \$) PROMOTION OF AGRICULTURE IN GENERAL AND EDUCATION OF	(Revenue \$	
	AGRICULTURE. INFORM FARMERS AND THE GENERAL PUBLIC A AND TO PROMOTE FARMING AND ITS IMPORTANT PLACE IN SC	ABOUT AGRICUL	
	<u> </u>		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
		-	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$	
			 .
			-
		·	
4d	Other program services (Describe In Schedule O)		
	(Expenses \$ including grants of \$)(Revenue \$ Total program service expenses ► 5906.)	••

1 Is the organization described in section SOI(c)(3) or 494°(a)(1) (other them a private foundation?)* If "Yes," complete Schedule A. Schedule A. Schedule of Contributions (see instructions)? 2 Is the organization engage in direct or indexed political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C. Part II 3 Section SOI(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during that say year? If "Yes," complete Schedule C. Part II 5 Is the organization activities on Revenue Procedule C. Part II "Yes," complete Schedule C. Part III "Is the organization manuta and Revenue Procedule S-819" If "Yes," complete Schedule C. Part III "Is complete Schedule C. Part II "Is X "If It is complete Schedule C. Part II "Is X "Is Complete Schedule C. Part II "Is X "If It is total assets reported in Part X, inc 15" If "Yes, "complete Schedule D. Part V "Is X "In C. Part X "In C.	L GII	Checklist of Required Schedules		Yes	No
2 is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Pes," complete Schedule O, Part I and the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Pes," complete Schedule O, Part I and the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Pes," complete Schedule O, Part II as the organization assets on 501(o)(4), 501(c)(5), or 501(c)(5) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 8-197 If "Pes," complete Schedule O, Part II and the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment in such funds or accounts for which donors have the right to the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II asset organization for amounts not listed in Part X, in provide certed counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V and the organization's answer to any of the following quotients is "Yes," the momplete Schedule D, Part V and the organization's answer to any of the following quotients is "Yes," complete Schedule D, Part X by VII, VIII, IX, or X as applicable Did the organization report an amount for the mestiments - program related in Part X, line 197 thes," complete Schedule D, Part X by Did the org	1				
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Section 501(c/3) organizations. Dot 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 is the organization a section 501(c/4), 501(c/3), or 501(c/3) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 99.197 If "Yes," complete Schedule C, Part III is the organization as defined in Revenue Procedure 99.197 If "Yes," complete Schedule C, Part III is 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 is Did the organization mantan collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Is Did the organization amount in Part X, ine 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 If "Yes," complete Schedule D, Part IV If If the organization, directly or through a related organization, hold assets in temporary restricted andowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If If the organization shares to any of the following questions is "Yes," then complete Schedule D, Part V If If the organization amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V If Did the organization report an amount for investments - program related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 15 If "Yes," complete Schedule D, Part V If 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 15 If "Yes," complete Schedule D, Part X If Did the organization report an amount for other habities	3		,		Y
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column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	-		16		X
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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	17				
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	18		18		X
	19		40		v

Таі	Checklist of Required Schedules (continued)	· 1		
20-	Did the erganization energies and or more hospital facilities? If "Vec " complete School de U	200	Yes	No X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b	+	
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	34		Х
22	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		
22		22		Х
23	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's			
	current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		Х
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	-	
24a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	240		Х
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		
b	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	240		
	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	25-		
	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	256	ì	
	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?		İ	Х
	If "Yes,", complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		İ	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			Х
	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
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)	20-		X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	. 28a		^
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	001		Х
_	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)			v
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	. 28c		<u>X</u>
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			v
0.4	conservation contributions? If "Yes," complete Schedule M	. 30		$\frac{X}{X}$
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	. 31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			Х
22	If "Yes," complete Schedule N, Part II	. 32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		Х
24	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,			Х
25-	III, or IV, and Part V, line 1	. 34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. 35a		Λ
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	256		
26	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	20		
27	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		Х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37	 	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	20	Х	
	19? Note. All Form 990 filers are required to complete Schedule O	. 38		<u></u>

FG	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			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		1	.,
	gaming (gambling) winnings to prize winners?	1c		X
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			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			X
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		_ <u>^</u>
D	If "Yes," enter the name of the foreign country:			
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	50		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		 ^
	· · · · · · · · · · · · · · · · · · ·	5c		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	60	ĺ	X
h	organization solicit 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 were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	90		
	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		1
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		+
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		· · · · · ·	+
Ī	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
g	If the organization rec'd a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	Ţ		1
	Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		1
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
þ	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			i
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	1		
	Enter the amount of reserves on hand	44-	 	+-
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	+	+

Section A. Governing Body and Management

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

		I	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
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 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		Х	
_	members of the governing body?	7a	Λ	
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons	7b		Х
۰	other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during	70		
8	the year by the following.			
•	The governing body?	8a	X	
	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	- 05		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	nue C	ode.	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	, , , , , , , , , , , , , , , , , , , ,	12b		
С				
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13	ļ	X
14	Did the organization have a written document retention and destruction policy?	14		Λ
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?			
•	The organization's CEO, Executive Director, or top management official	15a		Х
d h	Other officers or key employees of the organization	15a		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	.55		
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		Х
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			
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	<i>(</i>)		
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website 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 financial 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 ► JANICE SAUER 1287 22ND EMERADO ND 58228 701-594-	./10	n	
	OUNTER DUCER 1701 STUD FUELVOO ND 20770 101-224.	-2 + 2		

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000
 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees; and former such persons

Check this box if neither the organization i	nor any rela	ted or	ganiza	ation	s co	mpen	sate	d any current officer,	director, or trustee					
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Former Former Former Former Former Former Former Former Former		Position (do not check more than one box, unless person is both an officer and a director/trustee)		(do not check more than one box, unless person is both an officer and a director/trustee)		Position eck more than one person is both an a director/trustee)		both an trustee)		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
						ed.		_						
(1)KRIS BATEMAN PRESIDENT	2 .	х		x				0	0	0				
(2)NATE STHLIEF VICE-PRES	11	Х		Х				0	0	0				
(3) JANICE SAUER SEC/TREAS	4	Х		Х				0	0	0				
(4)ROBERT DREES DIRECTOR	1	Х						0	0	0				
(5) LARRY NORD DIRECTOR	1	Х						0	0	0				
(6) DON UGLEM DIRECTOR	11			 					0	0				
(7) JEN FICHTNER -	1	Х						0						
DÎRECTÖR (8)		Х		<u> </u>				0	0	0				
<u>(9)</u>														
(10)				ļ —						<u>.</u>				
(11)		_												
(12)				-	-									
(13)				-	-									
(14)	 	_												
		<u> </u>	<u> </u>	<u> </u>	<u>L</u>	<u></u>	<u> </u>			<u> </u>				

Part VII Section A. Officers, Direct	ors, Trus	tees,	Key	Em	ploy	/ees,	anc	Highest Compe	nsated Employe	es (continued)
. (A) Name and title	(B) Average	box, u	not checuniess per and a	perso a dire	on ore the on is ector/	han one both an /trustee)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted 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
15)							-			
16)										
17)										
[18]										
(19)										
(20)						<u> </u>				
(21)				\dagger						
(22)					\vdash		\vdash			
(23)				 			-			
(24)				+						
(25)			-	+-	†-					
1b Sub-total					•		.▶	0	0	0
c Total from continuation sheets to Part								0	0	0
d Total (add lines 1b and 1c)							rec	<u></u>		compensation
from the organization	not minoc	lo uno	3C 1136	eu .	DO	<i>3)</i> ₩110	166	elveu illoie mail w.o	O,000 or reportable	Compensation
 Did the organization list any former office employee on line 1a? If "Yes," complete 5 For any individual listed on line 1a, is the the organization and related organizations individual 	S <i>chedule J</i> sum of rep	for su ortable	<i>ich ind</i> e com	<i>lividu</i> pens	<i>ual</i> satio	on and	othe	er compensation fron		. 4 X
5 Did any person listed on line 1a receive or services rendered to the organization? If		•				-		-	vidual for	5 X
Section B. Independent Contractors			·					·	2400 000 06	
 Complete this table for your five highest or compensation from the organization. Rep 										y vear
(A) Name and business		100	110	10 -	110	Aur yu.		(B) Description of se		(C) Compensation
							F			
							F			
2 Total number of independent contractors	(including)	hut no	+ limite	ed to	tho	se list	L ed a	hove) who received i	more than	w. k.
\$100,000 in compensation from the organ	-	Dut 110		10		50 1150	,	bove, who received i	nore than	· · · · · · · · · · · · · · · · · · ·

		Check if Schedule O contains a response or no				· · · · · · · · · · · · · · · · · · ·
"•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b	Federated campaigns				
S Oth	9	grants, and similar amounts not included above	1			
3 G	h	Total. Add lines 1a-1f	15433.			
	i	Business Code				
Program Service Revenue	2a _ b _ c _ d _ e					
P	ř -	All other program service revenue				
	g	Total. Add lines 2a-2f			7	
	3	Investment income (including dividends, interest, and other similar amounts)	59.	59.		
	6a b c	Royalties (I) Real (ii) Personal Gross rents Less rental expenses Rental income or (loss) 10800.				
	d 7a b	Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	10800.		10800.	
	c	Gain or (loss)	1			
	1	Net gain or (loss)			<u> </u>	
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 . a Less direct expenses . b				
ទី	C	Net income or (loss) from fundraising events				
		Gross income from gaming activities See Part IV, line 19 Less direct expenses . b				
	C	Net income or (loss) from gaming activities		-		
	ь	Gross sales of inventory, less returns and allowances a Less cost of goods sold b Net income or (loss) from sales of inventory . ▶				
		Miscellaneous Revenue Business Code				
	11a b c					
	1	All other revenue ,				
	е	Total. Add lines 11a-11d .		l	<u></u>	
	12	Total revenue. See instructions ▶	26292.	59.	10800.	

Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising Do not include amounts reported on lines 6b, (A) Total expenses (B) (C) Management and Program service 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals See Part IV. line 22 3 Grants and other assistance to foreign organizations, foreign goverments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members 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 ---8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). 2690. 2690. 9 Other employee benefits . 10 Payroll taxes 11 Fees for services (non-employees) Management а b Legal 310. 103. 207. C Accounting d Lobbying е Prof. fundraising services See Part IV, line 17 170. 170. Investment management fees f Other (If line 11g amount exceeds 10% of line 25, g col. (A) amount, list line 11g expenses on Sch O) 3788. 1261. 2527. 12 Advertising and promotion 794. 264. 530. 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 2011. 2011. 17 Travel 18 Payments of travel or entertainment expenses 6887. 6887 for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 21 Payments to affiliates 4303. 4303. 22 Depreciation, depletion, and amortization 1056. 352. 704. 23 Insurance 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 200 JANITORIAL 134. 66. PROPERTY TAX 2345. 2345. RENT 4400. 4400. C SCHOLARSHIPS 1000. 1000. đ All other expenses 29954. 5906. 24048. 25 Total functional expenses. Add lines 1 through 24e 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 ▶ ıf following SOP 98-2 (ASC 958-720)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X . (A) (B) Beginning of year End of year 2029. 2032. 1 28089. 27496. 2 2 Savings and temporary cash investments . . 3 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete 6 Part II of Schedule L . . 7 7 Notes and loans receivable, net . . 8 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 Land, buildings, and equipment cost or other 234323. basis. Complete Part VI of Schedule D 10a 57260. 10c 52957. 177063. Less accumulated depreciation 10b ь 11 11 Investments - publicly traded securities 170109. 140565. 12 Investments - other securities. See Part IV, line 11 . . 12 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 257490. 223047. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ | and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here $\blacktriangleright [\overline{X}]$ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 257490 223047. 32 32 Retained earnings, endowment, accumulated income, or other funds 257490. 223047. 33 33 Total net assets or fund balances 223047. 257490. 34 34 Total liabilities and net assets/fund balances

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2015)

3a

b

the Single Audit Act and OMB Circular A-133?

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

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

	see separate instructions), then section 501(c)(4), (5), or (6) on	ganizations Complete Part III			
Name	e of organization			Em	ployer identification number 45-0235538
	RAND FORKS COUN			44-1	
		the organization is exempt			527 organization.
1	-	organization's direct and indirect poli			_
2	· · · · · · · · · · · · · · · · · · ·				> \$
3	Volunteer hours				· · ·
Pa	irt I-B Complete if	the organization is exempt	under section 50)1(c)(3).	
1 2		ise tax incurred by the organization ise tax incurred by organization man			. > \$
3	= = = = = = = = = = = = = = = = = = =		-		
	-	section 4955 tax, did it file Form 47			
					., Yes No
_	If "Yes," describe in Part IV	the organization is exempt	under costion E0)1/a) aveant costic	= E04(a)(2)
۲	rt I-C Complete if	the organization is exempt	under Section 50	ric), except secuc	ni 501(C)(S).
4	F-44b	and developed by			. .
1	•	pended by the filing organization for	*		. 🕶
2		g organization's funds contributed to	_		
_					. > \$
3	-	ditures Add lines 1 and 2 Enter her			
_	1120-POL, line 17b				
4		e Form 1120-POL for this year?			
5		and employer identification number			
	· •	rganization listed, enter the amount			•
		vere promptly and directly delivered t		•	separate segregated fund
	······································	ee (PAC). If additional space is need	T .	1	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	
	-			filing organization' funds If none, enter	
				i dilas ii lisilo, silas	delivered to a separate
					political organization if
					none, enter -0-
(1)	-		_		
(2)					
(3)					
	<u>.</u>				
(4)					
(5)					
,					
(6)					

Part	: II-B	Complete if the organization is exempt under section 501(c)(3) and has 5768 (election under section 501(h)).	NOT	filed	Form		
For ea	ch "Yes" r	esponse on lines 1a through 1ı below, provide in Part IV a detailed description of the	(a	a)		(b)	
	a activity		Yes	No		Amoun	t
1 a	During the including through Voluntee	ne year, did the filing organization attempt to influence foreign, national, state or local legislation, any attempt to influence public opinion on a legislative matter or referendum, the use of					
b	Paid sta	ff or management (include compensation in expenses reported on lines 1c through 1i)?					
С		dvertisements?					
d		to members, legislators, or the public?		-			
е	_	ions, or published or broadcast statements?					
f		o other organizations for lobbying purposes?					- "
g		ontact with legislators, their staffs, government officials, or a legislative body?					
h		demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i		zivities?					
i		Id lines 1c through 1ı					
2 a		activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b		enter the amount of any tax incurred under section 4912					
c		enter the amount of any tax incurred by organization managers under section 4912			<u> </u>		
ď		ng organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	III-A	Complete if the organization is exempt under section 501(c)(4), section	501/	~\/5\	O.		
T GI	- III A	section 501(c)(6).	3011		, 01		
						Ye	s No
1	Were si	ibstantially all (90% or more) dues received nondeductible by members?			1	1 2	
2		organization make only in-house lobbying expenditures of \$2,000 or less?				2	X
3		organization agree to carry over lobbying and political expenditures from the prior year?				3	$\frac{1}{X}$
	III-B	Complete if the organization is exempt under section 501(c)(4), section				•	1 21
		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, a	ssessments and similar amounts from members		1			
2	Section	162(e) nondeductible lobbying and political expenditures (do not include amounts of political					•
	expens	es for which the section 527(f) tax was paid).					
а	Current	year		2a			
b	Carryov	er from last year		2b			
С	Total			2c			
3	Aggrega	ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4		s were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess of					
	the orga	inization agree to carryover to the reasonable estimate of nondeductible lobbying and political					
		ture next year?		. 4	1		
5	Taxable	amount of lobbying and political expenditures (see instructions)		5	İ		
Par	t IV	Supplemental Information			<u> </u>		•
			Part I	I-A. lır	nes 1 and		•
2 (see	separate	instructions), and Part II-B, line 1 Also, complete this part for any additional information IP DUES 15174					
2 (see	separate		Part I	I-A, lır	nes 1 and		
		· · · · · · · · · · · · · · · · · · ·					
						-	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

➤ Attach to Form 990.

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

OMB:No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

Gŀ	RAND FORKS COUNTY FARM BUREAU		45-0235538
Pa	rt l Organizations Maintaining Donor Ad		nds or Accounts.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors	s in writing that the assets held in donor adv	vised funds
	are the organization's property, subject to the organizatio	n's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and don for charitable purposes and not for the benefit of the donimpermissible private benefit?	or or donor advisor, or for any other purposition	e conferring
Pa	rt II Conservation Easements. Complete	if the organization answered "Yes"	on Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organ	ization (check all that apply)	
	Preservation of land for public use (e.g., recreation o	r education) Preservati	on of a historically important land area
	Protection of natural habitat	Preservati	on of a certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization held a q	ualified conservation contribution in the for	m of a conservation easement on the
	last day of the tax year		Held at the End of the Tax Year
а			2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic		
	Number of conservation easements included in (c) acqui	` '	
_	• • • • • • • • • • • • • • • • • • • •		. 2d
3	Number of conservation easements modified, transferred		
-	the tax year		and organization carmig
4	Number of states where property subject to conservation	easement is located >	
5	Does the organization have a written policy regarding the		 of violations
-	and enforcement of the conservation easements it holds		Yes No
6	Staff and volunteer hours devoted to monitoring, inspects		
•	>	3	,
7	Amount of expenses incurred in monitoring, inspecting, h	nandling of violations, and enforcing conser	vation easements during the year
Ť	▶ \$		· · · · · · · · · · · · · · · · · · ·
8	Does each conservation easement reported on line 2(d)	above satisfy the requirements of section 1	70(h)(4)(B)(ı)
-	•		Yes No
9	In Part XIII, describe how the organization reports conse		nse statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organ	·	
	conservation easements		•
Pa	rt III Organizations Maintaining Collectio	ns of Art, Historical Treasures. o	r Other Similar Assets.
	Complete if the organization answered	•	
1 :	a If the organization elected, as permitted under SFAS 116		tement and balance sheet works of art.
	historical treasures, or other similar assets held for public		
	in Part XIII, the text of the footnote to its financial statem		•
(b If the organization elected, as permitted under SFAS 116		ent and balance sheet works of art,
	historical treasures, or other similar assets held for publi		
	following amounts relating to these items	, , , , , , , , , , , , , , , , , , , ,	
	(i) Revenue included on 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		ncial gain, provide the following amounts
-	required to be reported under SFAS 116 (ASC 958) relat		gain, provide the following amounts
	a Revenue included on Form 990, Part VIII, line 1	g to those home.	▶ \$
	b Assets included in Form 990, Part X		> \$
			· · · · · · · · · · · · · · · · · · ·

Pai	(continued)	ning Collections of Art, I	HISTORICAI Treasure	es, or Other Simil	ar Assets	}	
3.	Using the organization's acquisition, acc	ession, and other records, chec	k any of the following th	at are a significant use	of its collec	tion its	ems
	(check all that apply)		,				
a	Public exhibition		d Loan or exchang	ie programs			
ь	Scholarly research		e Other				
c	Preservation for future generations						
'	Provide a description of the organization	n's collections and explain how t	hey further the organiza	tion's exempt purpose i	in Part XIII		
	During the year, did the organization sol	•	•				
	to raise funds rather than to be maintain					es	No
		Arrangements. Comple			to Form	990,	
		ted an amount on Form 9					
1a	Is the organization an agent, trustee, cur	stodian or other intermediary for	r contributions or other a	ssets not included	_		
	on Form 990, Part X?				[] Y	'es	∐ No
b	If "Yes," explain the arrangement in Part	XIII and complete the following	table [.]				
					Ar	mount	
С	Beginning balance			1c			
d	Additions during the year			1d			
e	Distributions during the year						
f				<u>1f</u>	<u> </u>		रहा -
	Did the organization include an amount			•		'es	X No
	If "Yes," explain the arrangement in Part					<u></u>	Ш
۲a	······································	Complete if the organization		· · · · · · · · · · · · · · · · · · ·			- L - · ·
4-	(a) Current y	ear (b) Prior year	(c) Two years back	(d) Three years back	k (e) Fo	ur year	rs back
та	Beginning of year						
_	balance						
	Contributions Net investment			 	-		
·	earnings, gains,						
	and losses						
	Grants or scholarships Other expanditures						
e	Other expenditures for facilities and						
				1			
f	programs Administrative				+		
•	expenses						
	End of year balance						
2	Provide the estimated percentage of the	current year end balance (line	1a column (a)) held se	· · · · · · · · · · · · · · · · · · ·			
- a	Board designated or quasi-endowment	0 00	-51 -0.0 (4// 11014 45				
b	Permanent endowment ► 0.00	 %					
	Temporarily restricted endowment ▶	0.00 %					
	The percentages on lines 2a, 2b, and 2						
3a	Are there endowment funds not in the p		nat are held and adminis	tered for the organizati	on by	Ye	s No
	(i) unrelated organizations					a(i)	
	(ii) related organizations				⊢	ı(ii)	
b	If "Yes" on line 3a(ii), are the related org	ganizations listed as required on	Schedule R?			lb	
4	Describe in Part XIII the intended uses		nt funds				
Pa	rt VI Land, Buildings, and I						
		ation answered "Yes" on F	Form 990, PartIV, Iir	T	990, Part	X, lin	e 10.
	Description of property	(a) Cost or other	(b) Cost or other	(c) Accumulated	(d)	Book v	alue
	-	basis (investment)	basis (other)	Depreciation		~= -	
	Land		37,091.	100 651)91.
	Buildings		119,540.	103,674.		15,8	366.
	Leasehold improvements		77.600	77.600			
	Equipment		77,692.	77,692.			
	Other		1 (5) (12)	<u> </u>		<u> </u>	757
	I. Add lines 1a through 1e (Column (d)	must equal Form 990, Part X, co	olumn (B), line 10c)				957.
BCA				Sch	edule D (F	orm 99	901 2015

Part VII	Investments - Other Securities.						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12						
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market-value				
1) Financial	derivatives	140,565.	END OF YEAR				
	eld equity interests						
3) Other							
(A)		_					
(B)							
(C)							
(D)							
(E)							
(F)							
(G) (H)							
	nn (b) must equal Form 990, Pārt X, col. (B) line 12.) ▶	140,565.					
Part VIII	Investments - Program Related.						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.						
	(a) Description of investment type	(b) Book value	(c) Method of valuation.				
			Cost or end-of-year market value				
(1)							
(2)			e-				
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)	nn (b) must equal Form 990, Part X, col. (B) line 13.) ▶						
Part IX	Other Assets.	<u> </u>					
Tartin		rt IV, line 11d. See Form 990, Part X, line 15.					
	(a) Descript	(b) Book value					
(1)	(1)						
(2)							
(3)							
(4)							
(5)			<u>-</u>				
(6)							
(7)							
(8)							
(9)	41 - 45 - 45 - 45 - 45 - 45 - 45 - 45 -		_				
Part X	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.		<u> </u>				
PartA		Yes" on Form 990, F	Part IV, line 11e or 11f. See Form 990, Part X				
	line 25	,					
1.	(a) Description of Liability	(b) Book value					
(1) Federal I	ncome Taxes						
(2)	-						
(3)							
(4)							
(5)							
(6)							
		i					
(7)		 	<u></u>				

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

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 O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

OMB.No 1545-0047 Open to Public Inspection

Employer identification number

GRAND FORKS COUNTY FARM BUREAU	45-0235538
PART VI, LINE 11B	
RECORDS AND ALL FINANCIAL STATEMENTS ARE REVIEWED ANNUAL	LY
BY TH BOARD OF DIRECTORS PRIOR TO THE FILING OF THIS TAX	
RETURN AND RESULTS MADE AVAILABLE TO ALL MEMBERS.	
PART III	
NO CHANGES	
•	-