

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



Department of the Treasury

## Extended to September 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)

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

OMB No 1545-0047 Open to Public Inspection

Intern	nal Revenu	ie Service	► Information about Form 990 and its instructions is at www	irs.gov/form990.	Inspection
A F	or the	2015 calend	dar year, or tax year beginning NOV 1, 2015 and ending	OCT 31, 20	16
<b>B</b> C	heck if pplicable	C Name o	of organization	D Employer ider	ntification number
	Address change	Polk	County Farm Bureau		
	Name change	Doing b	usiness as	71	-0392023
	Initial   return	Numbe	r and street (or P.O. box if mail is not delivered to street address)  Room/sui	ite E Telephone nur	mber
	Final return/	P.O.	Box 1139	47	9-394-3650
	termin- ated	City or t	town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	167,518.
	Amende return	Merre	ı, AR 71953	H(a) Is this a grou	
	Applica- tion pending		and address of principal officer Allen Stewart	for subordina	ates? Yes X No
	pending	same	as C above	H(b) Are all subordina	
		mpt status	<del></del>	<del>_</del>	ch a list (see instructions)
			arfb.com/polk	H(c) Group exem	
				ar of formation: 195	9 M State of legal domicile; AR
PE		Summary		imal Dromot	100
Activities & Governance	_		be the organization's mission or most significant activities. Agriculti		
/err		Check this bo	, ,	ore than 25% of its no	1 1
ģ			oting members of the governing body (Part VI, line 1a)		4 -
<b>∞</b> 5			dependent voting members of the governing body (Part VI, line 1b)		5 3
ties			of individuals employed in calendar year 2015 (Part V, line 2a)		6 27
ξį	1		of volunteers (estimate if necessary) ed business revenue from Part VIII, column (C), line 12		7a 112,263.
ĕ			business taxable income from Form 990-T, line 34		7b 0.
	1	tot armelatec	rodolitess taxable indone north officers	Prior Year	Current Year
•	8 0	Contributions	and grants (Part VIII, line 1h)		0. 0.
Revenue			rice revenue (Part VIII, line 2g)	47,80	9. 47,382.
eve		_	ncome (Part VIII, column (A), lines 3, 4, and 7d)		5. 25.
Œ	1		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	118,82	
	1		e · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	166,65	
	13 0	arants and s	ımılar amounts paid (Part IX, column (A), Iınes 1-3)		0. 0.
	14 B	Benefits paid	60-04	0. 0.	
es	15 S	Salaries, othe	er compensation, employee benefits (Part IX, column (A), lines 5-10)	68,94	
Expenses	16a F		fundraising fees (Part IX, column (A), line 11e)		0. 0.
홄	b⊺		sing expenses (Part IX, column (D), line 25)	74 35	2 71 752
-	] 17 C		ses (Part IX, column (A), lines 11a 11d, 11f24e)	74,35 143,29	
			es. Add lines 13-17 (must equal Part X Column A) in 25)	23,35	
os Ses		revenue less	expenses Subtract line 18 from line 12	Beginning of Current Y	
ance	20 T	otal accets		603,03	
Ass	20 T		(Part X, line 16)	85,32	
Net Assets Fund Baland	22 N	lat secate or	fund balances Subtract line 21 Color En UT	517,71	
		Signatur	e Block	<u> </u>	
			I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best	of my knowledge and belief, it is
true,	, correct,	, and complete	Declaration of preparer (other than officer) is based on all information of which prepare	rer has any knowledge.	
		N C/ X	le & Shugat	7/27	0/17
Sig	n	Signatu	e of officer	Date	1 - 7
Here ALLEN E. STEWAR PRESIDENT					
		,	print name and title	Date   Chec	k      PTIN
Dala		Print/Type pre	·	1000	D00174010
Paid	-	Firm's name	Thomas & Thomas LLP	Firm's EIN	
-	_		s 201 E. Markham, Suite 500	FILLS EIN	- 11 081114T
-J-3-C	J	1 1111 5 400165	Little Rock, AR 72201	Phone no	501-375-2025
May	v the IP	S discuse th	is return with the preparer shown above? (see instructions)	11 110110 110.	X Yes No
	01 12-16		For Paperwork Reduction Act Notice, see the separate instructions.	<u></u>	Form <b>990</b> (2015)



	n 990 (2015) Polk County Farm Bureau	71-0392023	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		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	L Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, a	ınd
	revenue, if any, for each program service reported.		
4a	(Code ) (Expenses \$ including grants of \$ ) (Revenue)	Je \$	)
	County Farm Bureau work is general in nature, helping fa	arm ramilies	
	achieve educational improvements, economic opportunity, advancement.	and social	
	advancement.		
		<del></del>	
		<del></del>	
4b	(Code) (Expenses \$	ле \$	)
		<del> </del>	
		<del></del>	
			<del></del>
4c	(C-1		<del></del>
40	(Code) (Expenses \$	16 \$	······'
			<del></del>
		<del></del>	
			<del></del>
4~	Other program convece (Decembe in Schedule O.)	<del></del>	
4d	Other program services (Describe in Schedule O)	,	
40	(Expenses \$ including grants of \$ ) (Revenue \$		<del></del>

Form 990 (2015) Polk County Farm Bureau
Part IV Checklist of Required Schedules

foreign organization? If "Yes," complete Schedule F, Parts II and IV  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  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  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 X				Yes	No
2 Is the organization equived to complete Schedule <i>B. Schedule of Continuation</i> 2 Did the organization engage in direct or indirect political campagn activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part II</i> 3 Section 501(kg)) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year <i>If It "Res," complete Schedule C, Part II</i> 5 Is the organization assection 501(kg)(d, 501(kg)(5), or 501(kg)(6) organization that receives membership dues, assessments, or similar amounts as defined in Perevue Procedure 98-197 <i>If "Yes," complete Schedule C, Part II</i> 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts <i>If "Yes," complete Schedule D, Part II</i> 7 Did the organization maintain an obecitions of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part II</i> 8 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? <i>If "Yes," complete Schedule D, Part III</i> 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, ine 1 Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts in complete Schedule or part X, line 1 Part	1				
3 Define organization in engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offere in "Ves." complete Schedule C, Part if  4 Section 50 (kg) organizations. Did the organization engage in lobbying activities, or have a section 50 (kg) organization. Did the organization as extending the tax year if "Yes." complete Schedule C, Part if  5 Is the organization a section 50 (kg), 50 (k	_	·			
public office? If "Yes," complete Schedule C, Part I  Section 501(6)(3) organizations. Dot the organization engage in lobbying activities, or have a section 501(f)) election in effect during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(3), 501(c)(5), or501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 99-197 If "Yes," complete Schedule C, Part III  Did the organization amaintain any denor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part III  Did the organization maintain any denor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts must funds or accounts? If "Yes," complete Schedule D, Part III  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 organization, hold assets in temporary restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part III  Did the organization report an amount for investments - other securities in Part X, line 107 If "Yes," complete Schedule D, Part XII  Did the organization report an amount for investments - other securities in Part X, line 107 If "Yes," complete Schedule D, Part XII  Did the organization report an amount for investments - organized in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part XII  Did the organization report an amount for investments - organized reports an amount for investments in program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part XII  Did the organization separate, independent audited fin			2_		<u> </u>
during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section Schi(e), 150 (160), or 601(e)) organization that receives membership dues, assessments, or similar amounts as defined in Review Procedure 98-19? If "Yes," complete Schedule C, Part III  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 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 II  Did the organization maintain accelections of works of art, instorical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  by 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  did the organization directly or through a related organization, hold assets in temporary restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI  If the organization report an amount for investments of the securities in Part X, line 10? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments of the securities in Part X, line 10? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments of the securities of the tax year include a footnote that addresses the organization's isballet for an amount for other sasests in Part X, line 15? If "Yes," complete Schedule D, Part XII  Did the organization report an amount for investments of the tax year include a footnote that addresses the organization's isballet part of the substitution is part and the organization aspearate in consolidated, independent audited financial statements for th		public office? If "Yes," complete Schedule C, Part I	3_		х
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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 III  8 Did the organization manutan collections of works of art, historical treasures, or other similar assests? If "Yes," complete Schedule D, Part III  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  10 Did the organization or sanswer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, X, or X as applicable  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII  11 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 167 If "Yes," complete Schedule D, Part VIII  11 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 167 If "Yes," complete Schedule D, Part VIII  11 Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part XIII  12 Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part XIII  13 Did the organization oreport an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part XIII  14 X  15 Did the organization is separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part XIII  14 X  15 Did the organization oreport an expansion in part X, line 120, then completing Schedule E, Parts X and XIII	6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
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B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 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 VI If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VIII, VIII, IX, or X as applicable  a Did the organization report an amount for lined, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI If Did the organization report an amount for other assets 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 VII If Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X If Did the organization export 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 X If Did the organization or amount for other liabilities 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 X If Did the organization or blain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X If Did the organization or subman separate, independent audited financial statements for the tax year? If "Yes," complete Schedule	′		7		х
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10 Did the organization, directly or through a related organization, hold assets in temporarly restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI  If the organization sanswer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII  b Did the organization report an amount for investments - other securities in Part X, line 12? If "Yes," complete Schedule D, Part VII  c Did the organization report an amount for investments - other securities 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  d Did the organization report an amount for other assets 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  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 X III  b Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X III  c Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III  b Was the organization obtain separate, 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 is the organization as chool described in section 170([b)(1)(A)(ii)? If "Yes," complete Schedule E III III III IIII IIII IIIIIIIIIIIII		amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	a		x
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Form 990 (2015) Polk County Farm Bureau
Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			х
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22		<u>~</u>
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	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 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	_20		
۲.	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	1		
	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,			
	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	ا ـ ـ ا		v
~ -	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I	,	Ì	Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes, " complete	31		
-	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<del></del>
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part 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		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	_		v
00	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?  Note. All Form 990 filers are required to complete Schedule O	38	х	
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			(	_0.0)

Form 990 (2015) Polk County Farm Bureau

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

	Check in Contaction Contains a response of 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	,	,	ŀ
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	by the second se	l		,
ο-	(gambling) winnings to prize winners?	1c	Х	× .
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		ر ، ا	
	filed for the calendar year ending with or within the year covered by this return  2a 3		•	* >
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	* *
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	ă`	X	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		ļ-
40	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			x
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country	4a		
U	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	١		¥.70.
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	₹ \d		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b	<del> </del>	X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<del></del>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
	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	-		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			* § .,
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		*
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	,	, ,	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	i		33.00
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	) K	, , , , ,	1
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12  Cross recently maked as 5 are 200 Part VIII has 10 forms the way of the facilities.	,	. \$ \$	\$ 64
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  [10b]	, ; ; ; ; ; ; ;	11.	Llik
11	Section 501(c)(12) organizations. Enter		144	
	Gross income from members or shareholders  11a	ž.		• •
D	Gross income from other sources (Do not net amounts due or paid to other sources against	`		
10-	amounts due or received from them)  [11b]  Section 4047(aV4) non-assemble desirable truste in the assemble file 5 and 600 at least 5 and 604 at le		** á	£
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		3 12
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(c)(29) qualified nonprofit health insurance issuers.			' '
	Is the organization licensed to issue qualified health plans in more than one state?	13a		<b></b>
a	Note. See the instructions for additional information the organization must report on Schedule O.	138	- 3	
h	Enter the amount of reserves the organization is required to maintain by the states in which the		1	
	organization is licensed to issue qualified health plans		د کید	, ,
c	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		
	,	_	990	(2015)
				· ·-/

532005 12-16-15

Form 990 (2015)

Polk County Farm Bureau
71-0392023 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			
<u>Sec</u>	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	15	*				
	If there are material differences in voting rights among members of the governing body, or if the governing			<b>#</b>	1			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.							
b								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			<b>*</b>	1 3			
	officer, director, trustee, or key employee?							
3								
	of officers, directors, or trustees, or key employees to a management company or other person?		з		x			
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?	4	1	х			
5	Did the organization become aware during the year of a significant diversion of the organization's ass		5		Х			
6	Did the organization have members or stockholders?		6	X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point one or						
	more members of the governing body?	•	7a	X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, si	tockholders, or						
	persons other than the governing body?		76	X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea	r by the following:	45	» ^ 	78.5%			
а	The governing body?		8a		V			
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 read	ched at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		x			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code )		<u> </u>	•			
		•		Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?		10:	_	Х			
ь	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters, affiliates,						
	and branches to ensure their operations are consistent with the organization's exempt purposes?		101	,				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before filing the forr	n? <b>11</b> a	X				
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•		Â	314			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12	X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflicts?	121	X				
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes							
	ın Schedule O how this was done		120	X				
13	Did the organization have a written whistleblower policy?		13		Х			
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 approva	l by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		,4	6 %				
а	The organization's CEO, Executive Director, or top management official		158		X			
b	Other officers or key employees of the organization		15t		X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		Ž.		483			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nent with a	3	1 131				
	taxable entity during the year?		16a	<u> </u>	X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its participation	À (1	, , , ,	5 5			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization's						
	exempt status with respect to such arrangements?		16t	)				
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filled ► None							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Section 501(c)(3)s o	nly) availa	ble				
	for public inspection. Indicate how you made these available. Check all that apply							
	Own website Another's website X Upon request Other (explain i	,						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con	iflict of interest policy	, and fina	ncial				
	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 - 479-394-3650							
	P.O. Box 1139, Mena, AR 71953							

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

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

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

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

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

List persons in the following order individual trustees or directors; institutional trustees; officers; key employees, highest compensated employees, and former such persons.

(A)	(B)	l		((	C)		1041	(D)	(E)	(F)
Name and Title	Average hours per	box	not c , unle	ss pe	more	than is bot or/trus	h an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Allen Stewart	0.50	]		١	Ì	1		,		)
President		Х	<u> </u>	Х		<u> </u>	<u> </u>	0.	0.	0.
(2) Ronney Fields	0.50	x		٠,				٥.	0.	0.
Vice President	0.50	Α.		Х	<u> </u>	-		0.	0.	<u> </u>
(3) Terry Keener	0.50	Į.,		Ţ	ŀ	l	ĺ	0.	0.	0.
Secretary/Treasurer	0.50	X	_	Х	_		_	<u> </u>		U •
(4) Stephen Barney Member	0.50	x						٥.	0.	0.
(5) Farrell Cole	0.50	^	<del> </del>	┝	├-	-	$\vdash$	· ·	<u></u>	- 0.
Member	0.30	x		1	1			0.	0.	0.
(6) Don Craig	0.50	-	-		┢	-	-		ļ <del></del>	
Member	0.30	x	l					٥.	0.	0.
(7) Bill Hoek	0.50		_	H	-	-	$\vdash$			
Member		x	i					o.	0.	0.
(8) Greg Hunter	0.50				-					
Member	,	Х			İ		l	0.	0.	0.
(9) Dennis Philpot	0.50					_				
Member		Х		<u> </u>			Ì	0.	0.	0.
(10) Terry Terrell	0.50									
Member		X						0.	0.	0.
(11) Mitchell Tidwell	0.50					-				
Member		Х						0.	0.	0.
(12) James Watkins	0.50									
Member		Х						0.	0.	0.
(13) Duane Webb	0.50									
Member		Х						0.	0.	0.
(14) Rodney Bowen	0.50								_	_
Member		Х					L	0.	0.	0.
(15) David Head	0.50									
Member		Х			<u> </u>	<u> </u>		0.	0.	0.
									1	
		-								
								<u> </u>		L

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

<u> </u>		Check if Schedule O contains a res	ponse or note to any lu	ne in this Part VIII			
			· · · · · · · · · · · · · · · · · · ·	(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	b d e f	Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above	1a 1b 1c 1d 1e				
Con	_	Noncash contributions included in lines 1a-1f \$  Total. Add lines 1a-1f					
Program Service Revenue		Membership Dues	Business Code 110000	47,382.	47,382.		
n Sei enue	c	<del></del>					
gran Rev	d						
Pro	e	All other program service revenue					
	g	Total. Add lines 2a-2f		47,382.	•		·
	3	Investment income (including dividends other similar amounts)	<b>&gt;</b>	25.			25.
	4	Income from investment of tax-exempt	bond proceeds	2,387.	<u> </u>		2,387.
	5	Royalties (i) Ro	eal (ii) Personal	2,307.			2,30/.
	b	Gross rents 4, 2	0 · 200 ·				
		Net rental income or (loss)		4,200.			4,200.
		Gross amount from sales of assets other than inventory Less. cost or other basis and sales expenses	irities (ii) Other		, , , ,		
		Gain or (loss)		`	* * *	, , , , , , , , , , , , , , , , , , ,	~
Revenue		Gross income from fundraising events (including \$	not	· & *?	,		* *,,
Other Rev	b	contributions reported on line 1c) See Part IV, line 18 Less direct expenses	a	, ,			
٥	С	Net income or (loss) from fundraising ev	vents	^	*		* **
	9 a	Gross income from gaming activities. S	ee			· ·	
		Part IV, line 19 Less direct expenses Net income or (loss) from gaming activit	a b				
		Gross sales of inventory, less returns and allowances Less' cost of goods sold	a b				
}	С	Net income or (loss) from sales of inven Miscellaneous Revenue	Business Code	* >*			a &*. >
	11 a	Insurance Service Fe		112,263.		112,263.	1,261.
	С						
	d			113,524.	, , , , , , ,	, ,	
	12	Total. Add lines 11a-11d  Total revenue. See instructions		167,518.	47,382.	112,263.	7,873.

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 (B)
Program service
expenses (D) Fundraising expenses Do not include amounts reported on lines 6b. (A) Total expenses Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 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 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) 65,047. 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 5,284. 10 Payroll taxes Fees for services (non-employees): a Management **b** Legal 600. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 X \* f Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O) 6,024. Advertising and promotion 12 11,661. 13 Office expenses 14 Information technology 15 Royalties 17,682. 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 12,275. 19 Conferences, conventions, and meetings 1,996. 20 Interest 21 Payments to affiliates 14,542. 22 Depreciation, depletion, and amortization 392. 23 Insurance 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 4,967. Miscellaneous 1,314. C d e All other expenses Total functional expenses. Add lines 1 through 24e 141,784. 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)

Га	ITL X	Dalance Sneet					
		Check if Schedule O contains a response or no	te to any line in this P	art X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	· · · · · · · · · · · · · · · · · · ·			1	
	2	Savings and temporary cash investments			134,213.	2	160,933.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net	ole, net				0.
	5	Loans and other receivables from current and for	ormer officers, directo	ors,	2.3	1	Charles Burg
		trustees, key employees, and highest compens				4.	
		Part II of Schedule L		•	` ' *	5	
	6	Loans and other receivables from other disqual	fied persons (as defir	ned under	^	Ť	* 2
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sec				ŀ	
ts		employees' beneficiary organizations (see instr)			** <u>*</u>	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	1 1			<b>├</b>	¥ % .
		basis Complete Part VI of Schedule D	10a 578	8,019.		ž	
	Ь	Less accumulated depreciation	10b 124	4,173.	468,388.	10c	453,846.
	11	Investments - publicly traded securities		_,	100,000	11	233,0201
	12	Investments - other securities See Part IV, line	11			12	
	13	Investments · program-related See Part IV, line				13	
	14	Intangible assets	•			14	<del></del>
	15	Other assets See Part IV, line 11		20.	15	20.	
	16	Total assets. Add lines 1 through 15 (must equ	603,036.	16	614,799.		
	17	Accounts payable and accrued expenses		1,558.	17	1,354.	
	18	Grants payable			18		
	19	Deferred revenue		Ì	16,302.	19	15,540.
	20	Tax-exempt bond liabilities		ľ		20	
	21	Escrow or custodial account liability Complete I	Part IV of Schedule D			21	
S	22	Loans and other payables to current and former			î., , , , , , , , , , , , , , , , , , ,	<del></del>	
Liabilities	i	key employees, highest compensated employee		· ·		İ	
gp		Complete Part II of Schedule L			`	22	, y y w
_	23	Secured mortgages and notes payable to unrela	ited third parties	ľ	67,462.	23	54,457.
	24	Unsecured notes and loans payable to unrelated	-	j		24	
	25	Other liabilities (including federal income tax, pa	yables to related third	ı			
		parties, and other liabilities not included on lines					
	ŀ	Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			85,322.	26	71,351.
		Organizations that follow SFAS 117 (ASC 958	), check here 🕨 🗀	and			
es		complete lines 27 through 29, and lines 33 an	d 34.		* * * * * * * * * * * * * * * * * * * *		
anc a	27	Unrestricted net assets			* *	27	•
3al:	28	Temporanly restricted net assets		[		28	
뒫	29	Permanently restricted net assets				29	
F		Organizations that do not follow SFAS 117 (AS	SC 958), check here	$\triangleright X$	, , , , , ,	ş, İ	ş · ' 🦠
ō		and complete lines 30 through 34.		ł	) (4)	· · · ·	i i i i i i i i i i i i i i i i i i i
ets		Capital stock or trust principal, or current funds			0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or eq	uipment fund		0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated ind	come, or other funds	[	517,714.	32	543,448.
Z		Total net assets or fund balances			517,714.	33	543,448.
	34	Total liabilities and net assets/fund balances		ſ	603,036.	34	614,799.

	1990 (2015) Polk County Farm Bureau	_71-0	392023	Pag	ge <b>12</b>
Pa	rt XI 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	16	7 5	18.
2	Total expenses (must equal Part IX, column (A), line 25)	2			$\frac{18.}{84.}$
3	Revenue less expenses Subtract line 2 from line 1	3			$\frac{34.}{34.}$
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			$\frac{34.}{14.}$
5	Net unrealized gains (losses) on investments	5	<u> </u>	','	<del></del>
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.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	<del></del>			
	column (B))	10	543	3.4	48.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		* * *	3 1	Ŕ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	-   ` {		8
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 reviewed	d on a		;	48
	separate basis, consolidated basis, or both		1 1		i
	Separate basis Consolidated basis Both consolidated and separate basis		[, ]		i
b	Were the organization's financial statements audited by an independent accountant?		″ 2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		,	
	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	e audıt,			
	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				;
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 Audit	> *		E.
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	990 (	2015)

## 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.lrs.gov/form990.

OMB No 1545-0047

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

• :	<u>Section 501(c)(4), (5), or (6) organiza</u>	tions. Complete Part III.			
Nam	ie of organization			Emp	loyer identification number
	Polk Co	unty Farm Burea	u		71-0392023
Pa	rt I-A Complete if the org	ganization is exempt un	ider section 501(c)	or is a section 527	organization.
2	Provide a description of the organia Political expenditures Volunteer hours	zation's direct and indirect polit	tical campaign activities	ın Part IV ▶	\$
Pa	rt I-B Complete if the ord	ganization is exempt un	der section 501(c)	(3)	<del>-</del>
	Enter the amount of any excise tax			<u> </u>	
	Enter the amount of any excise tax				
	If the organization incurred a section				Yes No
4a	Was a correction made?		•		Yes No
	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the org	ganization is exempt un	der section 501(c)	, except section 501	(c)(3).
	Enter the amount directly expended				<u> </u>
2	Enter the amount of the filing organ	nization's funds contributed to d	other organizations for s	ection 527	
	exempt function activities			▶ :	\$ <u></u>
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-POL		
	line 17b			▶ :	·
	Did the filing organization file Form	•			└ Yes
э 	Enter the names, addresses and er made payments. For each organiza contributions received that were prolitical action committee (PAC). If	ition listed, enter the amount pa omptly and directly delivered to	aid from the filing organi o a separate political org	zation's funds. Also enter t janization, such as a separ	he 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					71-0	392023 Page 2
Part II-A Complete if the org	janizatio	n is exe	mpt under sectio	n 501(c)(3) and fi	led Form 5768 (e	lection under
section 501(h)).						<del></del>
			filiated group (and list in	Part IV each affiliated	d group member's nam	e, address, ElN,
expenses, and sha			•			
		ed box A a bying Expe	nd "limited control" pro	visions apply	(a) Filing	(b) Affiliated group
			unts paid or incurred.		organization's totals	totals
1a Total lobbying expenditures to infli	uence pub	lic opinion	(grass roots lobbying)			
b Total lobbying expenditures to infli	uence a leç	gislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add i	ines 1a and	d 1b)				
d Other exempt purpose expenditure	es					
<ul> <li>Total exempt purpose expenditure</li> </ul>	s (add line	s 1c and 1	d)			
f Lobbying nontaxable amount Enter		unt from th	e following table in bot	h columns		
If the amount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable am	ount is:	3, 7	· *
Not over \$500,000		20% of	the amount on line 1e.		* , ;	,
Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.	l `	
Over \$1,000,000 but not over \$1,5	500,000	\$175,0	00 plus 10% of the exc	ess over \$1,000,000.	4	
Over \$1,500,000 but not over \$17.	,000,000	\$225,00	00 plus 5% of the exce	ss over \$1,500,000.		, ,
Over \$17,000,000		\$1,000	,000	· · · · · · · · · · · · · · · · · · ·	* * * * *	
					3 7 7	\$ 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
g Grassroots nontaxable amount (er	nter 25% o	f line 1f)				
h Subtract line 1g from line 1a If zer	o or less, e	nter -0-				
i Subtract line 1f from line 1c. If zero	or less, e	nter -0-				
j If there is an amount other than ze	ro on eithe	r line 1h or	line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this			- , <del>-</del> - <del>-</del>			Yes No
		4-Year Av	eraging Period Under	section 501(h)	<del></del>	
(Some organizations the			501(h) election do not rate instructions for lir	•	of the five columns b	elow.
	Lobb	ying Expe	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount			* ;	1 2 1 1 1 1	,	
(150% of line 2a, column(e))		y 4	`.	* ***	`	
			1			
c Total lobbying expenditures						
, , , , , , , , , , , , , , , , , , , ,						·
d Grassroots nontaxable amount						
e Grassroots ceiling amount	5 %		74.5.75	*		
(150% of line 2d, column (e))	, , 3 *			.39	4	
						<del></del>
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2015 Polk County Farm Bureau 71-0392023 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)).

Fore	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(I	o)
of th	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		*	, , , ,	* * . * . * .
а	Volunteers?			*	
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?			3	
	Mailings to members, legislators, or the public?	<del></del>			<del></del>
			-		
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?	<del> </del>			<del></del>
9	, , , , , , , , , , , , , , , , , , , ,	<del>                                     </del>			
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?				<del></del>
:					
J	Total Add lines 1c through 1:	<del>  </del>		< <sub>2</sub> ,	
	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		A R		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		25 × 8		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	- F01/5\/	E\		24
Pai		on sur(c)(	o), or se	Ction	
	501(c)(6).			Vaa	N <sub>2</sub>
	NA THE RESIDENCE OF THE PROPERTY OF THE PROPER			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
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	<b>504</b> (3)	3		Х
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		(b) Par		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 (do not include amounts of political expenditures).	cal	,		
_	expenses for which the section 527(f) tax was paid).		-		
a	Current year		2a		
Þ	Carryover from last year		2b		
C			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 exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	political			
_	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
	t IV Supplemental Information				
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated group actions), and Part II-B, line 1 Also, complete this part for any additional information.	o list), Part II-	A, lines 1 a	ind 2 (see	
	series, and rain by most semplete and parties any additional information.				
					· ·

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Polk County Farm Bureau

Employer identification number 71-0392023

Pa	rt I Organizations Maintaining Donor Advise		or Accou	nts.Complete if the
<u> </u>	organization answered "Yes" on Form 990, Part IV, line			
		(a) Donor advised funds	(b) Fund	s and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)		<del></del>	
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 v	vriting that the assets held in donor advis	ed funds	
-	are the organization's property, subject to the organization's			Yes . No
6	Did the organization inform all grantees, donors, and donor ad	•	used only	
	for charitable purposes and not for the benefit of the donor or	<del>-</del>		
	impermissible private benefit?	to the devices, or to daily earles parpoor	oo	Yes No
Pa		anization answered "Yes" on Form 990. I	Part IV. line 7	
1	Purpose(s) of conservation easements held by the organization			<del></del>
	Preservation of land for public use (e.g., recreation or ed		orically import	ant land area
	Protection of natural habitat	Preservation of a cert		
	Preservation of open space	, , , , , , , , , , , , , , , , ,		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of a conserva	tion easement on the last
	day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation 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 a	` '		
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the		dunng the tax
	year >	, , ,	Ü	J
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the peri			
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, l		servation ease	ments during the year
	<b>•</b>	-		•
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easement	s dunng the year
	<b>&gt;</b> \$	-		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, ar	nd balance sheet, and
	include, if applicable, the text of the footnote to the organization	ion's financial statements that describes	the organizatı	on's accounting for
	conservation easements			
Pa	t III Organizations Maintaining Collections of	·	ther Simila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue staten	nent and balar	nce sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furthera	nce of public	service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	oes these items		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance	sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pul	blic service, pr	ovide 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 trea	asures, or other similar assets for financia	l gaın, provide	
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items		
а	Revenue included on Form 990, Part VIII, line 1		▶ \$	
	Assets included in Form 000. Bort V		<b>~</b> •	

		unty Farm								Page 2
Par	t III   Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, o	or Other	Simila	ar Asse	<b>ts</b> (continu	ied)
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	ıt are a sig	nificant i	use of its	collection	rtems
	(check all that apply)									
а	Public exhibition	c	, 🖳	Loan or exc	hange progra	ams				
b	Scholarly research	e	,	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın how th	ney further t	he organızatı	on's exem	pt purpo	ose in Par	t XIII	
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	sures, or oth	er sımılar a	assets		_	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if the	organizatio	n answered	"Yes" on F	om 990	), Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	sets not II	ncluded		_	
	on Form 990, Part X?								Yes	L No
ь	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table.						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
<b>2</b> a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or c	ustodial acco	ount liabilit	y?		<b>Yes</b>	L⊒ No
<u>b</u>	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanation	on has been	provided on	Part XIII				<u> </u>
Pai	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" on Fo	om 990, Par					
		(a) Current year	(b) F	rior year	(c) Two yea	rs back (	<b>i)</b> Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions		<u> </u>	~						
С	Net investment earnings, gains, and losses									
d	Grants or scholarships								ļ	
е	Other expenditures for facilities				J				]	
	and programs									
f	Administrative expenses	······································								
g	End of year balance				l. <u>_</u> _					
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as <sup>.</sup>					
а	Board designated or quasi-endowment	<del> </del>	_%							
b	Permanent endowment	%								
С	Temporanly 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 organiz	ation th	at are held a	and administe	ered for th	e organi	zation	_	
	by.									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(iı)	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	ired on S	Schedule R?	)				3b	
4	Describe in Part XIII the intended uses of the		owment	funds						
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 99	0, Part I	/, line 11a S	See Form 99	), Part X, I	ne 10			
	Description of property	(a) Cost or o			or other		cumulate		(d) Book	value
	·	basis (investi	ment)		(other)		eciation			252
1a	Land				8,350.		<u> </u>			3,350.
b	Buildings			4.5	4,330.		70,0	51.	384	279.
С	Leasehold improvements				<u> </u>					<del></del>
d	Equipment			5	5,339.		54,1	22.	1	,217.
	Other			L		L			4 - 4	
Taka	I Add Imag to through to (Column (d) must s	acual Form 990 Part	Y colu	nn (B) line '	100)				45	846.

	Farm Bureau		1-0392023 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"		11b See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)	·		
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.		ş « <u>,</u>	44 x5 \$31.99
Complete if the organization answered "Yes" (a) Description of investment	on Form 990, Part IV, line (b) Book value		nd of voor morket volve
	(b) Book value	(c) Method of valuation. Cost or e	no-or-year market value
(1) (2)			
(3)			
(4)	<del></del>		
(5)	<del></del> .		
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	waru.	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	K
Part IX Other Assets.			· · · · · · · · · · · · · · · · · · ·
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	<u></u>		<u> </u>
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)	<b>&gt;</b>	<u> </u>
Part X Other Liabilities.			
Complete if the organization answered "Yes" (		11e or 11f See Form 990, Part X, line 2	25
	•	(b) Book value	
(1) Federal income taxes			**
(2)			
(4)			
(5)			
(6)			
(7)			, <b>`%</b> `
(8)	<del></del>	<del></del>	<b>7%</b>
(9)		<del></del>	
Total (Column (h) must equal Form 990, Part X, col. (R) line	25)		TANK SANDAN

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Schedule D (Form 990) 2015 POIR County Farm Bur		
Part XI Reconciliation of Revenue per Audited Financia		ue per Return.
Complete if the organization answered "Yes" on Form 990, Par		
1 Total revenue, gains, and other support per audited financial statement	nts	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<ul> <li>a Net unrealized gains (losses) on investments</li> </ul>	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	<u> </u>
b Other (Describe in Part XIII )	4b	
c Add lines 4a and 4b	<u> </u>	4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, li	ine 12.)	5
Part XII Reconciliation of Expenses per Audited Financi		
Complete if the organization answered "Yes" on Form 990, Par		iooo poi riotarii
Total expenses and losses per audited financial statements	try mio tzu	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		<del> </del>
a Donated services and use of facilities	ا مو ا	
	2a	
•	2b	
c Other losses	2c	<u></u> #
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:	1 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 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 pro	vide any additional information	
		<del></del>

Schedule D (Form 990) 2015

## **SCHEDULE 0**

Internal Revenue Service

(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.

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

▶ Attach to Form 990 or 990-EZ.

Information about Schedule 0 (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2015
Open to Public

Open to Publi 90. Inspection

Name of the organization **Employer identification number** Polk County Farm Bureau 71-0392023 Form 990, Part VI, Section A, line 6: The Organization is a mutual benefit organization. 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: The 990 is reviewed and signed by the Board President. Form 990, Part VI, Section B, Line 12c: The policy is reviewed when bids are taken on a new job or contributions are made to any entity. Form 990, Part VI, Section B, Line 15: The Organization does not have compensated officers or management officials. Form 990, Part VI, Section C, Line 19: These documents are not available to the public.