

## **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)

2017

OMB No 1545-1150

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

A	For the	2017 calend	ar year, or tax year beginning	SEPTEMBER 1	, 2017,	and ending	AUG	GUST 31	, 20	18	
В	Check if applicable C		C Name of organization				D Emple	oyer identifica	tion numbe	r	
	Address o	change	MCCURTAIN COUNTY FARM BUREAU				73-0141912				
_	Name cha	ange	Number and street (or P O box, if mail is	mber and street (or P O box, if mail is not delivered to street address) Room/suite			E Telephone number				
=	Initial retu		1200 S. CENTRAL	1200 S CENTRAL			580-286-7696				
=		m/terminated	City or town, state or province, country, a	nd ZIP or foreign postal code		<u> </u>	F Group Exemption				
=	Amended	return on pending	IDABEL, OK 74745			05		ber ▶	148	n	
_		ting Method	Cash Accrual Other (sp	ecify) >			Check	If the o			
	Vebsite	-	Cash M Accidal Citics (Sp			''		to attach Sc		15 1100	
			ock only one) —	\	17/0\/1\ 0:	r □527	•	90, 990-EZ, c			
			eck only one) — 501(c)(3)  501(c		47(a)(1) o	1 []527]	(1 01111 00		. 000 117		
		organization	✓ Corporation ☐ Trust		Other	mara ar if tata	Laccato		-		
			7b to line 9 to determine gross receip  w) are \$500,000 or more, file Form 990		1 10 000,0	nore, or ii tota	ii asseis				
		٠,					<u> </u>	\$		<u>819.28</u>	
P	art I		e, Expenses, and Changes ir							_	
			the organization used Schedule		uestion	in this Part			· · · <u></u>	<u>. V</u>	
	1		ons, gifts, grants, and similar amou				[	1			
	2	Program se	ervice revenue including governm	ent fees and contracts			[	2			
	3	Membersh	ip dues and assessments				[	3		<u> 25,775</u>	
	4	Investment	tincome				[	4		1,320	
	5a	Gross amo	ount from sale of assets other than	inventory	5a						
	b	Less cost	or other basis and sales expenses	·	5b						
	c							5c			
	6	Gaming and fundraising events					-				
	a	Gross inc	Gross income from gaming (attach Schedule G if greater than					FOR	IVED		
ē	-	\$15,000)   <b>6a</b>						- V	41 Y L L	-01	
Revenue	b	Gross inco	me from fundraising events (not in	ncluding \$		f contribution	1s 0	A &   4	E 2010	181	
é	-		aising events reported on line 1)				·   <del>•</del>	21414	2 2019	121	
Œ	!		ch gross income and contributions		_   6b	i		7.5		기준	
	c		et expenses from gaming and fund		6c			. 75	N UT	_	
	d		e or (loss) from gaming and func	_		1 6b and su	htract				
	"	line 6c)	c or (1033) from gaming and func	naising events (add inte	oa and	a ob ana sa	ויייייייי	6d			
	7.	•	a of inventory loss returns and all					ou			
	7a		s of inventory, less returns and all	owances	7a 7b						
	b		of goods sold	(O. datum at lum a 7th funna lum		l		70			
	C		it or (loss) from sales of inventory		e /a)	•	٠ . ا	7c			
	8		,					8		19,724	
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7				· P	9	14	<del>16,819</del>	
	10		I similar amounts paid (list in Sche	eaule () .			·	10			
Expenses	11	•	aid to or for members		•		·	11		16,95 <u>5</u>	
	12		ther compensation, and employee		•		ļ	12		<u> 32,980</u>	
	13		al fees and other payments to indi	ependent contractors .			[	13		0	
	14	Occupancy	y, rent, utilities, and maintenance					14	:	27,749	
	15	• • •	ublications, postage, and shipping				[	15		·915	
	16		enses (describe in Schedule O)			•	[	16		12,801	
	17	Total expe	enses. Add lines 10 through 16 .	<u>.</u>			▶	17	1:	39,570	
Net Assets	18		(deficit) for the year (Subtract line					18		7,250	
	19		or fund balances at beginning o				e with 🏻				
		end-of-yea	ir figure reported on prior year's re	eturn)			[	19	19	96,549	
et ,	20	Other chan	iges in net assets or fund balance	s (explain in Schedule O)	-		.	20			
Ž	21		or fund balances at end of year. (				. ▶ ↑	21	21	03,799	
For	1		ion Act Notice, see the senarate ins			No. 10642I	1		990-EZ		



	500-EE (E011)					Page ∠		
Pa	rt II Balance Sheets (see the instructions			-				
	Check if the organization used Schedule	O to respond to a	ny question in this	Part II		🗸		
						(B) End of year		
22	Cash, savings, and investments		· · [	190,496		198,055		
23	Land and buildings			5,692		5,124		
24	Other assets (describe in Schedule O)				24	0		
25	Total assets	• • • •		196,188		203,178		
2 <del>6</del>	Total liabilities (describe in Schedule O)			-361		-621		
27	Net assets or fund balances (line 27 of column			196,549	27	203,799		
Par				—		F		
	Check if the organization used Schedule			Part III	(Rea	Expenses uired for section		
vvna	t is the organization's primary exempt purpose?	Improving the lives of	of rural Oklahomans			c)(3) and 501(c)(4)		
	cribe the organization's program service accompli					nizations, optional for		
	neasured by expenses in a clear and concise m		e services provided	I, the number of	othe	rs)		
<u> </u>	ons benefited, and other relevant information for ea	ach program title.	·					
28						1		
						İ		
			·	······································				
	(Grants \$ ) If this amount	includes foreign gra	ints, check here .	▶ ∐	28a			
29								
		includes foreign gra			29a			
30								
		••••				]		
						1		
		includes foreign gra		· · • • Ц	30a			
31	Other program services (describe in Schedule O)							
20		includes foreign gra		· <b>&gt;</b> 🕌	31a			
	Total program service expenses (add lines 28a				32			
Par	Chapte if the accoming tion const. Cabadula				istruc	tions for Part IV)		
	Check if the organization used Schedule		(c) Reportable	(d) Health benefits,	<del></del>	<u>· · · · L.</u>		
	(a) Name and title	(b) Average hours per week	compensation	contributions to employe				
•	tal rame and the	devoted to position	(Forms W-2/1099-MISC)			ther compensation		
			( not paid, onto: o ,	doint de dempendation	+-			
	MCCAIN-PRESIDENT	-				0		
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BKEI	NT BOLEN-VICE PRESIDENT	2		<del></del>	<del>-  </del>			
DOD!	ERT GOOLSBY-SECRETARY/TREASURER	2	o			0		
кові	ENT GOOLSBY-SECKETART/TREASURER			<del> </del>	<u> </u>			
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	ALD CARROLL DIRECTOR	1		İ		•		
KOW	ALD CARROLL-DIRECTOR	11	0		<u> </u>	0		
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Part						
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	s Part	Yes	No		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		162			
34	detailed description of each activity in Schedule O	33		<b>√</b>		
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	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, 6a, and 7a, among others)?					
c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c	✓.	<b>√</b>		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <b>37a</b>	FX.				
b	Did the organization file Form 1120-POL for this year?	37b	r (nek	<b>√</b>		
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 prior year and still outstanding at the end of the tax year covered by this return?	38a	الإي الدرا الإي الدرا	_ <b>√</b> প্রভাগ		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	5.3				
39	Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on line 9					
a b	Initiation fees and capital contributions included on line 9					
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under:		7			
<b>.</b>	section 4911 ► ; section 4912 ► ; section 4955 ►  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958					
b	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 L, Part I	40b		200.111		
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 on line 40c reimbursed by the organization					
е	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	40e	e i e	<b>✓</b>		
41	List the states with which a copy of this return is filed ▶ OKLAHOMA	_				
42a	The organization o books are in care or	405-52		0		
	Located at ► 2501 N STILES, OKC, OK ZIP + 4 ►	73	Yes	No		
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. ▶	42b	2 6 19 35	7.43		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
С	At any time during the calendar year, did the organization maintain an office outside the United States? .  If "Yes," enter the name of the foreign country. ▶					
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	• •	Yes	► □ No		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1		
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	44b	<b>光</b> 强	<b>√</b>		
c d	Did the organization receive any payments for indoor tanning services during the year?  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44c 44d	1.為權	<b>✓</b> ✓ <b>✓</b>		
45a b	Did, the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	45a		<b>/</b>		
	Form 990-EZ (see instructions)	45b		<b>1</b>		

true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here 0m Type or print name and title PTIN Print/Type preparer's name Check | ıf Paid self-employed Laura Morey Preparer Firm's EIN ▶ Firm's name ► OKLAHOMA FARM BUREAU 73-0382001 **Use Only** Firm's address ▶ 2501 N. STILES, OKC, OK 73105 Phone no 405-523-2300 May the IRS discuss this return with the preparer shown above? See instructions ✓ Yes □ No

## SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

## Supplemental Information to Form 990 or 990-EZ

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

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or 990-EZ.

Solution of the Treasury

Internal Revenue Service

Solution of the Treasury

Solution of the Treasury

Internal Revenue Service

2017

Employer identification number

OMB No 1545-0047

Open to Public Inspection

MCCURTAIN COUNTY FARM BUREAU 73-0141912 PART 1-OTHER REVENUE 4800.00 RENTAL INCOME OFFICE REIMBURSEMENT 114588.70 PR & ADVERTISEMENT REIMB. 335.13 TOTAL 119723.83 OFFICE SUPPLIES 3940 82 PROPERTY TAXES & EXPENSES 3425.00 FEDERAL INCOME TAX 5228.00 STATE INCOME TAX 0 00 INTEREST EXPENSE 206.70 12800.52 PART II-OTHER ASSETS BEGINNING OF YEAR END OF YEAR FURNITURE & FIXTURES 0 00 0 00 0.00 FEDERAL TAX DEPOSIT 0.00 STATE TAX DEPOSIT 0 00 0.00 ACCT. RECEIVABLE 0.00 0.00 0.00 PART II-LIABILITIES OFB PAYABLE -361.50 -620.50 ROOF CLAIM 0.00 0 00 LOAN PAYABLE 0 00 0 0 TOTAL -361.50 -620.50

## 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.

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047
2017
Open to Public

Inspection

**Employer identification number** 

73-0141912

Department of the Treasury Internal Revenue Service

**MCCURTAIN COUNTY FARM BUREAU** 

Form990 for the latest information.

The Organization does not have stockholders but it does have members. There are two types of members. One is an Associate member and the other is a Voting member. An Associate member includes someone who runs or operates a farm but whose average gross agricultural income is less than half their total income. An Associate member also includes someone working in Agribusiness. Someone who is not directly related to Agriculture is an Associate member. Lastly, an Associate member can hold their membership through a church, FFA chapter, an association or by a corporation not producing agricultural products. A Voting member can be a family that gets the majority of its average gross income from the sale of agricultural products. A Voting member can also be held by a retired agricultural person living on an income or social security accrued and not employed full time in another occupation. A Voting member can also be held by a partnership or corporation receiving the majority of income from the sale of agricultural products. ANNUAL COUNTY ACTIVITY REPORT DATE ACTIVITY PARTICIPANTS 2017-2018 12 COUNTY BOARD MEETINGS 5 BOARD MEMBERS 3 hours each meeting