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Bepartment of the Treasury Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

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

2015

OMB No 1545 1150

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

► Information about Form 990-EZ and its instructions is at www irs gov/form990

Open to Public Inspection

Ā	For the 2015 ca	lendar year, or tax year beginning Nov 1	, 2015 , and ending Oct 31	, 201	6		
	Check if applicable	C Name of organization		Employer (dentific			
	Address change Name change	WALKER COUNTY FARM BUREAU		74-6066625			
3	Initial return	Number and street (or P.O. box. if mail is not delivered to street address)	Room/suite E	Telephone number			
- 1	Final return/lerminated	P O BOX 1706		(936) 291	2136		
	Amended return	City or town state or province country and ZIP or foreign postal code	F	Group Exempti	on		
	Application pending	HUNTSVILLE	TX 77342	Number	<u> </u>		
G	Accounting Met			X if the organ			
1		Website N/A required					
	Tax exempt status	(check only one) — 501(c)(3)		990-EZ or 99			
K	Form of organiz		Other	- 			
L 	Add lines 5b 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ.						
<u>'P</u>	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I						
-	1 Contributi	ons gifts, grants and similar amounts received		1	615		
_	2 Program :	ervice revenue including government fees and contracts		2			
2017	3 Members	up dues and assessments		3	49,337		
3 2	4 Investmen	t income		4	36_		
0		ount from sale of assets other than inventory	5a 4,000	_ ¹.			
	b Less cos	or other basis and sales expenses	5b 6,770	_ <u></u>			
APR		i) from sale of assets other than inventory (Subtract line 5b from line 5a)		5 c	-2,770_		
R R	1	nd fundraising events ome from gaming (attach Schedule G if greater than \$15 000)	6 a				
NNED			of contributions				
5 k	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum						
Ϋ́		oss income and contributions exceeds \$15,000)	6b	_			
SCANNED	c Less dire	ct expenses from gaming and fundraising events	6 c	과 레			
		e or (loss) from gaming and fundraising events (add lines 6a a otract line 6c)	nd	6 d			
	7 a Gross sale	es of inventory, less returns and allowances	7 a				
	b Less cos	of goods sold	7 b				
		fit or (loss) from sales of inventory (Subtract line 7b from line 7		7 c			
		nue (describe in Schedule O)	See Form 990 52, Part I, Line 8 Other Reven		58,191		
	+		EIVED	9	105,409		
		d similar amounts paid (list in Schedule O)	4 6 2017 O	10	730		
F	1	aid to or for members other compensation and employee benefits MAR		12	20.000		
X	1	and food and other nauments to independent contract	<u>\</u>	13	39,209 7 <u>50</u>		
Ë		y, rent, utilities, and maintenance	DEN, UT	14	23,083		
S E		ublications, postage, and shipping		15	<u>23,083</u> 87		
S		enses (describe in Schedule O)	See Forth 990 EZ, Part I Line 16 Other Expe		38,346		
	17 Total exp	enses Add lines 10 through 16		1 7	102,205		
	18 Excess or	(deficit) for the year (Subtract line 17 from line 9)		18	3,204		
N S	19 Net assets or fund balances at beginning of year (from line 27 column (A)) (must agree with end-of-year						
A NS EE YT S	figure reported on prior year's return)				123,408		
	20 Other changes in net assets or fund balances (explain in Schedule O)			20 21			
_	21 Net assets or fund balances at end of year Combine lines 18 through 20				126,612 n 990-FZ (2015)		

BAA For Paperwork Reduction Act Notice, see the separate instructions





Form	990-EZ (2015) WALKER COUNTY E	'ARM BUREAU		74-	-606	6625 Page 2
	Balance Sheets (see the inst	ructions for Part II)	on in this Dort II			X
	Check if the organization used Sched	dule O to respond to any questi) Beginning of year		(B) End of year
22	Cash, savings, and investments			41,807.	22	52,146.
23	Land and buildings	nd and buildings				
24	Other assets (describe in Schedule O) .	1,661.	24	1,349.		
25	Total assets		279,689.	25	276,802.	
26	Total liabilities (describe in Schedule O)			<u>156,281.</u>	26	150,190.
27	Net assets or fund balances (line 27 of			123,408.	27	126,612.
Par	Statement of Program Service A Check if the organization used Sch			[X]		Expenses
What	s the organization's primary exempt purpose?					ured for section 501 and 501(c)(4)
Desc	ribe the organization's program service ac	complishments for each of its th	nree largest program serv		òrgan	iizations; optional
meas	ribe the organization's program service ac- ured by expenses. In a clear and concise fited, and other relevant information for eac	manner, describe the services	provided, the number of p	persons	for ot	hers)
28	SEE SCHEDULE O					
	25E 200000E 0					
	(Grants \$) If the	is amount includes foreign grai	nts, check here	· · · · · · · · · · · · · · · · · · ·	28 a	
29	SEE SCHEDULE O					
	(Grants \$) If the	is amount includes foreign grai	nts, check here	•	29 a	
30	SEE SCHEDULE O					
	70 7	is amount includes foreign grai			20-	
24	(Grants \$) If the Other program services (describe in Sche				30 a	
31		is amount includes foreign grai			31 a	
32	Total program service expenses (add li				32	
Par				1		a instructions for Part I\A
(i ai	Check if the organization used Sch					
	(a) Name and title	(b) Average hours per week devoted to	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employ	ee	(e) Estimated amount of
	(a) Name and due	position	(If not paid, enter -0-)	benefit plans, and defer compensation	red	other compensation
COL	T CHRISTIAN					
	SIDENT	8.00	0.		0.	0.
KAF	L COLLINS					
VIC	E PRESIDENT	5.00	0.		0.	0.
REE	D PREHODA	_[
	TREAS	0.00	0.		0.	0.
	INALD LEPLEY	-1,				•
	ECTOR	4.00	0.		0.	0.
	RY_GRAHAM	-	0.		٥.	0.
	ECTOR HARD BYRD	1.00	U.		· ·	<u> </u>
	HARD BYRD	5.00	0.		0.	
	IN_GREEN	3.00	†		~-	
	ECTOR	7.00	0.		ο.	. 0.
	OB SLOTT	7.00	<u> </u>			
	ECTOR	3.00	0.		0.	0.
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33 Dut the organization engage in any significant activity not previously reported to the IRSP. 34 Wee any significant changes make to the organization and activity not previously reported to the IRSP. 35 Dut the organization and the companies of the companie	Pa	rt V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			П		
33 X X X X X X X X X			• • •		<u>: </u>		
34 we say spriftant charges made to the organizing or governing documents? If Yes, status a continued to the amended documents of they reflect a change to the organizations and Otherwas, explain the change of Schedule (Dee instructions). 35 a Dut the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2 6s. and 7s. among others)? bif Yes, 10 line 35s. has the organization field a Form 990-T for the year? If No; provide an explanation in Schedule O. c Was the organization in Schodule on Schodule (Schodule) (33	Did the organization engage in any significant activity not previously reported to the IRS?		res	 		
a change of the organizations name. Otherwise, explain the change on Schedule O (see instructions) 35 Dut the organization have unreliated business gross income of \$1.00 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? 35 L X b If Yes, 10 time 53a, has the organization field a form 990-T for the year? If No.; provide an explanation in Schedule O 35 D X c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(c) notice, reporting, and proxy tax requirements during the year? If Yes, complete Schedule C, Port III 36 D Id the organization undergo a liquidation, dissolution, termination, or significant deportant on feat seaset during the year? If Yes, complete applicately parts of Schedule N 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 38 a D Id the organization become in 120-PCI for this year? 38 a D Id the organization borrow from, or make any lona to, any officer, director, fusition, or key employee or were any such losans masks an a part year and still outstanding at the end of the tax year covered by this return? 38 a D Id the organization borrow from, or make any lona to, any officer, director, fusition, or key employee or were any such losans masks any lona to, any officer, director, fusition, or key employee or were any such losans masks any lona to the year? 38 a D Id the organization because the properties of the	34						
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2.6s, and 7s, among others?) b if Yes, 10 line 35s, has the organization filed a Form 990-1 for the year? If No. provide an explanation in Schedule O 35b X c. Was the organization of 501(c)(4), 501(c)(6), er 501	J -						
(such as those reported on lines 2, 63, and 78, among others)? b If Yes, 1 one 58s, has the organization section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(c) notice, reporting, and proxy tax requirements during the year? If Yes, complete Schedule (C, Part III and proxy tax requirements during the year? If Yes, complete Schedule (C, Part III and proxy tax requirements during the year? If Yes, complete Schedule (C, Part III and proxy tax requirements during the year? If Yes, complete Schedule (C, Part III and proxy tax requirements during the year? If Yes, complete Schedule (C, Part III and proxy tax requirements during the year? If Yes, complete Schedule (C, Part III and proxy tax requirements deposition of net assets during the year? If Yes, complete Schedule (C, Part III and proxy tax requirements of the Yes, complete Schedule (C, Part III and enter the total and yes the proxy tax of the Yes, complete Schedule (C) organization before year and still cultationing at the end of the tax year covered by this return? 38 a	25						
b if Yes, 10 in a 35a, has the organization filed a Form 990-T for the year? If No.; provide an explanation in Schedule 0 . 35b X c. Was the organization as excision 501(c)(4), 601(c)(5), or 501(c)(6)(5) organization subject to section 503(e) ancitors, and the state of the provided of the state of the s	33		35.2	v			
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(5) organization subject to section 6033(e) notice, reporting, and proxy lax requirements during the year? If Yes, complete Spedide (P, Part III			<u> </u>		├		
36 Did the organization undergo a legulation, dissolution, termination, or significant disposition of net assets during the year // 11 Veys. complete applicable parts of Schedule N 37 a 0 0 0 0 0 0 0 0 0			350	<u>X</u> _			
36 Did the organization undergo a legulation, dissolution, termination, or significant disposition of net assets during the year // 11 Veys. complete applicable parts of Schedule N 37 a 0 0 0 0 0 0 0 0 0		reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	35 c		l x		
378 Enter amount of political expenditures, direct or indirect, as described in the instructions 378 0 0 375 X 388 Did the organization to from 1120-POL for this year? 388 Did the organization borrow from, or make any loans to, any officer, director, fusites, or key employee or were any such loans made in a pror year and still outstanding at the end of the tax year covered by this return? 38 Did the organization borrow from, or make any loans to, any officer, director, fusites, or key employee or were any such loans made in a pror year and still outstanding at the end of the tax year covered by this return? 38 Did the organizations. Enter amount of tax imposed on the organization during the year under section 4911 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					<u> </u>		
b Did the organization file Form 1120-POL for this year? 375		disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х		
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a pinor year and still outstanding at the end of the tax year covered by this return? 38 b 38 a	37	a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37 a 0 .					
38a Did the organization borrow from, or make any loans to, any officer, director, fustee, or key employee or were any such loans made in a pinor year and still outstanding at the end of the tax year covered by this return? 38 b If 'Yes', complete Schedule L, Part II and enter the total amount involved. 39 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9. 39 Section 501(c)(3) organizations included on the organization during the year under section 4911 * Section 4912 * Section 4912 * Section 4912 * Section 4912 * Section 501(c)(3) organizations. Did the organization during the year that has not been reported on any of its prior Forms 900 or 990-EZ2 if Yes', complete Schedules L, Part in Province or disqualified persons during the year under sections 4912, 4985, and 4955 * Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization amangers or disqualified persons during the year under sections 4912, 4985, and 4955 * Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 400 reimbursed by the organizations or disqualified persons during the year under sections 4912, 4985, and 4955 * Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 400 reimbursed by the organizations are native for sections 4912, 4985, and 4956 * Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 400 reimbursed by the organization and the section 4912, 4912 * Section 491		b Did the organization file Form 1120-POL for this year?	37 b		X		
b If Yes; complete Schedule L, Part II and enter the total amount trivolved 39 Section 501(c)(7) organizations. Enter: a Intiliation fees and capital contributions included on line 9	38						
amount involved 3 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9. b Gross receipts, included on line 9, for public use of club facilities. 40 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 section 4911 section 4911 section 4912 Section 4915 Section 4915 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year, or did tengage in an excess benefit transaction any of its prior forms 990 or 990-EZ? If If Yes, complete Schedule I., Part I. c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? If Yes, complete 5 Form 886-T List the states with which a cepy of this return is filled 42a The organizations are care of TEXAS FARM BUREAU Telephone no (254) 751-2337 Tocated at P O BOX 2689 b 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 accounts (FBAR) X if Yes, enter the name of the foreign country. See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) X if Yes, enter the name of the foreign country. 43 Section 4947(a)(1) nonexempt cha			38 a		Х		
39 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9					 		
a Initiation fees and capital contributions included on line 9. 6 pross receipts, included on line 9, for public use of club facilities. 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 * section 4912 * section 4915 * section 4915 * section 4915 * section 4916 * se	20		,				
b Gross receipts, included on time 9, for public use of club facilities		}- 					
40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 section 4911 section 4911 section 4911 section 4912 section 4912 section 4912 section 4915 beaction 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction on any of its prior Forms 990 or 990-EZ? If Yes, Complete Schedule L, Part I 40b c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 400 reimbursed by the organization and 501(c)(29) organizations. Enter amount of tax on line 400 reimbursed by the organization and 501(c)(29) organizations. Enter amount of tax on line 400 reimbursed by the organization and 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 400 reimbursed by the organization and 501(c)(29) organizations. Enter amount of tax imposed on organization and 501(c)(3), 501(c)(4), 401 (c)(4), 401 (c)(4)		· · · · · · · · · · · · · · · · · · ·					
section 4911 * section 4955 * Section 501(c)(4), 501(c)(4), and 501(c)(2)9) organizations. Did the organization enginge in any section 1958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If Yes, complete Schedule I, Part I . 40							
b Section 501(c/(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 3958 excess benefit transaction unity in the transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ7 (if Yes, complete Schedule L, Part I organization) and agers or disqualified persons during the year under sections 4912, 4955, and 4958. d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax amposed on organization and 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8866-T 42a The organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8866-T 42a The organizations are care of TEXAS FARM BUREAU Telephone no TEXAS FARM BUREAU TELEP	40	a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under					
benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 190 or 930-EZ7 If Yes, complete Schedule L. Part I							
reported on any of its prior Forms 990 or 990-E27 If "Yes,' complete Schedule L. Part I Section 501(c/3), 501(c)(d), and 501(c)(29) organizations. Enter amount of tax unmosed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(d), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8865-T List the states with which a copy of this return is filled 42a The organizations books are in care of TEXAS FARM BUREAU Telephone no (254) 751-2337 Located at P D BOX 2689, WACO TX ZIP+4 76702-2689 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country See the misfluctions for exceptions and filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the U.S.? If 'Yes,' enter the name of the foreign country. 43 Section 4947(a)(1) nonexempt chantable trusts filling Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes, Form 990 must be completed instead of Form 990-EZ c Did the organization perserve any payments for indoor tanning services during the year? 44b X 47b X 47c X 47c X 47c X 47d X 47	I	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess			الــ ــا		
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualfilled persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T List the states with which a copy of this return is filed 42 a The organizations books are in care of TEXAS FARM BUREAU Telephone no (254) 751-2337 Located at P O BOX 2689 N WACO TX ZIP+4 76702-2689 b 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)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the U.S.? 42 c			40 h				
d Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tayear, did the organization maintain any donor advised funds during the year? If Yes, Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year? If Yes, Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in lieu of Form 990 must be completed in Stead of Form 990-EZ in In In Organization receive any payments for indoor tanning services during the year? If Yes, Form 990 must be completed in Stead of Form 990-EZ in In In Organization filed a Form 720 to report these payments? If Yes in			400		 		
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e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 40 e		d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed					
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42a The arganization's books are in care of PackAs FARM BUREAU Telephone no PackAs FARM BUREAU	•	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax	40.0		X		
42a The organization's books are in care of TEXAS_FARM_BUREAU Telephone no Located at POBOX_2689, WACO TX_2P+4 76702-2689 b 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)?	41	·	406		<u> </u>		
books are in care of	7'	List the states with which a copy of this return is new					
books are in care of							
books are in care of	40	The economication is					
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the U.S.? If 'Yes,' enter the name of the foreign country. 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If 'Yes,' boline 44c, has the organization filed a Form 720 to report these payments? If 'Yes,' provide an explanation in Schedule O 445 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	42		751-	-233	7		
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	• •						
Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)			40 a		_ x _		
	ı	o upune organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45 h		j		

Form 990-6	EZ (2015) WALKER COUNTY FARM	BUREAU		74-606	66625	Ρ	age 4
46 Did ti	he organization engage, directly or indirectly	, in political campaign a				Yes	No
Part VI	idates for public office? If 'Yes,' complete So			 	46	<u> </u>	X
<u>LPart VI</u>	Section 501(c)(3) organizations All section 501(c)(3) organization for lines 50 and 51.		stions 47-49b and 5	2, and complete the	tables		
	Check if the organization used Schedule	O to respond to any que	estion in this Part VI	<i></i>			. П
						Yes	No
	he organization engage in lobbying activities plete Schedule C, Part II..........				47		
	e organization a school as described in secti					 -	
	he organization make any transfers to an ex						
	s,' was the related organization a section 52						
50 Comp	plete this table for the organization's five hig oyees) who each received more than \$100,	hest compensated empl	loyees (other than officer	s, directors, trustees and	key		
empi	oyees) who each received more than \$100,	l	In the organization in the		Γ		
-	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated other comp		
~							
	·						
					<u> </u>		
- Total	number of other employees need ever \$100	000	<u> </u>	<u> </u>	L		
	number of other employees paid over \$100 plete this table for the organization's five high		pendent contractors who	each received more that	n \$100.000 c	of	
comp	pensation from the organization If there is n	one, enter 'None.'					
_	(a) Name and business address of each independent con	tractor	(b) Type	of service	(c) Comp	ensation	n
							
			·				
- d Total	number of other independent contractors e	ach receiving over \$100			0		
52 Did t	he organization complete Schedule A? Note	: All section 501(c)(3) o	rganizations must attach	а 	.► Tyes	. [No
Under penaltie	s of perjury, I declare that I have examined this return, inc	luding-accompanying schedules	and statements, and to the best	of my knowledge and belief, it is			
uue, correct, a	and complete Declaration of preparer (other than officer) is	based on all information of white	at preparer has any knowledge	1 3/27/17			
Sign	Signature of officer			Date			
Here	Type or print name and title			PRESIDENT			
	Print/Type preparer's name	Preparer's signature	Date	_	PTIN		
Daid	Patrick Ehlers	rande	n 2-1	Check Lif self-employed	0127852	3	
Paid Patrick Enters Texas Farm Bureau Patric							
Use Only	Firm's address ► P.O. Box 2689			Firm's EIN	74-1145	986	
	Waco		TX 76702	Phone no (25			
May the IR	S discuss this return with the preparer show	n above? See instruction	ns	· · · · · · · · · · · · · · · · · · ·	. ► XYes		No
		_ _	- 		Form 99	0-EZ ((2015)

SCHEQULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

Department of the Treasury Internal Revenue Service

WALKER COUNTY FARM BUREAU

Employer identification number

74-6066625

Pt III, Line 31

Members of the County Farm Bureau are also members of Texas Farm Bureau, a statewide agricultural organization (exempt under 501(c) (5)) that works for the betterment of agriculture and coordinates programs on a statewide basis. Members of the County Farm Bureau are also members of the American Farm Bureau, a national agricultural organization that also works for the betterment of agriculture.

County Farm Bureau volunteers participate in matters dealing with legislation that affects agriculture.

County Farm Bureau volunteers help organize their members into separate agricultural commodity interests.

Other

Pt III, Line 28- Annual meeting
Held an annual meeting in which all members are invited.
Purpose was to discuss relative local, statewide, and
national agricultural issues, the importance of
agriculture education, the business of the organization,
and current legislative issues as they relate to
agriculture. Members of the county farm bureau, county
farm bureau staff, county farm bureau voluntary leaders,
Texas Farm Bureau staff and invited guests participated.

Other

Pt III, Line 29- Youth Livestock Show/Fair Contributed to local youth livestock show/fair. Purposes of the show are to promote responsibility, leadership skills, and interest in raising farm animals for area youth. The County Farm Bureau volunteers as well, and the local 4-H Clubs and FFA Chapters participate in this important event.

Other

Pt III, Line 30- Youth Leadership Conference Sponsored student(s) to attend the Farm Bureau Youth Leadership Conference. The purpose of the conference is to give selected high school students in Texas a better understanding of the various forms of government and educate them on their responsibilities as citizens. The conference runs three full days and includes lectures, discussions, and films by outstanding authorities in government, history, and economics.