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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2015

Open to Public

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

Inspection

<u> </u>	For the 2	015 cale	endar year, or tax year beginning 9-1 , 2015, and endir			, 20 16
В	Check if ap	plicable	C Name of organization Okmulgee County Farm Bureau	D	Employ	er identification number
	Address ch	nange	Doing business as			73-0770880
П	Name char	-	Number and street (or P O box if mail is not delivered to street address) Room/su	ute E	Telepho	ne number
$\overline{\mathbb{Z}}$	Initial retur	•	610 E. 6th Street			918 756.7284
\Box	Final return/					
\exists				l _e	Gross re	eceipts \$ 179,056 73
님	Amended		Okmulgee, OK 74447			subordinates ⁷ Yes No
ليا	Application	n pending	F Name and address of principal officer James Pittman			
			4599 Bixby Rd., Okmulgee, Ok. 74447			s included? Yes No a list (see instructions)
<u> </u>	Tax-exemp		☐ 501(c)(3)	— i		
<u>J</u>	Website:			H(c) Group ex		
			✓ Corporation Trust Association Other ► L Year of forma	ition 1942	M State	of legal domicile OK
Р	art I	Summ		<u></u>		······································
	1 E	Briefly di	escribe the organization's mission or most significant activities: Agricu	ultural Members	hip Orc	ganization
Se						
Governance	<u> </u>					.,
/er	2 (Check th	nis box ▶☐ if the organization discontinued its operations or disposed	of more than 2	5% of	its net assets.
ő	3 1	lumber	of voting members of the governing body (Part VI, line 1a)		3	7
≪	4 1	lumber	of independent voting members of the governing body (Part VI, line 1b))	4	7
ies	5 T	otal nur	mber of individuals employed in calendar year 2015 (Part V, line 2a)		5	-0-
₹	1		mber of volunteers (estimate if necessary)		6	
Activities &	1		related business revenue from Part VIII, column (C), line 12		7a	126,145.18
	1		elated business taxable income from Form 990-T, line 34		7b	9,703 65
); ₩7		iot di iio	nated business taxable incerns well to only one 1, into ext.	Prior Year		Current Year
	8 0	ontribu	ıtions and grants (Part VIII, line 1h)	17	137.50	18,275.50
Revenue	1		anning revenue (Port VIII line Oct)		137.30	10,273.30
ž į	10	nvootma	ent income (Part VIII, line 2g)		345.06	2,170 52
Z 2	10 li)+bor ro	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
7			· · · · · · · · · · · · · · · · · · ·		001.04	126,145.18
<u> </u>	12 T		renue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	147,	483.60	146,591.20
Expenses (13 (and similar amounts paid (Part IX, column (A), lines 1–3)			
3	14 E		paid to or for members (Part IX, column (A), line 4)		925.18	
ŞŞ	15 5		other compensation, employee benefits (Part IX, column (A), lines 5–10)	82,	164.73	73,816.05
	16a F		onal fundraising fees (Part IX, column (A), line 11e)			
Ž	b]		ndraising expenses (Part IX, column (D), line 25)			
ш	''		penses (Part IX, column (A), lines 11a-11d, 11f-24e)		786.83	70,685.61
	18 T	fotal exp	penses. Add lines 13-17 (must equal Part IX, column (A), line 25) .	157,	<u>876.74</u>	165,168 53
	19 F	Revenue	e less expenses. Subtract line 18 from line 12		393.1 <u>4)</u>	(18,577.33)
5 6	3			Beginning of Curre	ent Year	End of Year
sets	20 T	Total ass	sets (Part X, line 16)	811,	306.42	764,315.92
Net Assets or Fund Balances	21 T	Total liat	bilities (Part X, line 26)	603,	233 54	574,820.37
Ž	22 1	let asse	ets or fund balances. Subtract line 21 from line 20	208,	072.88	189,495.55
P	art II	Signa	ture Block			
Ur	nder penalti	es of perj	ury, I declare that I have examined this return, including accompanying schedules and state	ements, and to the	best of	my knowledge and belief, it is
tru	ie, correct,	and comp	plete Declaration of preparer (other than officer) is based on all information of which prepare	er has any knowled	ge 	
			Lamos D. Hmm			
Sig	gn	Sig	philips of officer	Date	,	1
He	ere	1	Tames Pittman		lale	29/2016
		Тур	ne or print name and title			
Pa		Print/Ty	ype preparer's name Preparer's signature	Date	Check	T If PTIN
		Laura	Morey Sauras. Morey	2-2-12	self-em	
	eparer			Firm's	EIN ▶	73-0382001
US	se Only		address ► 2501 N. Stiles, Oklahoma City, Ok. 73105	Phone		405.523.2300
M	v the IRS		ss this return with the preparer shown above? (see instructions)			· · · · · · Yes · No
_				No 11282Y		Form 990 (2015)

Other program services (Describe in Schedule O.) including grants of \$) (Revenue \$ Total program service expenses > Form **990** (2015)

Form 99		_		age 3
Part	V Checklist of Required Schedules		Yes	- NI-
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		res	No
•	complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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		1
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		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	>	
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	_	√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		√
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		, 13 to	•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	√	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	√
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓_
Б	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		√
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 (see instructions)	17		√
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		√
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		▼

Form 99	0 (2015)		F	Page 4
Part	V Checklist of Required Schedules (continued)			
20 -	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	200	Yes	No
zo a b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		1
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>√</u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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	_	1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√ ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	,		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		<u>√</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		√
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	35b		
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,	36		<u> </u>
38	Part VI	37		✓
	19? Note. All Form 990 filers are required to complete Schedule O.	38		✓

c Enter the amount of reserves on hand

Check if Schedule O contains a response or note to any line in this Part V Type N Ty	Part	V Statements Regarding Other IRS Filings and Tax Compliance				age
a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 2b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable payments to vendors and reportable garming gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return? 3b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3c Dot the organization have unrelated business gross income of \$1,000 or more during the year? 3c Dot the organization have unrelated business gross income of \$1,000 or more during the year? 3c Dot the organization have unrelated business gross income of \$1,000 or more during the year? 3d Dot the organization have unrelated business gross income of \$1,000 or more during the year? 3d Dot the organization have unrelated business gross income of \$1,000 or more during the year? 3d Dot if 'Yes,' enter the name of the foreign country (such as a bank account, accurriles account, or other financial account; 3d Dot if 'Yes,' enter the name of the foreign country (such as a bank account, accurriles account, or other financial account; 3d Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5d Dos she organization a party to a prohibited tax shelter transaction at any time during the tax year? 5d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization file form 8886-17? 5d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7d Does the organization file form 8888-17? 7d If 'Yes,' did the organization include with every soli	Part					Г
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c. Comparison of the properties of the p		Greek in derication of derivation of their to any into in this tract of the contract of the co			Yes	No
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c. Comparison of the properties of the p	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garning (gambling) winnings to prize winners? 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 bit at least one is reported on line 2d, did the organization file all required deteral employment tax returns? Note, if the sum of lines 1 and 2 as greater than 250, you may be required to e-rife (see instructions). 3b Cit the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a Form 990-T for this year? if "No" to line 3b, provide an explanation in Schedule 0. 4d At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; less see instructions for filing requirements for FinCBN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction? or lif" "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? or lif" "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? or lif" "Yes" to line 5a or 5b, did the organization that was or is a party to a prohibited tax shelter transaction? or lift was organization and any contributions that were not tax deductible as charitable contributions? 5b / "I" Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 7 Draganizations and that may receive deductible contributions under section 170(e). 8 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8202? 9 If "Yes," indicate the number of Forms 8282 filed during the year 10 Did the organiza	_					
The propriable gaming (gambling) winnings to prize winners? 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2 as greater than 250, you may be required to e-file (see instructions) 3b If it Yes, "has it filed a Form 990-Tf for this year? If "Not" or line 3b, provide an explanation in Schedule 0. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. ► 5ee instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b If "Yes," enter the name of the foreign country: ► 5c enter the name of the foreign country: ► 5c enter the name of the foreign country (such as a bank account, securities account, or other financial account)? 6b If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account)? 7c If "Yes," enter the name of the foreign country. ► 5c enter the name of the foreign country (such as a party to a prohibited tax shelter transaction? 6c If Yes," of the ine 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization neceive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 9b If "Yes," indicate the number of Forms 8282 filed during the			to vendors and			
Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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? b If "Yes," has it filed a Form 990-T for this year? If "Yo file 3b, provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country. 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) 15a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Uf If "Yes," did the appropriation that it was or is a party to a prohibited tax shelter transaction? 16a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions or grifts were not tax deductible? 15 Uf If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax 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? b If "Yes," indicate the number of Forms \$282 filed during the year 17b Jut the organization encieve any funds, directly or indirectly, to pay premiums on a personal benefit contract? 17c Jut the organization encieve any funds, directly or indirectly, on a personal benefit contract? 17d If the organization encie				1c		
Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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? b If "Yes," has it filed a Form 990-T for this year? If "Yo file 3b, provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country. 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) 15a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Uf If "Yes," did the appropriation that it was or is a party to a prohibited tax shelter transaction? 16a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions or grifts were not tax deductible? 15 Uf If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax 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? b If "Yes," indicate the number of Forms \$282 filed during the year 17b Jut the organization encieve any funds, directly or indirectly, to pay premiums on a personal benefit contract? 17c Jut the organization encieve any funds, directly or indirectly, on a personal benefit contract? 17d If the organization encie	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "Yes" to line 3b, provide an explanation in Schedule O Ala At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," refer the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the refer the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the refer the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the organization stantance and the variation of the form 104 filing foreign and filing foreign and f			2a			
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "Yes" to line 3b, provide an explanation in Schedule O Ala At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," refer the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the refer the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the refer the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," the organization stantance and the variation of the form 104 filing foreign and filing foreign and f	b		ax returns? .	2b		
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which		·		70		./
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h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Ital Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which	'					
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?	9 h			_		<u> </u>
sponsoring organization have excess business holdings at any time during the year?						
9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966?	_		-	8		
a Did the sponsoring organization make any taxable distributions under section 4966?	9					
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		· · · · · · · · · · · · · · · · · · ·		9a		
Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	b		son?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders	10	· · · · · · · · · · · · · · · · · · ·				
Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders	а	• • • •	10a			
a Gross income from members or shareholders	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b			
a Gross income from members or shareholders	11	Section 501(c)(12) organizations. Enter:			i	
against amounts due or received from them.)	а	Gross income from members or shareholders	11a		i	
Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b	· · · · · · · · · · · · · · · · · · ·				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		· ·				
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?	12a			12a		
 a Is the organization licensed to issue qualified health plans in more than one state? b 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 		· · · · · · · · · · · · · · · · · · ·	12b			
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	13					
b Enter the amount of reserves the organization is required to maintain by the states in which	а	· · · · · · · · · · · · · · · · · · ·		13a		
			e O.			
	O		136			

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

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

14a

14b

13c

Form 99	90 (2015)				Page 6
Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in				
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u> </u>	<u> </u>	<u>. D</u>
Secti	on A. Governing Body and Management			1.2	T-:-
	Established of African and American States and			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 1	a			
	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 .	h 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rela		/ith		
	any other officer, director, trustee, or key employee?	•	. 2		✓
3	Did the organization delegate control over management duties customarily performed by or und	der the dir	ect		
	supervision of officers, directors, or trustees, or key employees to a management company or other p	erson?	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 v	vas filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's	s assets?		 	1
6	Did the organization have members or stockholders?		. 6		↓
7a	Did the organization have members, stockholders, or other persons who had the power to ele one or more members of the governing body?				
_	one or more members of the governing body?			· 🗸	+
ь	stockholders, or persons other than the governing body?			, İ	1
8	Did the organization contemporaneously document the meetings held or written actions under				1000
	the year by the following:		ű.	4	
а	The governing body?		. 8a	1	
b	Each committee with authority to act on behalf of the governing body?		8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be	e reached	l at		
					√
Secti	on B. Policies (This Section B requests information about policies not required by the li	nternal Re	<u>evenue (</u>		
40-	Did the averagination have lead shooten have shown as affiliate -0		40	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	 ich chante	. 10a		/
•	affiliates, and branches to ensure their operations are consistent with the organization's exempt			,	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	*			1
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	3	✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris)	
С	Did the organization regularly and consistently monitor and enforce compliance with the poli	cy? If "Y ϵ		ļ	
	describe in Schedule O how this was done		120		
13	Did the organization have a written whistleblower policy?		_		/
14 15	Did the organization have a written document retention and destruction policy?		hy 14		-
.0	independent persons, comparability data, and contemporaneous substantiation of the deliberation and				
а	The organization's CEO, Executive Director, or top management official			3	
b	Other officers or key employees of the organization			2	
	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	arrangem	ent 🔀		
	with a taxable entity during the year?		16a	3	✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to				
	participation in joint venture arrangements under applicable federal tax law, and take steps to sorganization's exempt status with respect to such arrangements?	aleguard	16k		
Secti	on C. Disclosure		100	<u> </u>	Ь
17	List the states with which a copy of this Form 990 is required to be filed ▶ Oklahoma				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	990-T (Se	ction 50	1(c)(3)s	s only)
	available for public inspection. Indicate how you made these available. Check all that apply.	,		, ,,-,-	.,,
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Sched	lule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents	, conflict o	of interes	t polic	y, 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 ar	id record	s:►	
	Oklahoma Farm Bureau, 2501 N. Stiles, OKC, OK 73105 405.523.2300				

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Page **7**

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

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 no	r any relate	d orga	anız	atio	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					an		(E) Reportable compensation from related	
	week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Schedule Attached			 		(
(2)										
(3)										
(4)										
(5)										
(6)										
(7)	_									
(8)										
(9)										
(10)									_	
(11)										
(12)										
(13)										
(14)	ļ									

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
]	}			C)								
	(A)	(B)	(do n	ot ch		ition	than o	one	(D)	(E)		(1	F)	
	Name and title	Average hours per	verage box, unless person is bo					n an	Reportable compensation	Reportable compensation from		Estimated amount of		
		week (list any		T	_		or/trust		from	related	WOITI	other		
		hours for related	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizatio (W-2/1099-M		-	nsation the	
		organizations	ecto	utio	1	due	est c	횩	(W-2/1099-MISC)		,50,		ization	
		below dotted line)	7 =	nai t]	loye	ğ						elated zations	
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(16)														
(17)	·	ļ	ļ		Į		ĺ		ļ					
				_	<u> </u>	<u> </u>		_						_
(18)		 					 	}						
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(19)		 	1											
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(21)			-	-	\vdash	H	-	-						_
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(22)														
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(24)			}				}	1						
(25)				-	\vdash	-								
123)			ł											
1b	Sub-total						L	<u> </u>			-+			—
С	Total from continuation sheets to Part		n A					•			_			_
d								▶						
2	Total number of individuals (including but	t not limited	to th	nose	list	ted	above	- ∋) w	ho received m	ore than \$10	000,000	of		
	reportable compensation from the organi	zation >							·					_
_				_									Yes N	<u> </u>
3	Did the organization list any former of							emp	oloyee, or high	est compe	nsated	, , , , , , , , , , , , , , , , , , , 		<u> </u>
4	employee on line 1a? If "Yes," complete s										 Al	3		
4	For any individual listed on line 1a, is the organization and related organizations													
	individual	greater th	απ ψ					., 				4	_	,
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsat	tion	froi	m anv	un	related organiz	ation or ind	ividual		Ť	
	for services rendered to the organization											5	7	,
Section	on B. Independent Contractors													_
1	Complete this table for your five highest													
	compensation from the organization. Rep	oort compe	nsatio	on fo	or th	ne c	alend	lar y	ear ending wit	h or within t	he org	janizatio	n's tax	
	year.													
	(A) Name and business add	Iress							(B) Description of s	ervices	í	(C) Compensa	ation	
								}-						_
						-		-						_
							_	t^-						_
								Γ						_
2	Total number of independent contractor							o th	nose listed abo	ove) who				
	received more than \$100,000 of compens	ation from	tne or	gan	ızat	ion	▶			i				

	990 (20 t VIII		enue				.	Page
		Check if Schedule C		sponse or note t	o any line in thi	e Dart VIII		_
				sponed of Hote ((A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
Gifts, Grants llar Amounts	1a	Federated campaigns	s 1a					012 014
ts, Grants Amounts	b	Membership dues .	1b	18,275.50		***************************************		
An A	C	Fundraising events .	1c		1			
ig ig	d	Related organizations			1			
	е	Government grants (con	itributions) 1e		1		ł	
er S	f	All other contributions, gi	ıfts, grants,		1			,
호		and similar amounts not inc	""				1	
Contributions, Gift and Other Similar	g	Noncash contributions include						
	h	Total. Add lines 1a-1	<u>f</u>	<u></u> >	18,275.50			<i>r.</i>
Пе				Business Code	, ,	. •	** .	* **
eve	2a							
ě	b	*					 	
<u>Ş</u> .	С							
Š	d							
ra E	е							
Program Service Revenue	f	All other program serv	ice revenue .					
	<u> 9</u>	Total. Add lines 2a-21	<u> </u>	<u></u> . ▶				18 19 19 19 18 18 18 18 18 18 18 18 18 18 18 18 18
	3	Investment income ((including divid					
	_	and other similar amo		· · · · •	2,170.52			2,170.5
	4	Income from investment	of tax-exempt b	ond proceeds ►				
	5	Royalties	· · · · ·					
	_		(ı) Real	(II) Personal				
	6a	Gross rents	46,200.00	 				
	b	Less rental expenses	32,465.53					
	C	Rental income or (loss)	13,734.47		* / * *			
	d Zo	Net rental income or (I			13,734.47		13,734.47	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				
	b	Less: cost or other basis			* 1			***
İ	D	and sales expenses			*		į į	ļ., \$.
	С	Gain or (loss)						
		Net gain or (loss) [
	u	iver gain or (ioss) .		· · · · •				
e l	8a	Gross income from fur	ndraising					
en		events (not including \$	laraising					
ا <u>چ</u>		of contributions reported	d on line 1c)					
Other Revenue		See Part IV, line 18	· · a					
둦	b	Less: direct expenses					,	
٠	С	Net income or (loss) from	om fundraising i	events . >				
	9a	Gross income from gan	ning activities	events .				
		See Part IV, line 19 .			İ			
	b	Less: direct expenses	b			i		
- 1	С	Net income or (loss) fro	om gaming activ	/ities ▶	-			
	10a	Gross sales of inve	entory, less [
}		returns and allowances	5 · · · a					
	b	Less: cost of goods so	ld b		ļ			
	С	Net income or (loss) fro	m sales of inve	ntory ►				
L		Miscellaneous Rev		Business Code				
		OFFICE COMMISSIONS		524113	1,736.35		1,736.35	
	b	OFFICE COMMISSIONS		524126	97,608.16			
	C	SALARY REIMBURSEME	NT	524126	13,066.20		97,608.16	
	d	All other revenue .			70,030.20		13,066.20	
	e	Total. Add lines 11a-11	1d	•	112,410.71			
	12	Total revenue. See ins	tructions	<u></u> ▶ □	146,591.20	18,275.50	120 145 15	
					10,931,40	19,4/3,30	126,145.18	2,170,52 Form 990 (2015)

Part IX	Statement of Functional Expe	nses
---------	------------------------------	------

Sectio	n 501(c)(3) and 501(c)(4) organizations must con									
Check if Schedule O contains a response or note to any line in this Part IX										
	t include amounts reported on lines 6b, 7b, , 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									
2	Grants and other assistance to domestic individuals. See Part IV, line 22									
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16									
4 5	Benefits paid to or for members	20,666.87		*						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)									
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	73,816.05								
9	Other employee benefits									
10	Payroll taxes	5,804.31								
11	Fees for services (non-employees):			1						
a b	Management ,									
c	Accounting	300.00								
d	Lobbying	300.00		<u> </u>						
e	Professional fundraising services See Part IV, line 17		1 11 1	电话管						
f	Investment management fees									
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)									
12	Advertising and promotion	4,033.40								
13 14	Office expenses	4,766.10	 .							
15	Royaltres			 						
16	Occupancy	28,296.25								
17	Travel	1,127.12								
18	Payments of travel or entertainment expenses			1						
	for any federal, state, or local public officials				ļ ————					
19	Conferences, conventions, and meetings . Interest	0.1-0.1-1		 						
20 21	Interest	6,172.27		 	 					
22	Depreciation, depletion, and amortization .	12,903.85								
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)									
а	Federal Income Tax	1,255.31		<u> </u>	<u> </u>					
b	State Income Tax	502.00								
С	Rent Expense	5,525.00								
d										
е 05	All other expenses			<u> </u>						
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	165,168.53		 	 					
20	organization reported in column (B) joint costs from a combined educational campaign and									
	fundraising solicitation Check here following SOP 98-2 (ASC 958-720) if									

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . (B) Beginning of year End of year 21,248.35 1 46,044.76 2 2 Savings and temporary cash investments 116,703.48 70,244.67 3 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 4ssets 7 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges . . 9 2,300.00 9 1,804.69 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 863,366.77 10b Less: accumulated depreciation 217,144.97 671,054.59 10c 646,221.80 Investments—publicly traded securities 11 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11. 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 76<u>4,315.92</u> 811,306.42 17 17 2,557.50 1,210.50 18 18 19 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors. 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 600,676.04 573,609 87 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 Total liabilities. Add lines 17 through 25 26 26 603,233.54 574,820.37 Organizations that follow SFAS 117 (ASC 958), check here ▶ **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 208,072.88 189,495.55 33 33 208,072.88 189,495.55

Total liabilities and net assets/fund balances

764,315.92

811,306.42

Part	ΧI	Reconciliation of Net Assets			
		Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>	🗆
1	Tota	l revenue (must equal Part VIII, column (A), line 12)	1	_	146,591.20
2		l expenses (must equal Part IX, column (A), line 25)	2		165,168.53
3	Reve	enue less expenses. Subtract line 2 from line 1	3		(18,577.33)
4	Net a	assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		208,072.88
5	Net ı	unrealized gains (losses) on investments	5		
6	Dona	ated services and use of facilities	6		
7		stment expenses	7		
8		period adjustments	8		
9		er changes in net assets or fund balances (explain in Schedule O)	9		
10		assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, c	column (B))	10		189,495.55
Part	XII	Financial Statements and Reporting			
		Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>	<u> 🗆</u>
					Yes No
1		ounting method used to prepare the Form 990: Cash Accrual Other			
		e organization changed its method of accounting from a prior year or checked "Other," exp	olaın ın		
_		edule O.			
2a		e the organization's financial statements compiled or reviewed by an independent accountant?		2a	V
		es," check a box below to indicate whether the financial statements for the year were comp	olled or		7 4 7 7
		wed on a separate basis, consolidated basis, or both:			7.4
		eparate basis			
b		e the organization's financial statements audited by an independent accountant?		2b	√
		es," check a box below to indicate whether the financial statements for the year were audite trate basis, consolidated basis, or both:	o on a		See
				7.0	
C	_	eparate basis	oroiabt		
C		e audit, review, or compilation of its financial statements and selection of an independent accou		0-	
		e organization changed either its oversight process or selection process during the tax year, ex		2c	de E
		edule O.	piain in	1. 18	573
3a		result of a federal award, was the organization required to undergo an audit or audits as set	forth in	المحادث	(5/44)
Ja		Single Audit Act and OMB Circular A-133?		3a	1
b		es," did the organization undergo the required audit or audits? If the organization did not unde	rao the	Ja	
~		ired audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3ь	
				4.4	990 (2015)

Form **990** (2015)

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

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

	ection 501(c)(4), (5), or (6) orga	inizations Complete Part III			
Name	of organization			Employer ide	entification number
<u>OKMU</u>	LGEE COUNTY FARM BURE				73-0770880
Part		e organization is exempt und			organization.
1		the organization's direct and indire			
2	Political expenditures .				\$
3	Volunteer hours				
Part	I-B Complete if the	e organization is exempt und	er section 501(
1	-	excise tax incurred by the organiza			\$
2	_	excise tax incurred by organization	~		\$
3	If the organization incurre	ed a section 4955 tax, did it file For	rm 4720 for this ye	ear?	<u> Yes No</u>
4a	Was a correction made?				Yes LNo
	If "Yes," describe in Part				44 1/01
		e organization is exempt und			1(c)(3).
1		ly expended by the filing organiz			\$
2		filing organization's funds contrib			
		vities			\$
3	Total exempt function e	expenditures. Add lines 1 and 2.	Enter here and	on Form 1120-POL,	~**·····
	line 17b			. .	\$
4	Did the filing organization	file Form 1120-POL for this year?	?		Yes No
5	organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, on ontributions received that were pro- fund or a political action committed	enter the amount mptly and directly	paid from the filing orgal delivered to a separate	nization's funds. Also enter political organization, such
	(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-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)			"-		

Pa	ae	2

	II-A Complete if the organizati section 501(h)).					
	heck ▶ ☐ If the filing organization be name, address, EIN, exp	enses, and sha	re of excess lobl	bying expenditur	es).	oup member's
_ C	heck ▶ ☐ If the filing organization c			trol" provisions a	apply.	
		bying Expendit			(a) Filing	(b) Affiliated
	(The term "expenditures" i			<u></u>	organization's totals	group totals
1a	Total lobbying expenditures to influence	e public opinion	(grass roots lobby	/ing)		
b	Total lobbying expenditures to influence	e a legislative be	ody (direct lobbyin	g)		
C	Total lobbying expenditures (add lines	1a and 1b) .				
d	Other exempt purpose expenditures .					
е	Total exempt purpose expenditures (ac	dd lines 1c and 1	ld)			
f	Lobbying nontaxable amount. Enter columns.	the amount f	rom the following	g table in both		
	If the amount on line 1e, column (a) or (b)	s: The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the ar	mount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	s 5% of the excess o	ver \$1,500,000	36 周秋 智	
	Over \$17,000,000	\$1,000,000.			W 45% A	Marian .
g	Grassroots nontaxable amount (enter 2	25% of line 1f)				
h	Subtract line 1g from line 1a. If zero or	less, enter -0-				
i	Subtract line 1f from line 1c. If zero or					
j	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?					Yes No
	(Some organizations that made a s	ection 501(h) el	Period Under sec ection do not hav ructions for lines	e to complete all	of the five colum	ns below.
	Lobbyir	g Expenditures	During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
C	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
	each "Yes," response on lines 1a through 1ı below, provide in Part IV a detailed		a)		(b)	
aesci	ription of the lobbying activity.	Yes	No	A	mount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				i i	
а	Volunteers?					
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 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?	<u> </u>	<u> </u>			
	Direct contact with legislators, their staffs, government officials, or a legislative body?	 	 			
9		<u> </u>	<u> </u>			
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?	 	 			
		della Mic.	2		—	_
1	Total. Add lines 1c through 1i	2.2.5.	1907.	Sec.	89-22-67-5.	Stan Sta
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		97			
Ь	If "Yes," enter the amount of any tax incurred under section 4912	10. 18				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .		25	2.2 YYOM	525 24 SHI	Ker Willia
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1/5		755	8.7.4 M	179
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5), (or se 	ction		-
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	/	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	1	L
_ 3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3		✓
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				line :	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year	•	2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?					
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Par		<u> </u>				
	the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	un lie	+\· Da	+ II A I	.noc 1	and
	instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up iis	i), Fai	t 11-74, 1	iiies i	anu
					·	
					·	
					·	

	rm 990 or 990-EZ) 2015	Page 4
Part IV	Supplemental Information (continued)	
		·····
		••••
	,	
	······	
,		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

101110	in the organization		Linployer identification frameer
)KM <u>U</u>	LGEE COUNTY FARM BUREAU		73-0770880
Par	t I Organizations Maintaining Donor Adv	rised Funds or Other Similar Fun	nds or Accounts.
	Complete if the organization answered		
		(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		<u> </u>
5	Did the organization inform all donors and donor	•	
	funds are the organization's property, subject to the	ie organization's exclusive legal contro	ol? Yes . No
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that grain	nt funds can be used
	only for charitable purposes and not for the benef	fit of the donor or donor advisor, or f	or any other purpose
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Par	t 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		
'	Preservation of land for public use (e.g., recrea		f a historically important land area
	Protection of natural habitat		
		☐ Preservation o	f a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eid a qualified conservation contribution	
	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 easement	ts	2b
С	Number of conservation easements on a certified to	nistoric structure included in (a)	2c
d	Number of conservation easements included in	(c) acquired after 8/17/06, and not	on a
	historic structure listed in the National Register .		· · 2d
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terr	minated by the organization during the
	tax year ►	, ,	, ,
4	Number of states where property subject to conse	rvation easement is located ▶	
5	Does the organization have a written policy reg		spection handling of
•	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspect		
O	Stan and volunteer flours devoted to monitoring, inspec-	ting, nationing of violations, and emorcing	conservation easements during the year
_		on the multiplication of the last of the l	
7	Amount of expenses incurred in monitoring, inspecting	ig, nandling of violations, and enforcing	conservation easements during the year
_	> \$	0/.0 .1	
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	
	and section 170(h)(4)(B)(ii)?	• • • • • • • • • • • • • • • • • • • •	· · · · L Yes L No
9	In Part XIII, describe how the organization reports of		
	balance sheet, and include, if applicable, the text of		nancial statements that describes the
_	organization's accounting for conservation easeme		
Part			
	Complete if the organization answered '	"Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SF.	AS 116 (ASC 958), not to report in its	s revenue statement and balance sheet
	works of art, historical treasures, or other similar	assets held for public exhibition, ed	ducation, or research in furtherance of
	public service, provide, in Part XIII, the text of the f	ootnote to its financial statements tha	it describes these items.
b	If the organization elected, as permitted under S	FAS 116 (ASC 958) to report in its	revenue statement and balance sheet
_	works of art, historical treasures, or other similar		
	nublic convice, provide the following emounts relet	ing to those items.	
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		► •
	(i) hevertue included on Form 990, Part VIII, line 1		
_	(II) Assets included in Form 990, Part X	historia de la companya della companya della companya de la companya de la companya della compan	\$
2	if the organization received or neid works of art,	, nistoricai treasures, or other similai	r assets for financial gain, provide the
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1 .		> \$
b	Assets included in Form 990, Part X		> \$

Feli	Urganizations Maintaining	Collections of a	Art, His	torical	i reasures	s, or O1	ther Similar A	\ssets (con	itinued)
3	Using the organization's acquisition, a collection items (check all that apply):								
а	☐ Public exhibition		d	☐ Loan	or exchan	ge prog	rams		
b	☐ Scholarly research								
С	☐ Preservation for future generations					• • • • • • • • • • • • • • • • • • • •			
4	Provide a description of the organizati XIII.	on's collections a	and expl	aın how t	hey further	the or	ganization's exe	empt purpos	e in Part
5	During the year, did the organization assets to be sold to raise funds rather	solicit or receive than to be mainta	donation ined as	ns of art, part of th	historical t e organizat	reasure tion's co	s, or other sim	_	i □ No
Part		•							
	Complete if the organization 990, Part X, line 21.						•		Form
1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or oth	er interr	nediary fo	or contribu	tions o	other assets		□ No
b	If "Yes," explain the arrangement in Pa	rt XIII and comple	ete the fo	ollowing t	able:		1	Amount	
С	Beginning balance					10	;		
d	Additions during the year					10	· · · · · · · · · · · · · · · · · · ·		
е	Distributions during the year					16			
f	Ending balance					11			
2a	Did the organization include an amoun							tv? TYes	□ No
b	If "Yes," explain the arrangement in Pa								
Par						p.o	34 317 477 7111	• • •	
	Complete if the organization	answered "Yes"	on For	m 990. F	Part IV. lin	e 10.			
		(a) Current year		or year	(c) Two yea		(d) Three years ba	ck (e) Four ye	ears back
1a	Beginning of year balance						,	1,,	
b	Contributions				<u> </u>		-		
C	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
	Other expenditures for facilities and				-				
	programs							_	
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the		d balanc	e (line 1g	ı, column (a	i)) held	as:		
а	Board designated or quasi-endowment	t >	_%						
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶	%							
	The percentages on lines 2a, 2b, and 2	c should equal 10	00%.						
3a	Are there endowment funds not in the	possession of th	e organi	zation tha	at are held	and ad	ministered for t	the	
	organization by							Y	es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related org							3b	
4	Describe in Part XIII the intended uses		n's endo	owment fu	unds.				
Part	, , ,		-	•					
	Complete if the organization a	answered "Yes"	on For	m 990, F	Part IV, line	e 11a. :	See Form 990), Part X, Iin	e 10.
	Description of property	(a) Cost or oth (investme		1 ' '	or other basis ther)		Accumulated apreciation	(d) Book	/alue
1a	Land				86,884.04	100		8	6,884.04
b	Buildings				763,638.10		204,718.15		8,919.95
C	Leasehold improvements								
d	Equipment				12,844.63		12,426.82		417.81
е	Other								
Total.	Add lines 1a through 1e. (Column (d) mu	ust equal Form 99	00, Part 2	X, column	(B), line 10	Oc.)		64	6,221.80
	· · · · · · · · · · · · · · · · · · ·								

Part VII	Investments—Other Securities.	000 David N/ Iva	44h O F 200 P IV I 40
	Complete if the organization answered "Yes" on Fo		
	(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		
	neld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	15 000 D 17 1 D 100 D		
	b) must equal Form 990, Part X, col. (B) line 12) ▶		
Part VIII	Investments—Program Related.	000 D-vt N/ B-	- 44 - 0 - F 000 B - I V F - 40
	Complete if the organization answered "Yes" on For		
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
_(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(9)			
	b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.	L	
	Complete if the organization answered "Yes" on For	m 990. Part IV. lin	e 11d. See Form 990. Part X. line 15.
14.1	(a) Description	,,,,,,,,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	mp (b) must squal Form 000 Port V and (D) live 45		
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	 	>
Part A	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11e or 11f. See Form 990, Part X,
1.	line 25. (a) Description of liability (b) Book value		
(1) Federal in			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b	o) must equal Form 990, Part X, col. (B) line 25) ▶		
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footne	ote to the organization	n's financial statements that reports the
organization's	s liability for uncertain tax positions under FIN 48 (ASC 740). Che	ck here if the text of the	he footnote has been provided in Part XIII

Part			er Return.
	Complete if the organization answered "Yes" on 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:		
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:		
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		
Part	XII Reconciliation of Expenses per Audited Financial Staten		s per Return.
	Complete if the organization answered "Yes" on 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:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	, . ,	. 3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		. 4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	5
	XIII Supplemental Information.		
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an		
l; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any addition	al information.
-			

	chedule D (Form 990) 2015 Page 5						
Part XIII	Supplemental Information (continued)						
	······································						
·							
·							

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2015

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

73-0770880

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