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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047 (0)

Open to Public Inspection

Department of the Treasury

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 1609

Information about Form 990 and its instructions is at www.irs.gov/form990 Internal Revenue Service 2016 For the 2016 calendar year, or tax year beginning 01 2015 and ending SEP 30, C Name of organization GRAND D Employer identification number Check if applicable FORKS COUNTY FARM BUREAU Doing business as Address change Number and street (or PO box if mail is not delivered to street address) Room/suite 45-0235538 Name change 287 22ND ST NE Telephone number Initial return City or town State ZIP code 701-772-7286 MERADO ND 58228 Final return/terminated Foreign country name Foreign province/state/county Foreign postal code Amended return G Gross receipts \$ 36443 F Name and address of principal officer PAUL GALEGHER Application pending H(a) Is this a group return for subordinates? ND 58278 CRESENT DR THOMPSON H(b) Are all subordinates included? 501(c)(3) X 501(c) If "No," attach a list (see instructions) 4947(a)(1) or Tax-exempt status) (insert no) Website ▶ H(c) Group exemption number ▶ K Form of organization Trust X Association Corporation ND L Year of formation M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities PROMOTION OF AGRICULTURE AND RELATED ACTIVITIES Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets 2 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7800 7a SCANNED OCT 2 4 2017 Net unrelated business taxable income from Form 990-T, line 34 7b **Current Year** 15433. Contributions and grants (Part VIII, line 1h) 28639 Program service revenue (Part VIII, line 2q) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 59. 10800. 7800. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 26292. 12 36443 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 2690 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 2759. 16a Professional fundraising fees (Part IX, column (A), line 11e) (1) 为"美洲"的"美洲"的" Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 27264. 30210. Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25 Revenue less expenses Subtract line 18 from line 12 The Live D 29954. 18 32969. 19 -3662. 3474. **Beginning of Current Year** SEP 26 2017 20 Total assets (Part X, line 16) 223047. 267696. 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 223047. 267696. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and mplete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge mis D8-10-17 Sign Signature of officer Here JANICE SAUER SECRETARY/TREASURER Type or print name and title Print/Type preparer's name Preparer's signature PTIN Date Paid Check self-employed P01256434 FRANCIS L OPHAUG Preparer Firm's EIN ▶ 45-0324892 Firm's name ► ARVILLA BOOKKEEPING & TAA Use Only Firm's address ► PO BOX 67 ND 58214 Phone no ARVILLA 701-343-2312 May the IRS discuss this return with the preparer shown above? (see instructions) Yes

	990 (2016)		5-0235538 Page 2
Pa	rt III	Statement of Program Service Accomplishments	[·····]
		Check if Schedule O contains a response or note to any line in this Part III	
1,		escribe the organization's mission	
	PROMO	TION OF AGRICULTURE	
			
2		organization undertake any significant program services during the year which were not listed on	
	-	Form 990 or 990-EZ?	Yes 🔼 No
		describe these new services on Schedule O	
3		organization cease conducting, or make significant changes in how it conducts, any program	
	services		Yes X No
		describe these changes on Schedule O	
4	Describe	e the organization's program service accomplishments for each of its three largest program services.	as measured by
	expense	s Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo	cations to others,
	the total	expenses, and revenue, if any, for each program service reported	
4a	(Code	611430) (Expenses \$ 6647. including grants of \$) (Revenue \$)
	PROMO	TION OF AGRICULTURE IN GENERAL AND EDUCATION OF YOUTH A	BOUT
		ULTURE. INFORM FARMERS, AGRIBUSINESS AND THE GENERAL PU	
		ULTURE AND TO PROMOTE FARMING AND ITS IMPORTANT PLACE I	
		•	
		•••••••••••••••••••••••••••••••••••••••	
		······································	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$	j)
	·		

4c	(Code) (Expenses \$ including grants of \$) (Revenue \$;)
			/
			• • • • • • • • • • • • • • • • • • • •
		•••••••••••••••••••••••••••••••••••••••	

4d	Other pr	rogram services (Describe in Schedule O)	
	(Expens)
4-	T-A-1	(6.4.7)	

Part IV Checklist of Required Schedules

		\neg	V	Al-
1 .	, Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Χ
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	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
0	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		Х
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D, Part X	11f		Х
l 2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
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	L	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Χ
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
-	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F. Parts I and IV	14b	<u> </u>	X
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		Х
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		Х
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		Х
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		Х
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		Х
		-	000	(0010

Part IV Checklist of Required Schedules (continued)

			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Χ
	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		Х
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		Х
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? <i>If "Yes," complete Schedule J</i>	23		Х
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	23		
	24b through 24d and complete Schedule K If "No," go to line 25a	24a		X
	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		<u> </u>
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes." complete Schedule L. Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	L	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
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		Х
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? <i>If "Yes," complete Schedule R, Part I</i>	33		Х
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		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		
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? <i>If "Yes " complete Schedule R, Part yu</i> "			
38	VI 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	37	X	X
	10 1101011 1 Offit 000 more are required to complete obtledule o	38 Form		(2016)
		. 0.11		(~~ (0)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V							
•				Yes	No			
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	60 mg	16240	學			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable							
	gaming (gambling) winnings to prize winners?		1c	4	X			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		12.33	1020	S.			
	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	<u> </u>	2b	13-12-20	Saider 1			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instri				2405			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	201.01.07	3a	150540	Х			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Sch	edule O	3b		 			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or o		100		\vdash			
	over, a financial account in a foreign country (such as a bank account, securities account, or other							
	account)?.		4a		X			
b	If "Yes," enter the name of the foreign country		84.7K	7	133			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Finance	cial Accounts						
	(FBAR)	olai 7 1000 ai 110						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	ar?	5a	<u> معتقد</u>	X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra		5b		X			
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	ansaction.	5c		1.			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and	did the	100		 			
	organization solicit any contributions that were not tax deductible as charitable contributions?	aid tile	6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contri	hutions or	- Oa		 			
~	gifts were not tax deductible?	battoris of	6b					
7	Organizations that may receive deductible contributions under section 170(c).		12.12.12.12.12.12.12.12.12.12.12.12.12.1	'JAM	TING			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	y for goods		1				
-	and services provided to the payor?	y 101 g0003	7a	25123	2723			
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	n it was	1.5		 			
·	required to file Form 8282?	r it was	7c					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		Ì.				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal ben		7e					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of		7f		+			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8		7g		<u> </u>			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		<u> </u>			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund main		2001 F	A	743			
	sponsoring organization have excess business holdings at any time during the year?	named by and	8	2.00	نفحتنا.			
9	Sponsoring organizations maintaining donor advised funds.			S. WARREN	573			
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a	متماصد	122.21			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person	?	9b		 			
10	Section 501(c)(7) organizations. Enter		7		STE			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			长鹭			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		3 17 18 2	子 5.3%			
11	Section 501(c)(12) organizations Enter			1				
а	Gross income from members or shareholders	11a	25.2		15 TO SE			
b	Gross income from other sources (Do not net amounts due or paid to other sources			1	100			
	against amounts due or received from them)	11b	は熱	1	135			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	<u> </u>	12a	STEEL STEEL	A.C. miss			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1123	£100	5.3			
13	Section 501(c)(29) qualified nonprofit health insurance issuers			1.15				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		T			
	Note See the instructions for additional information the organization must report on Schedule C	1	وَ يَسْوِينَ	2 h d)				
b	Enter the amount of reserves the organization is required to maintain by the states in which		1.3.					
	the organization is licensed to issue qualified health plans	13b	19. 35. 18.1 3	37				
С	Enter the amount of reserves on hand	13c	77.7	1.3				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	· · · · · · · · · · · · · · · · · · ·	14a		1			
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Sc.	hedule O	14b					

Part VI

GKAND FORKS COUNTY FARM BUREAU

45-0235538 Page 6

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances are considered. response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI

Sect	ion A. Governing Body and Management								
				Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a -							
	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	b Enter the number of voting members included in line 1a, above, who are independent 1b								
2									
	any other officer, director, trustee, or key employee?								
3	Did the organization delegate control over management duties customarily performed by or under	er the direct	2						
	supervision of officers, directors, or trustees, or key employees to a management company or other person?								
4									
5	Did the organization become aware during the year of a significant diversion of the organization		5		X				
6	Did the organization have members or stockholders?	0 400010	6	Х	<u></u> -				
7a	Did the organization have members, stockholders, or other persons who had the power to elect	or annoint							
	one or more members of the governing body?	от арропи	7a	Х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	are	ra.	23					
~	stockholders, or persons other than the governing body?	513,	7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertail	kon dusina	10 127 (102)	200					
Ū	the year by the following	ken during							
а	The governing body?		8a	X	Z CONT				
b	Each committee with authority to act on behalf of the governing body?		8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be	a roochad	on						
,	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule (9		Χ				
Sect	ion B. Policies (This Section B requests information about policies not required by the I				Λ				
,,,,	tell B. Folicies (This occitor B requests information about policies not required by the I	internal Nevertue C	ou e)	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?		10a	163	X				
b	If "Yes," did the organization have written policies and procedures governing the activities of suc	h chanters	100		7.				
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt		10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of t		11a	Х					
b									
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		<u>多数</u> 12a		X X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	aive rise to conflicts?	12b		Λ				
c	Did the organization regularly and consistently monitor and enforce compliance with the policy?		120						
Ĭ	describe in Schedule O how this was done	11 163,	12c						
13	Did the organization have a written whistleblower policy?		13		X				
14	Did the organization have a written document retention and destruction policy?		14		X				
15	Did the process for determining compensation of the following persons include a review and app	aroval by	*ANNE	1					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	on and decision?		A 100					
а	The organization's CEO, Executive Director, or top management official	on and accision.	15a	138.25.4	X				
b	Other officers or key employees of the organization		15b		X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		130	1574	and the same				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	ngement	湯頭		1				
	with a taxable entity during the year?	ngement	16a	المتنسطة	X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evo	aluato ite	33	C.355	1,33				
~	participation in joint venture arrangements under applicable federal tax law, and take steps to sa		1000		1				
	the organization's exempt status with respect to such arrangements?	reguard	16b	Mark Co					
Sect	ion C. Disclosure		1.00						
17	List the states with which a copy of this Form 990 is required to be filed								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	990-T (Section 501(c)(3)s c	onlv)					
	available for public inspection. Indicate how you made these available. Check all that apply	,	, , . , = \	1)					
		plain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing document			, and					
	financial statements available to the public during the tax year		7						
20	State the name address, and telephone number of the person who possesses the organization'	s books and records	>						
	JANICE SAUER	701-594-4	1190						
	1287 22ND ST NE EMERADO ND 58228								

Part VII	Compensa	tion of O	fficare Dire	actore "	Trustage Ko	W Employees	Highest Company	- od	
Form 990 (2016)	GRAND	FORKS	COUNTY	FARM	BUREAU			45-	0235538 _{Page}

Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
	Check if Schedule O contains a response or note to any line in this Part VII		
	Employees, and Independent Contractors		
Part VII,	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensat	ted	
(CIAMO TOMAS COUNTY TIMO BONDA		OZJJJJO Page

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 nor an	y related organi	ızatıo	n cc	mp	ens	ated	any	current officer,	director, or trust	ee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er an	Pos eck ss pe	rson rect	than both Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) KRIS BATEMAN	2									
PRESIDENT		Х		X				0	0	0
(2) NATE STHLIEF VICE-PRES	1	X		X	!			0	0	0
(3) JANICE SAUER SEC/TREAS	4	Х		Х				0	0	0
(4) ROBERT DREES DIRECTOR	1	X						0	0	0 -
(5) LARRY NORD DIRECTOR	1	Х						0	0	0
(6) DON UGLEM DIRECTOR	1	Х						0	0	0
(7) JEN FICHTNER DIRECTOR	1	Х						0	0	10
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)		-								

P	Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee:	s, a	nd l	High	est	Compensated	Employees (c	ontınu	ed)	
	•					C)							
•	(A)	(B)					(E)	_	(F)				
	Name and title	Average hours per	ours per officer and a director/trustee			Reportable compensation	Reportable compensation		stimate nount (
		week (list any hours for	Individual trustee or director	Inst	Officer	Key	emp Higt	Former	from the	from related organizations	con	other pensa	tion
		related organizations	vidua	tutio	ğ	emp	nest o	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	· f	rom the	9
		below dotted	or ta	Institutional truste		Key employee	e comp		(**-2/1099-10113C)		an	janizati d relati	ed
		line)	stee	uste		"	Highest compensated employee				org	anızatı	ons
				l °			řed						
(15)													
(16)					-								
(17)													<u>.</u> _
(18)											 		
(19)											 		
(20)						ļ,							
(21)								_			+		
			_										
								_			ļ .		
								_			ļ		
(25)						L _,_							
1b	Sub-total	3 Ai A						•					
c d	Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)	Section A									+		
2	Total number of individuals (including but not li reportable compensation from the organization		listed	abo	ove)) wh	o rec	ceiv	ed more than \$1	00,000 of	_1		
	reportable compensation non-the organization								·			Yes	No
3	Did the organization list any former officer, diremployee on line 1a? <i>If</i> "Yes," complete Sche					yee.	, or h	ighe	est compensate	d	3		X
4	For any individual listed on line 1a, is the sum					and	d othe	er co	ompensation fro	m	32	270	
	the organization and related organizations gre												
	ındıvıdual										4		Χ
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "	•			-				•	dıvıdual	5		X
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest comp compensation from the organization. Report of										on's ta:	<	
-	year (A)							1	(B)		(C)	
	Name and business add	Iress						_	Description of ser	vices	Compe	nsation	
												-	
		7											
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the		nited	to th	1056	e list	ted a	bov	e) who received				

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Total revenue Related or Unrelated Revenue exempt business excluded from function revenue tax under sections revenue 512-514 Federated campaigns 1<u>a</u> Contributions, Gifts, Grants and Other Similar Amounts 28379 Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 260 1f Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code Program Service Revenue 2a All other program service revenue Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 7800 Gross rents 6a Less rental expenses 7800 Rental income or (loss) 7800 7800 d Net rental income or (loss) (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a h All other revenue SATER NEW Total Add lines 11a-11d • Total revenue. See instructions 36443 7800

Part IX: Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete all columns.

Secin	on 50 (C)(S) and 50 (C)(4) organizations must complete a			st complete column	(A)					
•	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	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	Benefits paid to or for members									
5	Compensation of current officers, directors,			and the same of th						
	trustees, and key employees									
6	Compensation not included above, to disqualified			,						
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	•								
7	Other salaries and wages									
8	Pension plan accruals and contributions (include									
•	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits	2759.	2759.							
10	Payroll taxes	2,33.	2,33.		·····					
11	Fees for services (non-employees)									
a	Management	736.		736.						
b	Legal									
C	Accounting	126.	126.							
d	Lobbying									
е	Professional fundraising services See Part IV, line 17			HARRY STREET,						
f	Investment management fees	480.	480.	to the state of the state of the						
g	Other (If line 11g amount exceeds 10% of line 25 column									
Ū	(A) amount, list line 11g expenses on Schedule ()									
12	Advertising and promotion	2275.	760.	1515.	***					
13	Office expenses	3128.	372.	2756.						
14	Information technology									
15	Royalties									
16	Occupancy									
17	Travel	4316.		4316.						
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	4316.		4316.						
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	4303.		4303.						
23	Insurance	1091.	364.	727.						
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)	太宗(位)。安宗(宋] [[]	· 李文明是 · 二十二十二	では、	·英语、英语类					
a	JANITORIAL	855.	286.	569.						
b	PROPERTY TAX	2284.		2284.						
Ç	RENT	4800.	1500	4800.						
d	SCHOLARSHIPS	1500.	1500.	 						
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	32969.	6647.	26322.						
26	Joint costs Complete this line only if the	J2303.	0047.	20322.						
20	organization reported in column (B) joint costs									
	from a combined educational campaign and			}						
	fundraising solicitation Check here				1					
	following SOP 98-2 (ASC 958-720)									
					<u> </u>					

Part X Balance Sheet

		Check if Schedule O contains a response of	r note to any line in this Part	X		
	•			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		2029.	1	1762.
	2	Savings and temporary cash investments		27496.	2	36122.
	3	Pledges and grants receivable, net		3		
ł	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and t	former officers, directors,			
		trustees, key employees, and highest compens				
İ		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified person	ons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), a				
		sponsoring organizations of section 501(c)(9) voluntary e				
ets		organizations (see instructions) Complete Part II of Sche		6		
Assets	7	Notes and loans receivable, net			7	
⋖	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or				NAME OF THE PARTY
		other basis Complete Part VI of Schedule D	10a 234323.			
	b	Less accumulated depreciation	10b 177063.	52957.	10c	57260.
	11	Investments—publicly traded securities			11_	
	12	Investments—other securities See Part IV, line	e 11	140565.	12	172552.
	13	Investments—program-related See Part IV, Iir		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must eq	ual line 34)	223047.	16	267696.
	17	Accounts payable and accrued expenses		17		
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete		STANDARDS AND AND THE PROPERTY OF THE	21	270 2750 MINISTER CORP. (A.C. of S.). 3
Liabilities	22	Loans and other payables to current and forme		***	22	
i t		trustees, key employees, highest compensated			2 3 3 3	
iat.		disqualified persons Complete Part II of Sche			22	
_	23	Secured mortgages and notes payable to unre			23	
	24 25	Unsecured notes and loans payable to unrelat			24	
	23	Other liabilities (including federal income tax, parties, and other liabilities not included on line				
		Part X of Schedule D	es 17-24) Complete		25	
	26	Total liabilities. Add lines 17 through 25			26	
	-		50 4 11 2		573	
S		Organizations that follow SFAS 117 (ASC 9	· · · · · · · · · · · · · · · · · · ·			
ပို		complete lines 27 through 29, and lines 33	and 34.			
ala	27	Unrestricted net assets			27	
8	28	Temporarily restricted net assets			28	
Ĭ	29	Permanently restricted net assets		NET STEEN THE PROPERTY THE PROPERTY OF THE PRO	29	BOND WIND WELL SHOW THE SHOW
T.		Organizations that do not follow SFAS 117 (ASC958).	, check here $ ightharpoonup$ and		ic.	
S O		complete lines 30 through 34				
Net Assets or Fund Balances	30	Capital stock or trust principal or current funds		30		
As	31	Paid-in or capital surplus, or land, building, or			31	
let,	32	Retained earnings, endowment, accumulated	income, or other funds	223047.	32	267696.
Z	33	Total net assets or fund balances		223047.	33	267696.
	34	Total liabilities and net assets/fund balances		223047.	34	267696.

Form 990 (2016)	GRAND	FORKS	COUNTY	FARM	BUREAU

45-0235538 Page **12**

Part	XIX Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 •	Total revenue (must equal Part VIII, column (A), line 12)	1		644	
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	296	
3	Revenue less expenses Subtract line 2 from line 1	3		347	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	22	304	17.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		_	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	22	652	<u> </u>
Part	XII Financial Statements and Reporting			-	_
	Check if Schedule O contains a response or note to any line in this Part XII				
4	Accounting method used to prepare the Form 990 X Cash Accrual Other		概念でき	Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
24	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		24 54.6	60	
	reviewed on a separate basis, consolidated basis, or both				
					表為
	Separate basis Consolidated basis Both consolidated and separate basis		200		
b	Were the organization's financial statements audited by an independent accountant?		2b	ا زاد المورون	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.			243.54	
	Separate basis Donsolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	of		煙	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain i	n		1	
	Schedule O		2	2	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Г	agn .	(2016)

orm **990** (2016)

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

		ganizations Complete Part III						
	e of organization	Employer identification number						
GRA					15-0235538			
Pa	Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.							
1		he organization's direct and indirect						
	definition of "political cam		. , ,		`			
2		y expenditures (see instructions)			▶ \$			
	Volunteer hours	,						
Pa	rt I-B Complete if t	he organization is exempt und	er section 501(c)(3).	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1		excise tax incurred by the organizati			▶ \$			
2	Enter the amount of any	excise tax incurred by organization r	managers under s	ection 4955	. •	· · · · · · · · · · · · · · · · · · ·		
3	If the organization incurre	ed a section 4955 tax, did it file Form	1 4720 for this year	r۶	•	Yes	No	
4a	Was a correction made?					Yes	☐ No	
b	If "Yes," describe in Part	IV						
Pa	rt I-C Complete if t	he organization is exempt und	er section 501(c), except section	n 501(d	c)(3).		
1	Enter the amount directly	expended by the filing organization	for section 527 e	kempt function				
	activities				▶ \$			
2	Enter the amount of the f	iling organization's funds contributed	d to other organiza	itions for section				
	527 exempt function activities \$ \(\)							
3								
	line 17b				▶ \$			
4	Did the filing organization	file Form 1120-POL for this year?				Yes	No No	
5	Enter the names, addres	ses and employer identification num	ber (EIN) of all se	ction 527 political or	ganizat	tions to which the	filing	
		ents. For each organization listed, e						
		intributions received that were promp						
	as a separate segregated	d fund or a political action committee	e (PAC) If addition	al space is needed,	provide	e information in F	Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	om	(e) Amount of p	olitical	
				filing organization		contributions rece		
		' •		funds If none, enter	-0-	promptly and of delivered to a se	-	
						political organiz	•	
						none, enter	-0-	
(1)								
.,								
(2)	!							
(3)					}			
/A\						······································		
(4)								
(5)								
(6)								

	t II-B	Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	f filed	For	n 5768	;	_	
		es," response on lines 1a through 1i below, provide in Part IV a detailed of the lobbying activity		a)			(b)	
1	During to	he year, did the filing organization attempt to influence foreign, national, state or local on, including any attempt to influence public opinion on a legislative matter or dum, through the use of	Yes	No	A	moun		
a b	Volunte							
c	Media a	dvertisements? s to members, legislators, or the public?					8 G. 25. 15.	
e f	Publica	tions, or published or broadcast statements? to other organizations for lobbying purposes?						
g h i	Rallies,	ontact with legislators, their staffs, government officials, or a legislative body? demonstrations, seminars, conventions, speeches, lectures, or any similar means? ctivities?						
j 2a	Total A	dd lines 1c through 1i activities in line 1 cause the organization to be not described in section 501(c)(3)?			7 m 2 m 2		See See See See See	
b c	If "Yes,' If "Yes,'	enter the amount of any tax incurred under section 4912 enter the amount of any tax incurred by organization managers under section 4912 ng organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Par	t III-A	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	or s	ection			
1 2 3	Did the	ubstantially all (90% or more) dues received nondeductible by members? organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political campaign activity expenditures from the prior y	ear?		1 2 3	Yes	X X	
_	III-B	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."	(c)(5)		ection		1	
1 2	Section political	issessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of ill expenses for which the section 527(f) tax was paid).		1				
a b c	Current Carryov Total	year ver from last year		2a 2b 2c				
3 4	Aggreg If notice excess	ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues as were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible g and political expenditure next year?		3				
5 Par	Taxable	amount of lobbying and political expenditures (see instructions) Supplemental Information		5				
Provi 2 (se	de the de	escriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grotions), and Part II-B, line 1. Also, complete this part for any additional information I , $LINE\ 1B$	oup lis	t), Par	t II-A, lı	nes 1	and	
MEMI	BERSH	IP DUES 28379						
								

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization 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

Employer identification number GRAND FORKS COUNTY FARM BUREAU 45-0235538 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. :Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No Part 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 organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b С Number of conservation easements on a certified historic structure included in (a) 2¢ d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? No Yes 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990 Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X

Part	Organizations Maintaining Co	ollections of A	rt, Histor	ical Trea	asures, or C	Other	Similar Assets	(continued)	
3									
	collection items (check all that apply)								
а	Public exhibition d Loan or exchange programs								
b	Scholarly research		e 🗌	Other					
С	Preservation for future generation	ıs			••		•		
4	Provide a description of the organization		d explain	how they	further the o	rganiz	ation's exempt nui	nose in Part	
	XIII		ra explain	now they	iditifier the o	gamz	alion's exempt pai	pose in rait	
5	During the year, did the organization sol	icit or receive do	nations of	art. histo	rical treasure	s. or c	ther similar		
	assets to be sold to raise funds rather th							Yes No	
Part	art IV Escrow and Custodial Arrangements.								
	Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form								
	990, Part X, line 21			•	, ,	•			
1a	Is the organization an agent, trustee, cu	stodian or other	ıntermedia	ry for cor	ntributions or	other	assets not		
	included on Form 990, Part X?							Yes No	
b	If "Yes," explain the arrangement in Par-	t XIII and comple	te the follo	wing tab	le				
							A	mount	
C	Beginning balance				-	-	С		
d	Additions during the year						d		
e	Distributions during the year						e		
f	Ending balance						f		
2a	Did the organization include an amount	on Form 990, Pa	art X, line 2	21, for es	crow or custo	odial a	ccount liability?	Yes X No	
b	If "Yes," explain the arrangement in Par	XIII Check here	e if the exp	lanation	has been pro	vided	on Part XIII		
Part	V Endowment Funds.	-						-	
	Complete if the organization a	nswered "Yes"	on Form	990, Pai	rt IV, line 10				
		(a) Current year	(b) Pric	or year	(c) Two years	back	(d) Three years back	(e) Four years back	
1a	Beginning of year balance	-							
þ	Contributions								
С	Net investment earnings, gains,						_		
	and losses		ļ						
ď	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
t	Administrative expenses	·							
g	End of year balance		<u> </u>					1	
2	Provide the estimated percentage of the		d balance	(line 1g,	column (a)) I	neld as	3		
a b	Board designated or quasi-endowment Permanent endowment	0.00%	00%						
C	Temporarily restricted endowment	0.00%							
Ů	The percentages on lines 2a, 2b, and 2c								
3a	Are there endowment funds not in the p			ion that a	re held and a	admini	stered for the		
	organization by		5. gaineat		o mora ana c	~ · · · · · · · · · · · · · · · · · · ·	3.3.04 107 1110	Yes No	
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related org	janizations listed	l as require	ed on Sch	nedule R?			3b	
4	Describe in Part XIII the intended uses								
Part	VI Land, Buildings, and Equipr	nent.							
	Complete if the organization a	nswered "Yes"	on Form	990, Pa	rt IV, line 11	a See	e Form 990, Part	X, line 10	
	Description of property	(a) Cost or o			ost or other	(c	:) Accumulated	(d) Book value	
		(investr	nent)		is (other)	26.51 = 7	depreciation		
1a	Land				7,091.			37,091.	
b	Buildings			77	9,540.	ļ	107,977.	11,563.	
C	Leasehold improvements	 		-7	7 600	ļ	77 (00		
d	Equipment Other			 	7,692.	-	77,692.	 	
e Total	l. Add lines 1a through 1e (Column (d) r	nust equal Form	990 Part	Y colum	n (R) June 10	L	>	18,654.	
		nası oyuarı billi	JJU, I ail	A COIUIII	., (<i>D), IIIIC 10</i>	U /	- 1	10,004.	

Part VII	Investments—Other Secur Complete if the organization		990, Part IV, line 11b See Form 990, Par	rt X, line 12
. (a) [Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial of	derivatives	172,522.	END OF FISCAL YEAR	
	eld equity interests			
(3) Other				
.—.		· ·		
(H)				
	nusl equal Form 990, Part X col (B) line 12)	► 172,522.		
Part VIII	Investments—Program Re		HI AND MICHIGAN THE COMMISSION OF THE WASHINGTON OF THE PROPERTY OF THE PROPER	**************************************
T GIT VIII			990, Part IV, line 11c See Form 990, Par	rt X line 13
		(b) Book value	(c) Method of valuation	174, 1110 10
	(a) Description of investment	(b) Book value	Cost or end-of-year market value	
(1)				
(2)				
_(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				De tant services.
	must equal Form 990, Part X col (B) line 13)	>	《公司》,《公司》,《公司》,《公司》	对于一种的
Part IX	Other Assets.			
	Complete if the organization		990, Part IV, line 11d See Form 990, Pa	
		(a) Description	(b) E	Book value
(1)				
(2)				
(3)		·		
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part	X, col (B) line 15)	>	
Part X	Other Liabilities.			
	Complete if the organization	answered "Yes" on Form	990, Part IV, line 11e or 11f See Form 9	90, Part X,
	line 25			
1	(a) Description of liability	(b) Book value		对这些证明
(1) Federal	income taxes			推进。
(2)				
(3)				
(4)				The state of the s
(5)				
(6)				表现在是是
(7)				
(8)				
(9)	nust equal Form 990 Part X-col (B) line 25)			验证证证
T-4-1 /0-1 // !				are the state of t

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

SCHEDULE O (Form, 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization

CDAND FORKS COLINTY FARM RIDERAL

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

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