

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





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Form **990** 

SCANNED FEB 0 7 2017

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2015

Open to Public

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.

Department of the Treasury Inspection Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2015 calendar year, or tax year beginning 9-1 2015, and ending 20 16 D Employer identification number C Name of organization Comanche County Farm Bureau Check if applicable: Doing business as 73-6100127 Address change Room/sulte Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change 580.353.5173 ◩ Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminal awton, OK 73501 195,478.52 Amended return G Gross receipts \$ Application pending F Name and address of principal officer: High is this a group return for subordinates? 🔲 Yee. 🗹 No H(b) Are all subordinates included? 

Yes. 

No 2640 SW County Hwy 115, Cache, OK 73527 If "No," attach a list. (see instructions) ☑ 501(c) ( 5 ) **∢** (Insert no.) ☐ 4947(a)(1) or Tax-exempt status: 501(c)(3) Website: ► H(c) Group exemption number ▶ Form of organization: 🗹 Corporation 🗌 Trust Association ☐ Other ▶ L Year of formation: M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: Agricultural Membership Organization Activities & Governance Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . 9 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 -0-Total number of volunteers (estimate if necessary) . . . . . 6 155,098.50 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T. line 34 4,939.07 **Current Year** Contributions and grants (Part VIII, line 1h) . 15,177.50 15,009.00 9 Program service revenue (Part VIII, line 2g) 2,741.79 851.55 10 Investment income (Part VIII, column (A), lines,3 Other revenue (Part VIII, column (A), lines 5, 6d, Ec. Pc. Pc. Pc. Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines Grants and similar amounts paid (Part IX, column (A), lines 15-3). 123,675.16 155.098.50 11 141,594.45 170,959.05 13 Benefits paid to or for members (Part IX, column (A); line 4) 14 21,168,34 15,055.73 Salaries, other compensation, employee benefits (Part IX, column (A), 15 99,872.80 127,171.64 Professional fundralsing fees (Part IX, column (A) [1] [1] 16a Total fundraising expenses (Part IX, column (D) اللــــ(D) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 61,985.58 39,212.95 18 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 183,026.72 181,440.32 (10,481.27) 19 Revenue less expenses. Subtract line 18 from line 12 (41,432.27)End of Year **Beginning of Current Year** Total assets (Part X, line 16) 20 783,588.72 764,843.95 21 Total liabilities (Part X, line 26) . 57,674.37 49,410.87 Net assets or fund balances. Subtract line 21 from line 20 725,914.35 715,433.08 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying achedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here or print name and title Check 🔲 If **Paid** Preparer 73-0382001 Oklahoma Farm Bureau Firm's EIN ▶ Use Only 405.523.2300 2501 N. Stiles, OKC, OK 73105 Firm's address >

Bo

Cat. No. 11282Y



✓ Yes No Form 990 (2015)

May the IRS discuss this return with the preparer shown above? (see instructions)

Total program service expenses ▶

art	Checklist of Required Schedules		2.0	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		Yes	No
_	• •	1		~
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		,
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	٧	
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		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		v
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	٧	
	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		v
_	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	110		,
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		,
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	116		v
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		,
Ь	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		,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		v
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		~
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		v
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		v
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		v
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		,

Part	Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		۷
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		>
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		~
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		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			_
20	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		,
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		~
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		7
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		v
Ь	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?			م.ا
	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		_
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	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		7
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		,
C	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	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			,
32	Part I	31		<del>                                     </del>
	complete Schedule N, Part II	32		•
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		,
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	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		,
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		v
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,	37		,
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
-	19? Note. All Form 990 filers are required to complete Schedule O.	38		1

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	- (a )			
Part				
	Check if Schedule O contains a response or note to any line In this Part V			<u></u>
			Yes	No
18	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a -0  Enter the number of Forms W-2G included in line 1s. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	reportable gaming (gambling) winnings to prize winners?	1c		7
2a				
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		7	
3 <b>a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	>	
b	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, a financial account in a foreign country (such as a bank account, securities account, or other financial	} }		١.
	account)?	4a		~
Ь	If "Yes," enter the name of the foreign country:			
	See Instructions for filing requirements for FinCEN Form 114; Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	<u> </u>
6 <b>a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1 1		ļ
ь	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	~	<del> </del> —
_	gifts were not tax deductible?	6b	v	•
7	Organizations that may receive deductible contributions under section 170(c).			
8	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		
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
_	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
8	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f	├	-
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<del> </del>	-
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		7	
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
8	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
Ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12			
_ 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:  Gross income from members or shareholders			
a b				
_	against amounts due or received from them.)			
12a		12a		
	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.			
8	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			
C	Enter the amount of reserves on hand	14a		
14a h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	148 14b		-

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Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			
	Check if Schedule O contains a response or note to any line in this Part VI			<u>. D</u>
Secti	on A. Governing Body and Management			
1a	Little the humber of voting members of the governing body at the end of the tax year.		Yes	No
	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.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Lib of 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		V
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	_	,
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u></u> .	1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	$\vdash$	~
6 7a	Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	V	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b_		,
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	~	
ь	Each committee with authority to act on behalf of the governing body?	8b	~	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	Ĺ.,	<u>/</u>
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.) Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	166	V
	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	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		0
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		
13	Did the organization have a written whistleblower policy?	13		V
14 15	Did the organization have a written document retention and destruction policy?	14		
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		>
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  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		~
. р		100		
	organization's exempt status with respect to such arrangements?	16b		
Section	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed  Oklahoma  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(	c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.		_	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords:	<b>&gt;</b>	

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Form 990 (2015)

# 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	aniz	atic	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	box,	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D)  Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
·	hours for related organizations below dotted line)	ndividua or direct	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Schedule Attached										
(2)										
(3)										
(4)										
(5)										
(6)										
Ø										
(8)										
(e)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
					•	<b>5)</b>							•
	₩	(B)		Position do not check more than or					(D)	<b>(E)</b>	.	<b>(F)</b>	
	Name and title	Average hours per					is both or/trusi		Reportable compensation	Reportab compensation		Estimated amount of	
		week (list any			_			·	from	related	: 1	other	
		hours for related	콯	ૄ	Officer	<b>9</b>	콩	Former	the organization	organizatik (W-2/1099-k		compensation from the	
		organizations below dotted		를		Key employee	8 8	•	(W-2/1099-MISC)			organization and related	
		line)	Individual trustee or director	institutional trustee		¥	mpe		ĺ		ľ	organizations	
			8	8			Highest compensated employee						
<del></del>					_	_	8.	<b>├</b> ─				_	
(15)					ŀ								
(16)			_		H	┢╌		H	<del>                                     </del>		+	<del></del>	
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(23)											i		
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<u></u>											.		
(25)													
1b	Sub-total		٠	•	•		•						
C	Total from continuation sheets to Part	-		•	•		•				<del></del> +		
<u>d</u>	Total (add lines 1b and 1c)							N 144	ho received m	ore then \$1	00 000		
-	reportable compensation from the organi		1 100 UT	CSB	IISL	<b>9</b> U 4	1DOVE	3) W	IIO IBCEIVOG III	ore uran er	00,000	<i>)</i> ()	
					-							Yes-	No
3	Did the organization list any former of												
	employee on line 1a? If "Yes," complete \$												~
4	For any individual listed on line 1a, is the												
	organization and related organizations individual								сотрыва эсп	eaule J TO	r suci		- -
5	Did any person listed on line 1a receive o								related organiz	ation or inc	 Iividua		Ĺ
	for services rendered to the organization?												<b>√</b>
Section	on B. Independent Contractors												
1	Complete this table for your five highest of												
	compensation from the organization. Rep	ort comper	nsatio	n fo	or th	e C	alend	ar y	ear ending with	h or within i	the or	ganization's tax	(
	year.												
	(A) Name and business add	ress							(B) Description of a	arvices .		(C) Compensation	
	<del></del>							_	·—-				
		<u> </u>				_			<del></del>				
			<u> </u>					<u> </u>					
2	Total number of independent contractor received more than \$100,000 of compensi							ולנד	use iisted abc	ove) wno			

Form **990** (2015)

Form (	<b>99</b> 0 <b>(</b> 201	5)							Page 9
Par	t VIII	Statement of Revo	enue	-		<del> </del>			
		Check if Schedule C	contains	a resp	onse or note to	any line in this	Part VIII		🗆
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
音音	1a	Federated campaigns	s	1a					
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership dues .		1b	15,009.00		용하다. 사람들		
2.8	C	Fundraising events .		10					
Offis, Her Ar	d	Related organizations		1d					
Ç릩		Government grants (cor		10					
Contributions, and Other Sim	1	All other contributions, g		} <del></del>					
专员	1 .	and similar amounts not inc		امدا					
운황				11					
털	9	Noncash contributions include							
<u>Ö</u> 🖥	<u>h</u>	Total. Add lines 1a-1	<u>f</u>		<u> ▶</u>	15,009.00			حرفق والمستداد
2	i			L	Business Code				
Program Service Revenue	2a								
2	Ь			Т					
<u>8</u> .	ے ا	****************							<del></del>
<b>E</b>	d	***********************				<del></del>			
Ø,	-	***************							
퉏	•	A II - AL							
ş	T	All other program ser						, <del></del>	
	<u> </u>	Total. Add lines 2a-2							
	3	Investment income					ŀ		
		and other similar amo	•		▶ [	851.55			851.55
	4	Income from investmen	t of tax-exer	mpt boi	nd proceeds ▶				
	5	Royalties			▶ [				
	ļ	•	(i) Real		(ii) Personal				
	6a	Gross rents	26.0	00.00					
	Ъ	Less: rental expenses		19.47					高高計 医多种
	ء	Rental income or (loss)		80.53					
	1 -	Net rental income or (ioss)			•	1,480.53		1,480,53	<del> </del>
	_d		(f) Securiti	<u>, , , , , , , , , , , , , , , , , , , </u>	(ii) Other	1,460.53		1,400.03	
	7a	Gross amount from sales of	(I) Securiu	-	(a) Outer	석동사 바다 연류			
	l _	assets other than inventory	<u></u>		·				
	b	Less: cost or other basis	ţ	l				1. 1. 20 美術	
	l	and sales expenses .							
	( C	Gain or (loss)	Ĺ <u> </u>	1		<u></u>			
	d	Net gain or (loss) .			▶				
_				F					
3	8a	Gross income from fu	ındraising	[					
9		events (not including \$	_	- 1					
5		of contributions reporte	ed on line 1	<u> </u>					
Ę	[	See Part IV, line 18 .							
Other Revenu				. Ы	<del></del>				
Ö	l .	Less: direct expenses  Net income or (loss) fr							
	0	` '			vents . >				
	93	Gross income from ga	_	ues.					
	} .			· a					
		Less: direct expenses		. bL			<u> </u>		
		Net income or (loss) f			ities ▶				- 77
	10a	Gross sales of in		ess					
	1	returns and allowance	98	. а					
	Ь	Less: cost of goods s	old	. ь[					
	С	Net income or (loss) f		of inve	ntory ▶				
		Miscellaneous R			Business Code				
	11a	Office Commissions			524113	8,995.59		8,995.59	
	ь	Office Commissions		}	524126	120,794.09		120,794.09	
	6	Salary Reimbursement			524126	23,828.29		23,828.29	
	ام	All other revenue .			J2712U		<del></del>		
	· -	Total. Add lines 11a-		· ь		153;617.97		च रेक्टरेस्ट, हर् <u>।</u> है।	
	12	Total revenue. See in		• • •	' ' ' ' <b>[</b>	170.959.05	15,009,00	155,098,50	851,55
	l 12		IBLI UGLIONS.		1	1 /ひ.フラケ.ロゴ	13,007,001	133,078.501	وو. ا جو

	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon		ne in this Part IX	<u> </u>	
86, 9Ł	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) Fundralsing 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				
<b>4</b> <b>5</b>	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	15,055.73	,	1	
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	118,380.84			
9	section 401(k) and 403(b) employer contributions) Other employee benefits			-	-
10 11	Payroll taxes	8,790.80			
a b	Management				
d	Accounting	360.00			
e f g	Professional fundralsing services. See Part IV, line 17 Investment management fees				
_	(A) amount, fist line 11g expenses on Schedule O.)				
12 13	Advertising and promotion	5,779.36 11,317.12			
14 15	Information technology				
16 17	Occupancy	9,273.79			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				· · · · · · · · · · · · · · · · · · ·
19 20	Conferences, conventions, and meetings . Interest				
21 22	Payments to affiliates	5,386.37			
23	Insurance	2,644.25	<del> </del>	<del>                                     </del>	
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	Postage	1,202.06	r ing it government i sage i to see a s	Minima a se tarah menendakan	معتم المعتاد المعتبية المستوالية والمستوالة
b	Charitable Contributions	3,250.00			
d					
•	All other expenses				
25_	Total functional expenses. Add lines 1 through 24e	181,440.32		<u> </u>	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here I if				:

**Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year Cash-non-interest-bearing . . . . . . . . . . . . 93.611.22 89,671.34 1 357,784.01 2 Savings and temporary cash investments . . . . . 2 358,368.75 3 3 Accounts receivable, net . . . . . . . . . 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 organizations (see instructions). Complete Part II of Schedule L . . . . . . . . . . 8 Notes and loans receivable, net . . . . . . 7 Inventories for sale or use . . . . . B Prepaid expenses and deferred charges 2,660.01 . 9 2.660.01 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 560,763.98 246,620.13 10b 329,533.48 10c 314,143.85 Ь Less: accumulated depreciation . . . . 11 Investments—publicly traded securities 11 12 12 Investments-other securities. See Part IV, line 11 . 13 13 investments-program-related. See Part IV, line 11. Intangible assets . . . . . . . . . . . . . . . . 14 14 15 Other assets. See Part IV, line 11 . . . . . . . . . 15 783,588.72 16 16 764,843.95 Total assets. Add lines 1 through 15 (must equal line 34) . Accounts payable and accrued expenses . . . . . . (129.50) 17 17 1,407.00 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 Liabilities 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 57,803.87 24 48,003.87 24 Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 . . . . 57,674.37 26 49,410.87 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets . . . . . 27 28 29 Permanently restricted net assets . . . Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . 30 31 31 Pald-in or capital surplus, or land, building, or equipment fund . . . 725,914.35 ·32 Retained earnings, endowment, accumulated income, or other funds. 715,433.08 32 33 725.914.35 33 715,433.08 783,588.72 34 764,843.95 Total liabilities and net assets/fund balances . .

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Deve	7	7
геле		

yrm 990	· _ · _ · _ · _ · _ · _ · _ · _ · _ · _			Page 12
Part )				
<del></del>	Check if Schedule O contains a response or note to any line in this Part XI	11		170,959.05
	Total revenue (must equal Part VIII, column (A), line 12)	2		
	Total expenses (must equal Part IX, column (A), line 25)	3		181,440.32 (10,481.27)
	Revenue less expenses. Subtract line 2 from line 1	4		725.914.35
	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	5	<del></del>	725,714.35
	Net unrealized gains (losses) on investments	6		
_	Donated services and use of facilities	7		<del></del>
	Investment expenses	8		
	Prior period adjustments	9		
	Other changes in net assets or fund balances (explain in Schedule O)	<del> </del>		<del></del>
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		715,433.08
	Check if Schedule O contains a response or note to any line in this Part XII	• •	<u> </u>	<del></del>
 	Accounting method used to prepare the Form 990:  Cash Accrual Other fithe organization changed its method of accounting from a prior year or checked "Other," expected to the control of t			Yes No
2a \	if the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:		. 2a	Yes No
2a \ 2a \ i [ b \	if the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were comp	 piled o	. 2a	Yes No
2a \ 2a \ i b \ i c i	If the organization changed its method of accounting from a prior year or checked "Other," expected by an independent accountant?  Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?	piled of ed on versigh	. 2a . 2b . 2b . 2c	, v
2a \	if the organization changed its method of accounting from a prior year or checked "Other," expected to the organization of the prior year or checked of the prior year or checked of the prior year or checked of the prior year were compreved by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compreved on a separate basis, consolidated basis, or both:    Separate basis   Consolidated basis   Both consolidated and separate basis	piled of ed on versigh	. 2a . 2b . 2b . 2c	, v
2a \	If the organization changed its method of accounting from a prior year or checked "Other," expected by an independent accountant?  Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?	piled of the piled on the piled	. 2a or . 2b a . 2c n	, v

#### 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.ira.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

(2)	
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization  Provide a description of the organization's direct and indirect political campaign activities in Part IV.  Political expenditures	mber
Provide a description of the organization's direct and indirect political expenditures.  Political expenditures.  Volunter hours.    Part I-B    Complete if the organization is exempt under section 501(c)(3).	
Political expenditures	<u> </u>
Part LB   Complete if the organization is exempt under section 501(c)(3).   Enter the amount of any excise tax incurred by the organization under section 4955   \$     Enter the amount of any excise tax incurred by organization managers under section 4955   \$     If the organization incurred a section 4955 tax, did it file Form 4720 for this year?   Yes     Was a correction made?   Yes     Was a correction made?   Yes     If "Yes," describe in Part IV.   Part LG   Complete if the organization is exempt under section 501(c), except section 501(c)(3).   Enter the amount directly expended by the filing organization for section 527 exempt function activities   \$     Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b   \$     Did the filing organization file Form 1120-POL for this year?   \$     Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to wide organization made payments. For each organization is funds the amount of political contributions received that were promptly and directly delivered to a separate political organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information funds in the filing organization is funds the amount of political contributions received that were promptly and directly delivered to a separate political organization is funds. If none, enter -0-	
Enter the amount of any excise tax incurred by the organization under section 4955	
Enter the amount of any excise tax incurred by the organization under section 4955	
2 Enter the amount of any excise tax incurred by organization managers under section 4955 .   \$   fithe organization incurred a section 4955 tax, did it file Form 4720 for this year?	
Yes	
Was a correction made?	
B If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	es L No
Enter the amount directly expended by the filing organization for section 527 exempt function activities	
activities	· -
527 exempt function activities	
Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	
Iline 17b  Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to white organization made payments. For each organization listed, enter the amount paid from the filing organization's funds the amount of political contributions received that were promptly and directly delivered to a separate political organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0-  (ei) Amount or contributions repromptly and delivered to a separate political organization funds. If none, enter -0-  (ei) Amount or contributions repromptly and delivered to a separate political organization funds. If none, enter -0-  (ei) Amount or contributions repromptly and delivered to a separate political organization funds. If none, enter -0-  (f) EIN  (g) Amount organization funds. If none, enter -0-  (ei) Amount organization funds. If none, enter -0-  (ii) EIN  (g) Amount organization funds. If none, enter -0-  (iii) EIN  (i	
Did the filing organization file Form 1120-POL for this year?	
Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to white organization made payments. For each organization listed, enter the amount paid from the filing organization's funds the amount of political contributions received that were promptly and directly delivered to a separate political organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0 (e) Amount organization and delivered to a separate political organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information filing organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information filing organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information filing organization is needed, provide information filing organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information filing organization is needed, pr	
organization made payments. For each organization listed, enter the amount paid from the filing organization's funds the amount of political contributions received that were promptly and directly delivered to a separate political organization as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0 promptly and delivered to a political organization's promptly and delivered to a political organization's funds. If none, enter -0	'es 🗌 No
as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0  (e) Amount or contributions repromptly an delivered to a political organization, enter organization and enter organization.  (1)  (2)  (3)	ds. Also enter
(a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0  (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0  (d) Amount paid from filing organization's funds. If none, enter -0  (e) Amount of contributions reproducts to a political organization's funds. If none, enter -0  (1) (2) (3)	
(2)	s received and and directly to a separate ganization, if
(3)	
(4)	
(5)	
(6)	

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۳		c	٠	4

Part	II-A Complete if the organizati section 501(h)).	on is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ection under
A C	heck  if the filing organization be name, address, EIN, exp					oup member's
вС	heck > if the filing organization of	hecked box A	and "limited con	trol" provisions	apply.	
	Limits on Loi (The term "expenditures"	obying Expendit			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	e public opinion	(grass roots lobb	ying)		
b	Total lobbying expenditures to influence	e a legislative b	ody (direct lobbyin	ig)		
C	Total lobbying expenditures (add lines	1a and 1b) .				
d	Other exempt purpose expenditures .					
0	Total exempt purpose expenditures (a	dd lines 1c and 1	ld)			
f.	Lobbying nontaxable amount. Enter columns.	the amount f	rom the followin	g table in both		
	If the amount on line 1e, column (a) or (b)	ls: The lobbying	nontaxable amour	st la:		
	Not over \$500,000		mount on line 1e.			:=1
	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 of	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
g	Grassroots nontaxable amount (enter	25% of line 1f)				
h	Subtract line 1g from line 1a. If zero or	less, enter -0-				
ŀ	Subtract line 1f from line 1c. If zero or					
j	If there is an amount other than zer reporting section 4911 tax for this year	_		the organization		Yes No
	(Some organizations that made a s	ection 501(h) el	Period Under sec ection do not hav ructions for lines	re to complete all	of the five colum	ns below.
	Lobbyir	ng Expenditures	During 4-Year A	veraging Period	<del>,</del>	
	Calendar year (or flacal year beginning in)	(a) 2012	<b>(b)</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					
•	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
		-			Schedule C (Form	n 990 or 990-EZ) 2015

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT fine (election under section 501(h)).	led	Forn	1 5768	
For a	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(4	<b>a)</b>		(b)
	iption of the lobbying activity.	Yes	No	An	rount
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:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>		
i	Other activities?				
j	Total. Add lines 1c through 1I		,		ē
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			is	
Ь	If "Yes," enter the amount of any tax incurred under section 4912				
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			.::	
Part		(5), (	or se	ction	
	501(c)(6).	• • • •			
					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	<u> </u>
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," Of answered "Yes."				ine 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			
a	Current year	•	_2a_		
b	Carryover from last year	•	<u>2b</u>		
C	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 lobby and political expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5	<del></del>	
Par		•		<u> </u>	
	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	n lis	t): Pa	rt II-A. Iir	nes 1 and
	instructions); and Part II-B, line 1. Also, complete this part for any additional information.	•	••	•	
			_		
<del></del>					

Schedule C (Form	thedule C (Form 990 or 990-EZ) 2015 Page 4					
Part IV	Supplemental Information (	continued)				
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#### **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 2015

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Comar	che County Farm Bureau		73-6100127
Par		wised Funds or Other Similar Fun	
	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		
5	Did the organization inform all donors and dono		
	funds are the organization's property, subject to t	_	
6	Did the organization inform all grantees, donors,		
	only for charitable purposes and not for the bene		
Part	conferring impermissible private benefit?  Conservation Easements.	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
- ran	Complete if the organization answered	"Ves" on Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the		· <del>-</del> -
•	Preservation of land for public use (e.g., recrea		f a historically important land area
	☐ Protection of natural habitat	•	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year:		Held at the End of the Tax Year
	Total number of conservation easements		2a
	Total acreage restricted by conservation easemen		
C d	Number of conservation easements on a certified Number of conservation easements included in		
u	historic structure listed in the National Register		2d
3	Number of conservation easements modified, tran	nsferred, released, extinguished, or terr	
	tax year ▶		, ,
4	Number of states where property subject to conse	ervation easement is located >	·
5	Does the organization have a written policy re		•
	violations, and enforcement of the conservation e		
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing	conservation easements during the year
7	<ul><li></li><li>Amount of expenses incurred in monitoring, inspecting</li></ul>	ng bandling of violations, and automine	consequences accompanies during the year
•	> \$	ng; nanding of violations, and emorcing	conservation easements during the year
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · · □ Yes □ No
9	In Part XIII, describe how the organization reports	conservation easements in its revenue	and expense statement, and
	balance sheet, and include, if applicable, the text		ancial statements that describes the
	organization's accounting for conservation easem		
Part		•	
10	Complete if the organization answered if the organization elected, as permitted under SF		
14	works of art, historical treasures, or other simila		
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under S	SFAS 116 (ASC 958), to report In its	revenue statement and balance sheet
	works of art, historical treasures, or other simila public service, provide the following amounts relat	·	lucation, or research in furtherance of
	(f) Revenue included on Form 990, Part VIII, line 1		<b>⊳ s</b>
	(ii) Assets included in Form 990, Part X		> \$
	If the organization received or held works of art	t, historical treasures, or other similar	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>&gt;</b> \$
b	Assets Included in Form 990, Part X		<b>▶ \$</b>

٤

Part										
3	Using the organization's acquisition, collection items (check all that apply):	accession, and of	ther reco	rds, chec	k any of the	foliov	ving that are a	sign	nificant u	se of its
a	☐ Public exhibition		d	□ Loan	or exchange	prog	rams			
b	☐ Scholarly research		•	☐ Othe	r					
C	☐ Preservation for future generations	3								
4	Provide a description of the organizat XIII.	tion's collections	and expl	ain how t	hey further ti	he org	janization's ex	empi	t purpose	in Part
5	During the year, did the organization assets to be sold to raise funds rather								□ Yes	□ No
Part				•	<del></del>	•				
	Complete if the organization 990, Part X, line 21.		" on Fo	m 990, I	Part IV, line	9, or	reported an a	amoi	unt on F	orm
18	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or oth	ner interr	nediary fo	or contribution	ons or	other assets		☐ Yes	□ No
Ь	If "Yes," explain the arrangement in Pa								_	_
		•					T	Ámo	ount	
C	Beginning balance					10	;			
d	Additions during the year					1d				
e	Distributions during the year					<u>1e</u>				
f	Ending balance					11				
<b>2a</b>	Did the organization include an amour									
	If "Yes," explain the arrangement in Pa	art XIII. Check her	e if the e	xplanatio	n has been p	provide	ed on Part XIII	• •	• •	<u> </u>
Par		anamound #Vaa	" an Ca	000 [		10				
	Complete if the organization	(a) Current year		ior year	(c) Two years		(d) Three years b	nck	(e) Four yea	ers back
1a	Beginning of year balance	tay Contont your	45,	you	(4) 1 110 ) 542 5	-	(4)	+	<del>(5), 52, 75.</del>	
b	Contributions		<u> </u>		_			$\dashv$		
c	Net investment earnings, gains, and losses									-
d	Grants or scholarships	-,								
e	Other expenditures for facilities and programs	-								_
f	Administrative expenses									
g	End of year balance			-						
2	Provide the estimated percentage of t	he current year er	nd baland	e (line 1g	, column (a))	held	as:	_		
a	Board designated or quasi-endowmer	nt <b>&gt;</b>	_%		-					
b	Permanent endowment ▶	%								
C	Temporarily restricted endowment ▶	%								
_	The percentages on lines 2a, 2b, and							46.0		
38	Are there endowment funds not in the organization by:	e possession of the	ne organi	zation in	at are neid a	na aa	ministered for	uie	Ye	s No
	(i) unrelated organizations								3a(i)	140
	(ii) related organizations					• •			3a(ii)	
b	If "Yes" on line 3a(ii), are the related or	raanizations listed	i as recui	ired on So	chedule R?				3b	
4	Describe in Part XIII the intended uses									
Part							-			
	Complete if the organization	answered "Yes	on For	m 990, F	Part IV, line	11a.	See Form 99	0, Pa	art X, line	e 10
	Description of property	(a) Cost or of (Investm		1	or other basis ther)		Accumulated epreciation		(d) Book v	alue 
1a	Land			ļ	175,000.00	·				5,000.00
b	Buildings	•		<b>_</b>	351,166.73		216,420.74		13	4,745.99
C	Leasehold improvements	·		<del> </del>	24 552 55		20 400 55			4 207 04
d	Equipment	•	<del></del>	₩	34,597.25		30,199.39		-	4,397.86
e Total	Other	ust equal Form 9	90. Part	X. columr	(B), line 10c	;,)			31	4,143.85

Part VII	Investments—Other Securities			441 6 5	200 5 1 4 1 40
	Complete if the organization ans (a) Description of security or category		rm 990, Part IV, III (b) Book value	(c) Me	thod of valuation:
	(including name of security)		.,	Cost or en	d-of-year market value
(1) Financial	•				
	held equity interests				•
(3) Other				<del>                                     </del>	
(A) (B)				+	
(C)			· <del></del>		<del>.</del>
(D)					
<u>\</u>				-	-
(F)			-	<del></del>	
(G)		, , _ , , , , , , , , , , , , , , , , ,		<del> </del>	
(H)				1	· · · · · · · · · · · · · · · · · · ·
Total. (Column (	b) must equal Form 990, Part X, col. (8) line 12.) ▶				
Part VIII	Investments—Program Related			. ,	•
	Complete if the organization ans	wered "Yes" on Fo	rm 990, Part IV, lir	ne 11c. See Forn	n 990, Part X, line 13.
	(a) Description of investment		(b) Book value		ethod of valuation: d-of-year market value
(1)					
(2)					·
(3)					
_(4)				<u> </u>	
<u>(5)</u>			-		
_(5)		<del></del>		<del></del>	<del></del>
<u>(7)</u>	· · · · · · · · · · · · · · · · · · ·			<del> </del>	
<u>(8)</u>					
(9) Total (Column (	b) must equal Form 990, Part X, col. (B) line 13.)	· · · · · · · · · · · · · · · · · ·			
Part IX	Other Assets.		<u> </u>	روم منظم منظم الأمار والمنظ <u>ر بالم</u>	i i fa nisana in ne Bilinan i ensimble blat.
	Complete if the organization answ	wered "Yes" on For	rm 990, Part IV, lir	ne 11d. See Forn	n 990, Part X, line 15.
		) Description	<del>-</del>		(b) Book value
(1)					
(2)					
(3)					
(4)					
_(5)		<del>.</del>	<u>.</u>		ļ
<u>(6)</u>	<del></del>	<del></del>			
<u>(7)</u>					
(8)	·-	<del></del>			<del> </del>
(9)	mn (b) must equal Form 990, Part X, co	ol (R) line 15 )	-		
Part X	Other Liabilities.	л. (D) што то.,   .	<u> </u>		
T CITE //	Complete if the organization ansuline 25.	wered "Yes" on For	rm 990, Part IV, Iir	ne 11e or 11f. Se	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal in		<del></del>			
(2)	•	-			
(3)					
(4)			:		
(5)					
(6)					
(7) (8)					
	,			***	
(9)	Named and Company Control of the Control				
LOUIS, (COLUMN C	b) must equal Form 990, Part X, col. (B) line 25.) 🕨		i		

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

Page	4

Par			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:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	[3]
C	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
0	Add lines 2a through 2d		. 28
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	_
C	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 States		per Return.
	Complete if the organization answered "Yes" on Form 990,		
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	
C	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
0	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:		£ -, d
2	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
Ь	Other (Describe in Part XIII.)	4b	
_C	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	19 (0.)	.   5
Part	XIII Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2.	d 4. Dort N. lines 1b and	Shi Bart V line 4: Bart V line
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an : XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additions	i Information
2, PW	AI, lines 20 and 40, and Part All, lines 20 and 40. Also complete this part	to provide any additions	u illomaton.
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Schedule D (For	rm 990) 2015	age 5
Part XIII	Supplemental Information (continued)	
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#### SCHEDULE O (Form 990 or 990-EZ)

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### 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 ► 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

Name of the organization .	Employer Identification number
Comanche County Farm Bureau	73-6100127
The organization does not have stockholders but it does have members. There are two types of members	ers. One is an Associate member
and the other is a Voting member. An Associate member includes someone who runs or operates a fa	rm but whose average gross
and the real impages in large than half their testal impages. An Appenint annual real includes compages	working the Amilbusiness
agricultural income is less than half their total income. An Associate member also includes someone	working the Agribusiness.
Someone who is not directly related to Agriculture is an Associate member. Lastly, an Associate mem	her can hold their membership
through a church, FFA chapter, an association, or by a corporation not producing agricultural product	s. A Voting member can be a family
that gets a majority of its average gross income from the sale of agricultural products. A Voting members	per can also be held by a retired
agricultural person living on an income or social security accrued and not employed full time in another	er occupation. A Voting member
can also be held by a partnership or corporation receiving the majority of income from the sale of agric	cultural products.
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