OMB No 1545-0047

Return of Organization Exempt From Income Tax

2017

3 Department of the Treasury Internal Revenue Service

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the	2017 cale	ndar year, or tax year beginning , 2017, and ending			, 20
В	Check if a	pplicable	C Name of organization GRAYSON COUNTY FARM BUREAU		D Employe	er identification number
	Address o	change	Doing business as		75 - 09	06105
	Name cha	ange	Number and street (or P.O box if mail is not delivered to street address) Room/suite		E Telephor	e number
	Initial retu	m	200 S FM 1417	Ì	(903)	893-4393
	Final return	v/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amended	return	SHERMAN, TX 75092		G Gross re	ceipts \$ 514,797.
	Applicatio	n pending	F Name and address of principal officer	H(a) Is this a gi	oup return for s	subordinates? Yes No
_			SCOTT RENFRO, SAME ADDRESS AS "BOX C" ABOVE, 6 -	H(b) Are all	subordinates	included? Tyes No
Ī_	Tax-exem	pt status	☐ 501(c)(3) ☐ 501(c) (5) ◀ (Insert no.) ☐ 4947(a)(1) or ☐ 527 ()	If "N	o," attach a	list. (see instructions)
J	Website:	► N	/A	H(c) Group	exemption	number ▶
K	Form of or	ganization	X Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation	1950	M State	of legal domicile TX
P	art I	Summ	ary			
	1 [Briefly de	escribe the organization's mission or most significant activities: To bette	er the co	nditions	and efficiency of
9			ltural producers and promote a wholesome and desi			
Activities & Governance			h education, information, and other such programs			
/er			is box ▶ ☐ if the organization discontinued its operations or disposed of i		25% of	ts net assets.
ő	3 1	Number (of voting members of the governing body (Part VI, line 1a)		3	9
∞ 8	4 1	Number (of independent voting members of the governing body (Part VI, line		4	9
ţje	5	Total nun	nber of individuals employed in calendar year 2017 (Fart V, line 2a)		5	15
ξ	6	Total nur	nber of volunteers (estimate threcessary)		6	14
¥	7a 7	Total unr	elated business revenue from Part VIII, column (C), line 12		7a	267,407.
	b	Net unrel	ated business taxable income from 990-7 line 34		7b	42,242.
				Prior Ye	ar	Current Year
a	8 (Contribut	7,372.	245,920.		
Revenue	9 1	Program	tions and grants (Part VIII, line 1h).			
ě	10	Investme	nt income (Part VIII, column (A) tines 3, 4, and 7d)		153.	240.
Œ	11 (Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	230	317.	268,637.
	12	Total reve	enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	467	,842.	514,797.
	13 (Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)		2,570.	5,905.
	14	Benefits	paid to or for members (Part IX, column (A), line 4)			
es			other compensation, employee benefits (Part IX, column (A), lines 5–10)	191	1,163.	213,356.
Expenses			onal fundraising fees (Part IX, column (A), line 11e)			
×	b 7	Total fund	draising expenses (Part IX, colu <u>mn (D), line 25)</u> ▶ //			
ш	17 (Other ex	penses (Part IX, column (A), lines 11a-RECETED · · · ·	221	L,567.	226,111.
			enses. Add lines 13–17 (must equal-Part IX, column (A), line 25) .	415	5,300.	445,372.
	19	Revenue	less expenses. Subtract line 18 from line 12		2,542.	69,425.
S O			8 MAY/2 1 2018 9 Beg	jinning of Cu	rrent Year	End of Year
sets	20	Total ass	ets (Part X, line 16)	335	411.	401,018.
Net Assets or Fund Balances	21		ilities (Part X, line 26) OGDEN, UT	4.8	3,092.	44,274.
			ts or fund balances. Subtract line 21 from line 20	287	7 , 319.	<u>356,744.</u>
P	art II	Signal	ture Block			
			ry, I declare that I have examined this return, including accompanying schedules and stateme			ny knowledge and belief, it is
tru	e, correct,	and compi	ete. Declaration of preparer (other than officer) is based on all information of which preparer ha	as any know		
٥.						
Sign		Sign	ature of officer	Da	ite	9.10
He	re		ESIDENT COST RENFRO		-	/ / / /
			or print name and title			IDTIN .
Pa	id	1	pe preparer's signature Date	11-10	Check [
	eparer	. Patri		-11-18		ployed P01278523
	e Only	Firm's n		Firm		74-1145986
		Fırm's a	ddress ► P.O. Box 2689, Waco, TX 76702	Pho	one no (2	54) 751-2337
			s this return with the preparer shown above? (see instructions)	· · · ·	<u> </u>	· · X Yes No
For	Paperwe	ork Redu	ction Act Notice, see the separate instructions. BAA REV 1	2/05/17 PRO		Form 990 (2017)

Part	 -			
		esponse or note to any line in this Pa	art III	<i>.</i> 🗵
1	Briefly describe the organization's mission			
	To better the conditions and	d efficiency of		
	agricultural producers and p	promote a wholesome and d	esirable rural life	
	through education, informat	ion, and other such progra	ams.	
2	Did the organization undertake any signi	ficant program services during the ye	ar which were not listed on the	
	prior Form 990 or 990-EZ?			_ Yes ⊠No
_	If "Yes," describe these new services on			
3	Did the organization cease conducting			
	services?		[_Yes ⊠No
	If "Yes," describe these changes on Scho			
4	Describe the organization's program ser			
	expenses. Section 501(c)(3) and 501(c)(4		t the amount of grants and alloca	itions to others,
	the total expenses, and revenue, if any, for	or each program service reported.		
4a	(Code:) (Expenses \$			
	State Meetings		·	
	Volunteer Directors of the C			
	sponsored by Texas Farm Bure			
	At these meetings, various			
	similar local volunteers from			
	At the Texas Farm Bureau and			
	leaders from all over Texas			
	volunteers would like Texas			
	on a statewide level in the			
4h	(Code:) (Expenses \$	including grants of \$	\/Peyonue \$	
710				
	Annual meeting Held an annual meeting in w	high all members are invited	tod Durmaga was to	
	discuss relative local, state			
	the importance of agriculture			
	and current legislative issu			
	of the county farm bureau,			
	voluntary leaders, Texas Far			
	NATHON A LINE OF THE PROPERTY	IN DUREGUE COURT UNA INVIO	od gdoped parezerpacea.	

4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	Youth Livestock Show/Fair			
	Contributed to local youth	livestock show/fair.	·	
	Purposes of the show are to	promote responsibility,	·	
	leadership skills, and inter	rest in raising farm		
	animals for area youth. The	e County Farm Bureau	·	
	volunteers as well, and the	local 4-H Clubs and FFA		
	Chapters participate in this	s important event.		
	· · · · · · · · · · · · · · · · · · ·			
4d	Other program services (Describe in Sch	· · · · · · · · · · · · · · · · · · ·		
	(Expenses \$ including gr	rants of \$) (Revenue	\$) See Stat	ement
4e	Total program service expenses ▶	-		

1 - 1 - 1 - 1 - 1



Part IV	Checklist	of Required	Schedules
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	ullet		103	140
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		×
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u>×</u> _
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	İ	×
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		×
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	<u>×</u>
D	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		×
		For	m 990	(2017)

Part	V Checklist of Required Schedules (continued)			<u> </u>
	•		Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		×
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		×
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		×
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		×
31	conservation contributions? If "Yes," complete Schedule M	30		×
32	Part I	31		×
33	complete Schedule N, Part II	32		×
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
	or IV, and Part V, line 1	34	<u> </u>	×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	00	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

rait				_
	Check if Schedule O contains a response or note to any line in this Part V	• •		
10	53-44		Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	- 1		ŀ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
٥-	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			ļ
_	Statements, filed for the calendar year ending with or within the year covered by this return 2a 15			-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	<u> </u>	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			ł
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u>×</u>	ļ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	×	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		×
b	If "Yes," enter the name of the foreign country: ▶			<u> </u>
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	×	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	×	l
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		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u></u>
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		<u></u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			l
	sponsoring organization have excess business holdings at any time during the year?	8		L
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Ļ
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	L	<u> </u>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	4		l
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	4		
Ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	 		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	4	1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	 	-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	+
p.	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		ĺ	
_	1	-		
C	Enter the amount of reserves on hand	44-		×
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		 ^
- n	TO THE TIRE OF THE CALIFORNIA OF THE PROPERTY	1 1441		1

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			
01	Check if Schedule O contains a response or note to any line in this Part VI		<u> </u>	X
Secti	on 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. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		163	
b 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		×
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		×
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6	×	×
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7a 7b	×	×
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b 9	The governing body?	8a 8b	×	
Coati	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	-4-1	<u> </u>
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		×
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a		×
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1115		
12a b	Did the organization have a written conflict of interest policy? <i>If "No,"</i> go to line 13	12a 12b	-	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		×
13 14 15	Did the organization have a written whistleblower policy?	13		×
a b	The organization's CEO, Executive Director, or top management official	15a 15b		×
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	only)
19	☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in financial statements available to the public during the tax year.	terest	polic	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and research FARM BUREAU P.O. BOX 2689 WACO TX 76702-2689 (254)751-2337	ecords	: ▶	

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orm	990	(2017)	

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

□ Check this box if neither the organization not a control or the control of the contro	or any relate	d orga	<u>ani</u> z	atio	n c	ompe	nsa	ted any curren	t officer, director	r, or trustee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office Individua	unles	Pos neck ss pe	rson	than of the both or/trust Highest compensated employee	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	 		e	_		ated				
(1) SCOTT RENFRO PRESIDENT	2.00	×		×				0.	0.	0.
(2) CLINT RUTLEDGE VICE PRESIDENT	4.00	×		×				0.	0.	0.
(3) AARON LOONEY SEC TREAS	1.00	×		×				0.	0.	0.
(4) BEN WIBLE DIRECTOR	8.00	×						0.	0.	0.
(5) BART LAWRENCE DIRECTOR	1.00	×						0.	0.	0.
(6) CHANDLER STRAWN DIRECTOR	1.00	×						_0.	0.	0.
(7) KEITH WELCH DIRECTOR	1.00	×						0.	0.	0.
(8) MICHAEL GIDNEY DIRECTOR	1.00	×						0.	0.	0.
(9) RANDALL WATSON DIRECTOR	3.00	×						0.	0.	0.
(10)		1								
(11)	-									
(12)						-				
(13)	 									<u>-</u>
(14)					\vdash					

	. (A) Name and title	(B) Average hours per	box,	unles	Pos eck s pe	rson	than one of the thick the	an ee)	(D) Reportable compensation from	(E) Reportab compensation related		(F) Estimated amount of other
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio Organizatio (W-2/1099-N		compensation from the organization and related organizations
(15)			_									
(16)						-		_		<u></u> .	-	
17)												
18)												
201		 				_		_				
		<u> </u>				_						
		ļ										
22)		<u> </u>	 		,		•		}	ļ		
23)												
24)												
25)					_	_					-	-
1b c	Sub-total	VII, Sectio	n A					> > >	0.		0.	0
d 2	Total (add lines 1b and 1c) Total number of individuals (including bu reportable compensation from the organ	t not limited						e) w	/ho received m	ore than \$1		
3	Did the organization list any former or employee on line 1a? If "Yes," complete							emp	oloyee, or high	est compe	ensated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual											4
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc		5 _ >
ectio	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Reyear.											
	(A) Name and business add	dress							(B) Description of s	ervices	C	(C) compensation
						_		<u> </u>				
								-				
2	Total number of independent contractor received more than \$100,000 of compens							o th	nose listed ab	ove) who		

Part	VIII	Statement of Revenue					
		Check if Schedule O contains a resp	onse or note to			. <u> </u>	🗆
i 	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	245,920.				;
ls, (С	Fundraising events 1c		[ĺ		!
Gifts,	d	Related organizations 1d					
ns,	е	Government grants (contributions) 1e		1			
rtio er S	f	All other contributions, gifts, grants,					
Contributions, and Other Sim		and similar amounts not included above		1			<u>'</u>
ont	g	Noncash contributions included in lines 1a-1f: \$					1
	h	Total. Add lines 1a-1f	Business Code	245,920.			
Program Service Revenue	0-		Business Code	-			;
leve	2a						
Se F	b						
ëvi	d						
ı S	e						
grar	f	All other program service revenue.					
Pro	g g	Total. Add lines 2a–2f					
	3	Investment income (including divide					
		and other similar amounts)		240.	0.	0.	240.
	4	Income from investment of tax-exempt bo	ond proceeds ▶				
	5	Royalties	. 1				
		(i) Real	(II) Personal				
	6a	Gross rents					!
	b	Less: rental expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)	>				
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	b	Less' cost or other basis				; 	
		and sales expenses .					
	C	Gain or (loss)					
	ď	Net gain or (loss)	· · · •				
Other Revenue	8a	Gross income from fundraising events (not including \$					
er Re		of contributions reported on line 1c). See Part IV, line 18 a					
돌	b	Less: direct expenses b					
	С	Net income or (loss) from fundraising	events . >				
	9a	Gross income from gaming activities.	1				
	l	See Part IV, line 19 a					
	b	Less: direct expenses b					
	C	Net income or (loss) from gaming acti	vities 🕨				
	10a	Gross sales of inventory, less returns and allowances a					
	b	Less: cost of goods sold b					
	С	Net income or (loss) from sales of inve			·		 -
		Miscellaneous Revenue	Business Code			101 015	
	11a	INSURANCE SVC FEES	524298	181,815.	0.	181,815.	0.
	b	INS AGENT INCOME	524298	85,562.	0.	85,562.	0.
	C	TFB AWARDS	900099	1,000.	0.	0.	1,000.
	d	All other revenue		260.	0.	30.	230.
	е 12	Total. Add lines 11a–11d Total revenue. See instructions	💆	268,637.	0.	267,407.	1,470.
	14_	i otal revenue. See mstructions		514 <u>,</u> 797.	U.	201,401.	<u> </u>

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b. 7b. (B) Program service (C) Management and (D) Fundraising (A) Total expenses 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . 5,155. Grants and other assistance to domestic individuals. See Part IV, line 22 750. 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 5 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) . . Other salaries and wages 196,207. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 1,273. 10 15,876. Fees for services (non-employees): Management Accounting 1,560. Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 12 Advertising and promotion 90. 13 Office expenses 23,698. 14 Information technology 15 Royalties 16 50,119. 17 5,562. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 3,732. 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 8,605. 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) STATE MEMBERSHIP DUES 126,055. OTHER EXPENSE 6,166. COMM/CONTR SVC 524. All other expenses

Total functional expenses. Add lines 1 through 24e 25 445,372. 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 following SOP 98-2 (ASC 958-720)

Form 990 (2017) Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year 37,224. 1 107,654. 2 Savings and temporary cash investments 2 44,876. 45,116. 3 3 4 4 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Assets 7 7 Inventories for sale or use 8 2,670. Prepaid expenses and deferred charges . 3,456. 9 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 416,905. Less: accumulated depreciation 10b 171,327. 249,855. 10c 245,578. b 11 Investments—publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 14 Other assets. See Part IV, line 11 15 15 16 335,411. 16 401,018. Total assets. Add lines 1 through 15 (must equal line 34) 17 2,754. 17 2,594. 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 41,680. Secured mortgages and notes payable to unrelated third parties . . . 45,338. 24 Unsecured notes and loans payable to unrelated third parties . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X

26 26 Total liabilities. Add lines 17 through 25 48,092. 44,274. Organizations that follow SFAS 117 (ASC 958), check here ▶ complete lines 27 through 29, and lines 33 and 34. 27 27 Temporarily restricted net assets 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗵 and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30

Assets or Fund Balances

Net'

31

32

33

356,744. 33 401,018.

356,744.

Form **990** (2017)

25

31

32

287,319.

287,319.

335,411.

Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds .

Total liabilities and net assets/fund balances

Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	Par	XI Reconciliation of Net Assets							
1 Total revenue (must equal Part VIII, column (A), line 12).		Check if Schedule O contains a response or note to any line in this Part XI				. 🗆			
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Donated services and use of facilities Prior period adjustments Report of the value of t	1	Total revenue (must equal Part VIII, column (A), line 12)							
Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2	Total expenses (must equal Part IX, column (A), line 25)							
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3	Revenue less expenses. Subtract line 2 from line 1	3						
6 Donated services and use of facilities 7 Investment expenses	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4						
7 Investment expenses 7 8 9 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 356, 744. Part 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 Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	5	Net unrealized gains (losses) on investments	5						
8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 356,744. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	6	Donated services and use of facilities	6						
8 Pror period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 356, 744. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	7	Investment expenses	7						
9 Other changes in net assets or fund balances (explain in Schedule O)	8	Prior period adjustments	8						
Solumn (B) 356, 744. 356	9	Other changes in net assets or fund balances (explain in Schedule O)	9						
Check if Schedule O contains a response or note to any line in this Part XII	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line							
Check if Schedule O contains a response or note to any line in this Part XII		33, column (B))	10	:	356,	744.			
Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	<u>Part</u>	XII Financial Statements and Reporting							
Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?		Check if Schedule O contains a response or note to any line in this Part XII				. 🗵			
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant?						No			
Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	1								
Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?			lain i	n					
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?				L_					
reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		. 2a		×			
Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?			iled c	or		1			
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		·							
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?									
separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	b					×			
□ Separate basis □ Consolidated basis □ Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			no t	а					
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?									
of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?					_				
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	С								
Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?									
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			ılain ı	n					
the Single Audit Act and OMB Circular A-133?									
 	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f	orth i	n					
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						×			
	b			l l					
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dıts.	3b	<u> </u>				

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization Employer identification number GRAYSON COUNTY FARM BUREAU 75-0906105 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6, (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: **b** Assets included in Form 990, Part X . . .

Schedule D (F	orm 990) 2017	
Part III	Organizations Maintaining Collections of A	ī,

Dege	2
Page	_

Part	Organizations Maintaining	Collections of	Art, His	torical Tre	easures,	or Ot	her Similar As	sets (c	ontinu	ıed)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and ot	her reco	rds, check a	any of the	e follov	ving that are a s	ignifican	t use	of its
а	☐ Public exhibition		d	☐ Loan or	exchang	e progr	rams			
b	☐ Scholarly research				_					
С	☐ Preservation for future generations	5								
4										
5	During the year, did the organization assets to be sold to raise funds rather								'es □] No
Part	IV Escrow and Custodial Arra	ingements.								
	Complete if the organization 990, Part X, line 21.			•			•		n Forr	m
1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or oth	er intern	nediary for	contributi	ons or	other assets n		'es □] No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing tabl	le:		A	mount		
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amour					ıstodial	account liability	/? 🛘 Y	es	No
	If "Yes," explain the arrangement in Pa									
	V Endowment Funds.	-		<u>'</u>						
	Complete if the organization	answered "Yes'	on For	m 990, Pai	rt IV, line	10.				
		(a) Current year			c) Two years		(d) Three years bac	k (e) Fou	ır years	back
1a	Beginning of year balance						 			
	Contributions									
	Net investment earnings, gains, and losses									
d	Grants or scholarships							 	-	
	Other expenditures for facilities and programs									
f	Administrative expenses									
	End of year balance							1		
2	Provide the estimated percentage of t	he current vear en	d balanc	e (line 1a. c	olumn (a)) held a	as:			
а	Board designated or quasi-endowmer			(3,	` '	•				
b	Permanent endowment ▶	%								
	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and	2c should equal 10	00%.							
3a	Are there endowment funds not in the			zation that	are held a	and ad	ministered for th	ne		
	organization by:	•	Ū						Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii		
b	If "Yes" on line 3a(ii), are the related or							3b		
4	Describe in Part XIII the intended uses	•	•							
Part										
	Complete if the organization		on For	m 990. Pa	rt IV. line	11a.	See Form 990	Part X.	line 1	10.
	Description of property	(a) Cost or ot	her basis	(b) Cost or o	ther basis	(c) /	Accumulated epreciation		ok value	
1a	Land			31	1,895.				31,8	395.
b	Buildings				3,837.		100,947.	2	207,8	
c										
ď	Equipment			69	3,387.		64,335.		5,0	52.
e	Other				5,786.		6,045.			741.
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part			c.) .	•		245,5	
			2////							

Part VII	Investments — Other Securities Complete if the organization ans		rm 990 Part IV line	a 11h See Form	990 Part X line 12
•	(a) Description of security or category (including name of security)		(b) Book value	(c) Meth	od of valuation. of-year market value
(1) Financial	derivatives				
	neld equity interests				
	· · ·				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)	15 000 B 17 100 B				
	b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments—Program Related Complete if the organization ans		ma 000 Dart IV lin	a 11a Caa Earm	000 Bort V line 12
	(a) Description of investment	wered res on For			nod of valuation
	(a) Description of investment		(b) Book value		of-year market value
(1)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization ans		rm 990, Part IV, line	e 11d. See Form	
		a) Description			(b) Book value
(2)					
(3)					
(4)					
(5) (6)		_ 			
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, c	ol. (B) line 15.)		•	
Part X	Other Liabilities. Complete if the organization ans	wered "Yes" on Fo	rm 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
1.	line 25. (a) Description of liability	(b) Book value			
(1) Federal ır		(,			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 25.)	<u> </u>			
	uncertain tax positions. In Part XIII, prov				
organization'	s liability for uncertain tax positions unde	r FIN 48 (ASC 740). Che	eck here if the text of t	ne tootnote has bee	n provided in Part XIII

Part			Return.
	Complete if the organization answered "Yes" on Form 990, Part		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:]
а	Net unrealized gains (losses) on investments	L]
ь	Donated services and use of facilities	<u> </u>]
С	Recoveries of prior year grants]
d	Other (Describe in Part XIII.)]]
е	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:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		<u> </u>
b	Other (Describe in Part XIII.)		Ţ ļ
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<u>.</u> . <u>.</u> .	5
Part	XII Reconciliation of Expenses per Audited Financial Statement		er Return.
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		1
b	Prior year adjustments		1
С	Other losses		1
d	Other (Describe in Part XIII.)		1
е	Add lines 2a through 2d		1 2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		1
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) <i>.</i>	5
Part	XIII Supplemental Information.		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F		
2; Parl	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pr	ovide any additional ir	nformation.
			-

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			**

SCHEDULE 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.

2017

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization Employer identification number **GRAYSON COUNTY FARM BUREAU** 75-0906105 Part III, Line 4d. Other Program Services - 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. ADDITIONAL- 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 also help organize their members into separate agricultural commodity interests, and participate in matters dealing with Pt VI, Line 6- Members Pt VI, Line 7a- All members are the same class and are invited to the annual membership meeting where directors are elected. Pt VI, Line 11b- The form 990 is reviewed by the president prior to filing and all directors review at the board meeting subsequent to its filing. Pt VI, Line 15- No officers or directors receive any compensation, therefore no compensation review is needed. Pt VI, Line 19- The organization makes its Form 990 and any other required information available to the public upon specific request only. Pt XII, Line 2a&b- While the financial statements are not compiled by an "independent" accountant, they are compiled by a separate entity who compiles its financial statements and prepares and files all its state and federal tax returns/reports. This entity also reconciles the organization's bank statements. The organization pays a fee for these services.