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Extended to June 15, 2017

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

OMB No 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.lrs.gov/form990.

532001 12-16-15 LHA For Paperwork Reduction Act Notice, see the separate instructions.

A	For th	e 2015 calendar year, or tax year beginning $f NOV \ 1 \ , \ 2015$ and ending	OCT 31, 2016	
В	Check i	C Name of organization	D Employer identifi	cation number
	Addr chan	e Conway County Farm Bureau	1	
	Nam chan	Doing business as	71-0	281591
	linitia teturi		suite E Telephone numbe	r
	Final	P.O. Box 648		354-0101
	termi ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	236,987.
	Amer	ided) Mannilton AD 70110	H(a) Is this a group re	eturn
	Appi.	I F Name and address of principal officer. Dall C SCODaugii	for subordinates	
	pend	same as C above	H(b) Are all subordinates i	ncluded? Yes No
T	Tax-ex	empt status 501(c)(3) _X 501(c)(5) ◀ (insert no.) 4947(a)(1) or		list. (see instructions)
J	Nebs	te: ➤ www.arfb.com/conway	H(c) Group exemption	
K	orm o	forganization: X Corporation Trust Association Other	Year of formation: 1966	
	art I	Summary		
-	1	Briefly describe the organization's mission or most significant activities. Agricult	ural Promotio	n
Governance	ļ			
Ę	2	Check this box if the organization discontinued its operations or disposed of	more than 25% of its net as	ssets
See.	3	Number of voting members of the governing body (Part VI, line 1a)	3	22
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	22
ş	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	5
į	6	Total number of volunteers (estimate if necessary)	6	32
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	127,416.
₹	1	Net unrelated business taxable income from Form 990-T, line 34	7b	-25,492.
		Province.	Prior Year	Current Year
Ф	8	Contributions and grants (Part VIII, line 1h)	0.	0.
Ĕ	9	Program service revenue (Part VIII, line 2g)	45,704.	45,262.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	798.	794.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c/10c/and 11e)	166,030.	190,931.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	212,532.	236,987.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	575.	350.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Ś	15	Salaries, other compensation, employee benefits (Part IX, column (A) lines 5-10)	98,263.	96,872.
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25)		
மி	,	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	103,536.	108,476.
	ı	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	202,374.	205,698.
	1	Revenue less expenses Subtract line 18 from line 12	10,158.	31,289.
589			Beginning of Current Year	End of Year
sets		Total assets (Part X, line 16)	482,657.	512,736.
d B	21	Total liabilities (Part X, line 26)	21,268.	20,058.
Net Ass Fund Ba	22	Net assets or fund balances Subtract line 21 from line 20	461,389.	492,678.
	irt II	Signature Block		
Unde	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, and to the best of my	knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer/(other than officer) is based on all information of which prepare the complete of the	arer has any knowledge.	
		who M Hont	6/5	QUIT
Sign	1	Signature of officer	Date	
Here	в	John M. Hoyt County Pap	sident	
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Paid		Sherry Chesser, CPA Show Choose	self-employe	P00174819
Prep	arer	Firm's name Thomas & Thomas LLP	Firm's EIN	71-0271741
Use	Only	Firm's address 201 E. Markham, Suite 500		
		Little Rock, AR 72201	Phone no.50	1-375-2025
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

Form 990 (2015)

	n 990 (2015) Conway County Farm Bureau	71-0281591	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	Briefly describe the organization's mission. Agricultural Promotion		
	Agricultural Fromotion		
			
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
_	If "Yes," describe these new services on Schedule O	۲ا	(.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes	X No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as	maggired by evacues	_
7	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe		
	revenue, if any, for each program service reported	ro, the total expendes,	uno
4a	(Code) (Expenses \$ including grants of \$) (Revenu	e \$)
	County Farm Bureau work is general in nature, helping fa	rm families	
	achieve educational improvements, economic opportunity,	and social	
	advancement.		
			
			
			
			
			
41.			
4b	(Code) (Expenses \$) (Revenu	e \$,
			
	·		
4c	(Code) (Expenses \$	e \$)

4-1	Other and the Charles of the Charles		
4d	Other program services (Describe in Schedule O)	١	
40	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶		
		Form 9	90 (2015)

		Yes	No		
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l, lines	17		<u></u>		
	18		X		
	19	990 (X		
	rom	33U (2	2015)		

7	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			١
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			x
_	public office? If "Yes," complete Schedule C, Part I	3_		<u> </u>
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	X	L
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,			j
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			}
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable Did the expensation report on emplint for land, buildings, and equipment in Best V, line 199 if "Yes," complete Schedule P.			
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
¢	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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 167 If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X	11e		X
1	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	40-		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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	- 1	- 1	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	- 1	Х
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		X
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		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	}	1	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	1		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	v
	complete Schedule G, Part III	19	- 1	X

<u> </u>			Yes	Tala .
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	res	No X
	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	200		
41	• • • • • • • • • • • • • • • • • • • •	21		х
22	domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	121		 -
~	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	00		x
93	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		 -
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1 :		1
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			x
	Schedule J	23		<u> </u>
248	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1 :		l
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1 :		v
	Schedule K If "No", go to line 25a	24a		X
b		24b		
С	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	ļ	 -
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			i
	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	1		1
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		1
	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			l
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			i
	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):			.,
а	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		_X_
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	1		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	1 1		
	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		X
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1 1		
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1 1		
	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	1 1		<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1 1		l
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
		F	aan i	(2015)

	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										
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	}									
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming										
	(gambling) winnings to prize winners?	1c	Х								
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return 2a 5		1								
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х								
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)										
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х								
b	b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O										
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a										
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X							
b	If "Yes," enter the name of the foreign country ►										
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			ĺ							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X							
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X							
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			ĺ							
	any contributions that were not tax deductible as charitable contributions?	6a		X							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			ŀ							
	were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).			1							
а	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		<u> </u>							
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1		ĺ							
	to file Form 8282?	7c									
d	Li L			1							
е	· · · · · · · · · · · · · · · · · · ·	7e									
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 1									
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g									
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			1							
^	sponsoring organization have excess business holdings at any time during the year?	8		├							
9	Sponsoring organizations maintaining donor advised funds.	0-		ĺ							
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		 							
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter.	90									
	Initiation fees and capital contributions included on Part VIII, line 12			ĺ							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			1							
11	Section 501(c)(12) organizations. Enter.										
	Gross income from members or shareholders			l							
	Gross income from other sources (Do not net amounts due or paid to other sources against			1							
-	amounts due or received from them)			ĺ							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1							
	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.	1		l							
	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										
С	Enter the amount of reserves on hand										
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X							
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b									
		Form	990	(2015)							

Form 990 (2015) Conway County Farm Bureau 71-0281591 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O	See instructions.								
	Check if Schedule O contains a response or note to any line in this Part VI				X					
Sec	tion A. Governing Body and Management									
				Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 22								
	If there are material differences in voting rights among members of the governing body, or if the governing		}	[ł					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		1	ļ	ļ					
b	Enter the number of voting members included in line 1a, above, who are independent	1b 22	l .	ļ 1						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other	1		[
	officer, director, trustee, or key employee?		2	X	į .					
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?									
4										
5	Did the organization become aware during the year of a significant diversion of the organization's ass		5		X					
6	Did the organization have members or stockholders?	0.3.	6	X						
_	Did the organization have members, stockholders, or other persons who had the power to elect or ap	moint one or	├┷		 					
	more members of the governing body?	point one or	7a	\mathbf{x}						
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, si	cockholdere or	۳-							
	persons other than the governing body?	lockiloideis, oi	7b	x	ľ					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea	r by the following:	 '''							
		dy the following.		x	1					
a	The governing body?		8a 8b	X						
p	Each committee with authority to act on behalf of the governing body?	-1	80							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched at the	9	1	x					
500	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Re	wanua Cada l	<u> </u>							
<u> </u>	tion B. Folicies (This Section B requests information about policies not required by the internal Re	venue Code)		V	T					
10-	Did the account on have been been been been as effect of		100	Yes	No X					
	Did the organization have local chapters, branches, or affiliates?		10a		 ^					
0	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters, attiliates,	401		1					
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	. to a facility of the angle of the control of the	10b	-	X					
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before filling the form?	11a							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		1	x	1					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12b							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye	es," aescribe	١	х	1					
	in Schedule O how this was done		12c	Δ.	X					
13	Did the organization have a written whistleblower policy?		13	₩.	<u> </u>					
14	Did the organization have a written document retention and destruction policy?		14	Х						
15	Did the process for determining compensation of the following persons include a review and approva	I by independent	1							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		l '	1	٠,,					
	The organization's CEO, Executive Director, or top management official		15a		X					
ь	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).		1		ŀ					
าชล	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements.	nent with a			v					
	taxable entity during the year?		16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat		1							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization's	1							
	exempt status with respect to such arrangements?		16b	L						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed NoneNone									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Section 501(c)(3)s only)	availab	le						
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain	ın Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, cor-	iflict of interest policy, an	d finan	cial						
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and records 🕨								
	The Organization - 501-354-0101									
	P.O. Box 648, Morrilton, AR 72110									

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

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

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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

· 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

(A)	(B)	J.g.		((C)		ioui	(D)	(E)	(F)
Name and Title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)				h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Bart Stobaugh	0.50									
President	<u> </u>	X		Х	<u> </u>	L.	_	0.	0.	0.
(2) Johnny Hoyt	0.50	 	İ							_
Vice President		X	L.	X	<u> </u>	╙	_	0.	0.	0.
(3) Rocky Vess	0.50	l <u></u>				Ī				
Secretary/Treasurer		X	_	Х	<u> </u>	Ь.	┞	0.	0.	0.
(4) Gary Kaufman	0.50	١.,				ŀ				_
Member	0 50	Х	ļ		ļ	▙	<u> </u>	0.	0.	0.
(5) Harry Caldwell Member	0.50	x			ĺ	l		0.	0.	0.
(6) Hall Calhoun	0.50	1	<u> </u>	_	├-	├	⊢	ļ <u> </u>		<u> </u>
Member	0.30	x				l		0.	0.	0.
(7) Robert Carruthers	0.50	^	-			├-	├	ļ 	· · · · · · · · · · · · · · · · · · ·	<u>·</u>
Member	0.30	x)	1	١		0.	0.	0.
(8) Kirk Price	0.50	^	 	_	-	┢╌	┝			
Member	- 0.30	\mathbf{x}			ŀ	1		0.	0.	0.
(9) Scott McKennon	0.50				┢╌	t-		 	-	
Member		x			ŀ	ľ		0.	0.	0.
(10) Charles Gray	0.50		 		 	┢	┢			
Member		X						0.	0.	0.
(11) William Gray	0.50	Ι		-	<u>├</u>	<u> </u>				
Member		x						0.	0.	0.
(12) Les Davis	0.50					\vdash				
Member		X				ľ		0.	0.	0.
(13) Brandon Zinser	0.50			-						
Member		X				ŀ		0.	0.	0.
(14) Randy Hayes	0.50									
Member		X				ŀ	l	0.	0.	0.
(15) Jerry Scroggins	0.50	Г								
Member		$X_{}$			_	l	ļ	0.	0.	0.
(16) William Martin	0.50									
Member		X					<u> </u>	0.	0.	0.
(17) John Maus	0.50									
Member	<u> </u>	X			L	<u>L</u>	Щ	0.	0.	0.

Section A. Officers, Directors, Trus	tees, Key Em	proy	<u>rees</u>	<u>, an</u>	d H	ighe	st C	compensated Employe	es (continuea)				
(A) Name and title	(B) Average hours per week	box	not c , unle	Pos heck ss pe	rson	h than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensatio from related	ation amount			of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer	Key emplayee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	s ^l	org an	npensa rom th ganiza id rela anizat	ation ie tion ted
(18) Nick Moore	0.50	를	Ę	<u> </u>	<u>ş</u>	물통	ق	 			├		
Member	0.50	x	1		ſ	1	ł	0.		0.			0.
(19) Barry Stobaugh	0.50	-	-	\vdash	十一	┼	-	 			 		
Member		x	1			1	Ì	0.	l	0.			0.
(20) Robert Stobaugh	0.50				1	\top							
Member		X				١.		0.		0.			0.
(21) Tommy Thompson	0.50		[
Member		X		L_	ļ	<u> </u>	L.	0.		0.	<u> </u>		0.
(22) Randy Voss	0.50					1	1		1		1		0
Member	<u> </u>	Х	-	-		}	_	0.		0.	 -		0.
	<u> </u>	-		}			1		1	ì			
	<u> </u>	-	-	┝	-	┢							
	<u> </u>	1	}	Ì	1	1	Ì	<u>]</u> "			1		
		T			ļ T	T		<u> </u>	 	$\neg \neg$			
		1	l	ļ				ļ	1				
			Π			Т							
			_	<u> </u>			L						
1b Sub-total								0.		0.	<u> </u>		0.
c Total from continuation sheets to Part VI	I, Section A							0.		0.			0.
d Total (add lines 1b and 1c)			14.			- \	▶	0.	000 -6		<u> </u>		<u> </u>
 Total number of individuals (including but necessary) compensation from the organization 	ot iimitea to tr	1056	liste	eo a	DOV	e) wr	10 F	eceived more than \$100	,000 of reportabl	е			0
compensation nom the organization												Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			e, ke	ey er	nplo	oyee,	, or	highest compensated e	mployee on		3		x
4 For any individual listed on line 1a, is the su	ım of reportab	le co	omp	ensa	ation	n and	d oti	her compensation from	the organization				
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e <i>J f</i>	for such individual			4	<u> </u>	X
5 Did any person listed on line 1a receive or a					-		elat	ed organization or indivi	idual for services		i	ł	
rendered to the organization? If "Yes," com	plete Schedul	e <i>J 1</i>	or s	uch	pers	son					5	<u> </u>	X
Section B. Independent Contractors													
1 Complete this table for your five highest co	•	•							•	pens	ation	trom	
the organization. Report compensation for (A)	trie caleridar y	ear	eriai	ng v	with 1	or w	101111	(B)	year			C)	
Name and business	address	N	INC	3				Description of s	ervices	С	ompe		ท
													
									Ì				
							7						
							7						
2 Total number of independent contractors (i	noludina but	ot I	mıtc	d *c	+h-c	00 10	***	(above) who received a	oro than				
2 Total number of independent contractors (i \$100,000 of compensation from the organic		iot II	iiite	u lo		se 11: 0	si e 0	abovej who received if	IOI & IIIAI I				
\$ 100,000 or compensation from the organi.	cation					<u>~</u>					Form	990	(2015)
532008											, 01111		(_0,0)

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
		SHOOK II SCHEUDIE O'COITE	and a response	o. Hote to any lift	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
D G		Membership dues	1b					
T, ts,		Fundraising events	1c					
5 8		Related organizations	1d					
Sin		Government grants (contribut All other contributions, gifts, gran						
ig je	,	similar amounts not included abo						
Éğ	a	Noncash contributions included in lines	<u> </u>					
SE	-	Total. Add lines 1a-1f		•				
				Business Code				
9	2 a	Membership Dues	3	110000	45,262.	45,262.		
e e	b					+ ·		
S E	С			ļI				
Pra	d			<u> </u>				
Program Service Revenue	e	All other program service reve	2010	}				
l	'	Total. Add lines 2a-2f	mue		45,262.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶ [794.			794.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
l	5	Royalties		, <u></u>	1,562.			1,562.
	_	_	(i) Real	(II) Personal				
		Gross rents	60,953.	 			1	
		Less. rental expenses Rental income or (loss)	60,953.	 				1
		Net rental income or (loss)	00,555		60,953.			60,953.
		Gross amount from sales of	(i) Securities	(II) Other				
- 1		assets other than inventory				!		
į	b	Less cost or other basis				!		
l		and sales expenses		l	i			
1		Gain or (loss)	<u> </u>	<u> </u>	ļ	,		
		Net gain or (loss)		>				
Revenue	8 a	Gross income from fundraisin including \$	g events (not		İ			
e l		contributions reported on line	1c). See	, ,	İ		!	
Other		Part IV, line 18	a	 				
ō		Less, direct expenses	b b					
}		Net income or (loss) from fund Gross income from gaming ad						
	3 a	Part IV, line 19	a a	[[
j	ь	Less. direct expenses	b					
j		Net income or (loss) from gan	ning activities	•	:			
ļ	10 a	Gross sales of inventory, less	returns					
1		and allowances	а					
Ì		Less cost of goods sold	b	L				
}	<u>c</u>	Net income or (loss) from sale						
ł	44.0	Miscellaneous Revenu Insurance Servi		Business Code 524298	127,416.		127,416.	
	11 a b		ncome	900099	1,000.		121,410.	1,000.
1	C			755555				2,000.
ļ	ď	All other revenue						
	е	Total. Add lines 11a-11d		•	128,416.			
	12	Total revenue. See instructions.		_	236,987.	45,262.	127,416.	64,309.

Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, Program service expenses Fundraising expenses Total expenses Management and 7b, 8b, 9b, and 10b of Part VIII. general expenses Grants and other assistance to domestic organizations 350. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 86,495. Other salaries and wages Pension plan accruals and contributions (include 3,341. section 401(k) and 403(b) employer contributions) Other employee benefits 7,036. Payroll taxes Fees for services (non-employees) Management b Legal 600. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 8,466. Advertising and promotion 12 18,268. Office expenses 13 Information technology 14 15 Royalties 29,938. Occupancy 166. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 21,588. 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 16,683. 22 Depreciation, depletion, and amortization 701. 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Youth and Safety 11,322. Miscellaneous 744. b C d e All other expenses 205,698. Total functional expenses. Add lines 1 through 24e 25 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

if following SOP 98-2 (ASC 958-720)

Pa	rt X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part X			
	,	_ _		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		_1	033 400	
	2	Savings and temporary cash investments	<u>L</u>	266,583.	2	233,428.
	3	Pledges and grants receivable, net	<u>_</u>		3	4 5-6-5
	4	Accounts receivable, net	<u>\</u>	652.	4	1,365.
	5	Loans and other receivables from current and for				
	1	trustees, key employees, and highest compensation	•			
	ļ	Part II of Schedule L		5		
	6	Loans and other receivables from other disquali				
	İ	section 4958(f)(1)), persons described in section				
		employers and sponsoring organizations of sec				
ets	1	employees' beneficiary organizations (see instr)	Complete Part II of Sch L		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 other				
	}	basis Complete Part VI of Schedule D	10a 644,191. 10b 366,258.	015 410		055 000
	b	Less. accumulated depreciation	215,412.	10c	277,933.	
	11	Investments · publicly traded securities			11	·
	12	Investments - other securities. See Part IV, line	11		12	<u></u>
	13	Investments - program-related. See Part IV, line	11		13	
	14	Intangible assets	-		14	
	15	Other assets See Part IV, line 11		10.	15	10.
	16	Total assets. Add lines 1 through 15 (must equ	482,657.	16	512,736.	
	17	Accounts payable and accrued expenses	-	2,129.	17	2,200.
	18	Grants payable	10 120	18	17 050	
	19	Deferred revenue	-	19,139.	19	17,858.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete	r		21	
ies	22	Loans and other payables to current and former				
biji.		key employees, highest compensated employee	es, and disqualified persons.			
Lia!		Complete Part II of Schedule L	<u>, </u>		22	
_	23	Secured mortgages and notes payable to unrela	· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelate	· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, pa	•			
Liabilities		parties, and other liabilities not included on lines	s 17-24). Complete Part X of			
	00	Schedule D	ļ	21,268.	25	20,058.
	26	Total liabilities. Add lines 17 through 25	N -t	21,200.	26	20,030.
		Organizations that follow SFAS 117 (ASC 958				
češ	07	complete lines 27 through 29, and lines 33 an	10 34.			
lan	27	Unrestricted net assets	-		27	
183	28	Temporarily restricted net assets		28		
Net Assets or Fund Balances	29	Permanently restricted net assets	SC 050) short have NY		29	
Ĩ.	!	Organizations that do not follow SFAS 117 (A	эс ээв), спеск nere ▶ 🕰 📗			
ls o	30	and complete lines 30 through 34.		0.	30	0.
se	30	Capital stock or trust principal, or current funds		0.		0.
t As	31	Paid-in or capital surplus, or land, building, or ed	· · · · · · · · · · · · · · · · · · ·	461,389.	31	492,678.
Ne.	32	Retained earnings, endowment, accumulated in	come, or other tunds	461,389.	32	492,678.
	33	Total net assets or fund balances	ŀ	482,657.	34	512,736.
	34	Total liabilities and net assets/fund balances		402,037.	34	512,730.

Form	990 (2015) Conway County Farm Bureau	71-	0281591	Page 1	2				
Pa	rt XI Reconciliation of Net Assets		•		_				
	Check if Schedule O contains a response or note to any line in this Part XI				L				
		!!							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	236	5,987	•				
2	Total expenses (must equal Part IX, column (A), line 25)	2		698					
3	Revenue less expenses Subtract line 2 from line 1	3		L,289 L,389					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))								
5	5 Net unrealized gains (losses) on investments 5								
6	Donated services and use of facilities	6							
7	Investment expenses	7			_				
8	Prior period adjustments	8			_				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0	<u>.</u>				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))	10	492	2,678	•				
Pa	rt XII Financial Statements and Reporting				,				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>				
				Yes No	_				
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			İ					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	1 1	1					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	_				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	1 1						
	separate basis, consolidated basis, or both		1 1						
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2b	<u> </u>	_				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basıs	,						
	consolidated basis, or both		(
	Separate basis Consolidated basis Both consolidated and separate basis		{						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audīt,							
	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 in Sch	edule C	·] [
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit [
	Act and OMB Circular A-133?		3a	<u> </u>	_				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	iired aud	ht ht	l l					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		_				
			Form	990 (201:	5)				

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

2015

Open to Public Inspection

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

•	Section 501(c)(4), (5), or (6) organiza	tions_Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
	Conway	County Farm Bure	eau		71-0281591
Pa	art I-A Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527	organization.
2	Provide a description of the organiz Political expenditures Volunteer hours	zation's direct and indirect politi	cal campaign activities	_	\$
Pa	art I-B Complete if the org	ganization is exempt un	der section 501(c)	(3)	. ——————
	Enter the amount of any excise tax			(o). ▶	
	Enter the amount of any excise tax	•			·
	If the organization incurred a section	, -	-		Yes No
	Was a correction made?	·	•		Yes No
	If "Yes," describe in Part IV				
Pa	irt I-C Complete if the org	ganization is exempt un	der section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expended	d by the filing organization for s	ection 527 exempt func	tion activities	\$
2	Enter the amount of the filing organ	nization's funds contributed to c	other organizations for s	ection 527	
	exempt function activities			>	\$
3	Total exempt function expenditures	Add lines 1 and 2. Enter here	and on Form 1120-POL	·	
	line 17b			•	\$
4	Did the filing organization file Form	1120-POL for this year?			☐ Yes ☐ No
5	Enter the names, addresses and er made payments For each organiza contributions received that were propolitical action committee (PAC). If	ition listed, enter the amount pa comptly and directly delivered to	aid from the filing organi o a separate political org	zation's funds. Also enter janization, such as a sepai	the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
					

Schedule C (Form 990 or 990-EZ) 2015 Part II-A Complete if the org						281591 Page 2
Part II-A Complete if the org section 501(h)).	anızatıç	n is exe	mpt under sectio	n 501(c)(3) and the	ea Form 5700 (e	election under
	tion holen		losed are in four line to	- Dort IV and a officer		a address CIN
• •				n Part IV each affiliated	group member's nam	ie, address, Eliv,
B Check F if the filing organiza			• •	nuciona applu		
Limit	s on Lobi	ying Expe	nd "limited control" pro nditures unts paid or incurred.		(a) Filing organization's	(b) Affiliated group totals
				,	totals	
1a Total lobbying expenditures to influ						
b Total lobbying expenditures to influ	·		dy (direct lobbyıng)	ļ		
c Total lobbying expenditures (add li		d 1b)				
d Other exempt purpose expenditure						
e Total exempt purpose expenditure	•		•			ļ
f Lobbying nontaxable amount. Ente						ļ
If the amount on line 1e, column (a) o	r (b) is;		bying nontaxable am			
Not over \$500,000			the amount on line 1e			
Over \$500,000 but not over \$1,000			00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,	000,000		00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000		\$1,000,	000			ì
g Grassroots nontaxable amount (en		•				
h Subtract line 1g from line 1a If zero	•					
i Subtract line 1f from line 1c. If zero			r . a. Islai			
j If there is an amount other than ze		er line 1n or	line 11, did the organiz	ation file Form 4/20	1	
reporting section 4911 tax for this	year?	4 V 4	anada a Davia d Hada			Yes No
(Some organizations the		a section 5	eraging Period Under 601(h) election do not ate instructions for li	have to complete all	of the five columns l	pelow.
	Lobi	ying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures					 	
d Grassroots nontaxable amount			}	1		
e Grassroots ceiling amount				 		
(150% of line 2d, column (e))						
						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2015 Conway County Farm Bureau 71-0281591 Page 3 [Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	e lobbying activity	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
	Volunteers?	 	 		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?		 		
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?		 		
	Grants to other organizations for lobbying purposes?	 	 		
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		 		
	Other activities?		 		
	Total Add lines 1c through 1i		 		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912		 		
	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?		 		
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)(5), or se	ction	
	501(c)(6).			Ves	No
				Yes	140
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	1,,
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	504/-	3	-4:	Х
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a	<u> </u>	
b	Carryover from last year		2b	<u> </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 the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?		4		
5_	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
rovi	de the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated grou	p list), Part	II-A, lines 1 a	and 2 (see	
nstru	ictions), and Part II-B, line 1. Also, complete this part for any additional information.				
					
		 -			

SCHEDULE D

Department of the Treasury Internal Revenue Service

(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.lrs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Conway County Farm Bureau

Employer identification number 71-0281591

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts.Complete if the					
	organization answered "Yes" on Form 990, Part IV, lin	e 6						
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
2	Aggregate value of contributions to (dunng 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 advis-	ed funds					
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No					
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only					
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring					
	impermissible private benefit?							
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, F	Part IV, line 7.					
1	Purpose(s) of conservation easements held by the organization							
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histo	orically important land area					
	Protection of natural habitat	Preservation of a certi	fied historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	of a conservation easement on the last					
	day of the tax year		Held at the End of the Tax Year					
а	Total number of conservation easements		2a					
þ	Total acreage restricted by conservation easements		2b					
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c					
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	ıre					
	listed in the National Register		2d					
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax					
	year ▶							
4	Number of states where property subject to conservation ea	sement is located >						
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of						
	violations, and enforcement of the conservation easements in	t holds?	Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year					
	>							
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservat	tion easements during the year					
	▶ \$							
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	(h)(4)(B)(ı)					
	and section 170(h)(4)(B)(ii)?		└ Yes					
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense	statement, and balance sheet, and					
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes t	the organization's accounting for					
	conservation easements							
Pai	t III Organizations Maintaining Collections o	· · · · · · · · · · · · · · · · · · ·	ther Similar Assets.					
	Complete if the organization answered "Yes" on Form	i 990, Part IV, line 8						
1a	If the organization elected, as permitted under SFAS 116 (AS	• •						
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furtheral	nce of public service, provide, in Part XIII,					
	the text of the footnote to its financial statements that descri	bes these items.						
ь	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical					
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of pub	olic 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 tre	asures, or other similar assets for financial						
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:						
а	Revenue included on Form 990, Part VIII, line 1		> \$					
b	Assets included in Form 990, Part X		▶ \$					

		County Farm								Page 2	
Pai	t III Organizations Maintaining C	collections of Ar	t, Hist	orical Tre	easures, o	r Other	Simila	r Asse	ts (continu	ıed)	
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items										
	(check all that apply)										
а	Public exhibition	d	i	oan or excl	nange progra	ms					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	how th	ey further th	ne organizatio	on's exemp	ot purpo:	se in Par	t XIII		
5	During the year, did the organization solicit of	r receive donations o	of art, his	storical treas	sures, or othe	er sımılar a	ssets		_		
	to be sold to raise funds rather than to be ma								Yes	No	
Pai	Part 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, custod	ian or other intermed	ary for o	contribution	s or other as	sets not in	cluded				
	on Form 990, Part X?		•						Yes	☐ No	
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing ta	able:							
		•	•						Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for e	scrow or cu	istodial acco	unt liability	17		Yes	No No	
b	If "Yes," explain the arrangement in Part XIII										
Pa	t V Endowment Funds. Complete	f the organization ans	swered '	"Yes" on Fo	rm 990, Part	IV, line 10					
		(a) Current year	(b) Pr	rior year	(c) Two year	s back (d) Three ye	ars back	(e) Four y	years back	
1a	Beginning of year balance				_						
b	Contributions										
C	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities					\					
	and programs										
f	Administrative expenses			_							
9	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1ç	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment >	%									
C	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.									
За	Are there endowment funds not in the posse	ession of the organiza	ation tha	it are held a	nd administe	red for the	organiza	ation	_		
	by								\	Yes No	
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
þ	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the		wment f	unds.							
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answere	d "Yes" on Form 990	, Part IV	, line 11a. S	ee Form 990	, Part X, Iır	ne 10				
	Description of property	(a) Cost or ot		(b) Cost			umulated	d	(d) Book	value	
		basis (investm	nent)	basis		depre	eciation				
1a	Land]		5,743.					743.	
b	Buildings]	37	0,186.	23	38,03	4.	132	,152.	
С	Leasehold improvements								· ·		
d	Equipment				9,951.		57,47			,481.	
	Other				8,311.		50,75	4.		7557.	
Total	Add lines 1a through 1e (Column (d) must e	aual Form 000 Part	Y colum	on (P) line 1	001				2.17	933.	

Conway County Farm Bureau

Schedule D (Form 990) 2015

71-0281591 Page 3

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 Conway County Farm Bur		71-0281591	Page 4	
Part XI Reconciliation of Revenue per Audited Financial S	tatements With Reve	nue per 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.	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			
c Recoveries of prior year grants	2c			
d Other (Describe in Part XIII.)	2d			
e Add lines 2a through 2d		2e		
3 Subtract line 2e from line 1		3		
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a 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 1	(2)	5		
Part XII Reconciliation of Expenses per Audited Financial S	Statements With Expe	enses per Return.		
Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a			
Total expenses and losses per audited financial statements		1		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.				
a Donated services and use of facilities	2a			
b Prior year adjustments	2b			
c Other losses	2c	 !		
d Other (Describe in Part XIII.)	2d			
e 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:		<u> </u>		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 1		
b Other (Describe in Part XIII)	4b			
c Add lines 4a and 4b	<u> </u>	4c		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	: 18)	5		
Part XIII Supplemental Information.				
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide	any additional information.			
				
				

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Employer identification number 71-0281591 Conway County Farm Bureau

Form 990, Part VI, Section A, line 2:
Barry Stobaugh and Robert Stobaugh - family and business relationship
Barry Stobaugh, Robert Stobaugh and Bart Stobaugh - business relationship
Robert Carruthers and John Maus - business relationship
Form 990, Part VI, Section A, line 6:
The organization is a mutual benefit organization with members.
Form 990, Part VI, Section A, line 7a:
The board is elected annually by the general membership. Officers are
elected by the board.
Form 990, Part VI, Section A, line 7b:
Policy resolutions are subject to member approval.
Form 990, Part VI, Section B, line 11:
Board President reviews and signs the 990. The county secretary then
reviews and mails it.
Form 990, Part VI, Section B, Line 12c:
Compliance issues are reported at board meetings.
Form 990, Part VI, Section B, Line 15:
The Organization does not have compensated officers or management
officials.

Name of the aggregation	Page 2
Name of the organization Conway County Farm Bureau	Employer identification number 71-0281591
Form 990, Part VI, Section C, Line 19:	
These documents are not available to the public.	
	
	