

2949208904711 9

OMB No. 1545-1150

Form **990-EZ****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)

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

Go to www.irs.gov/Form990EZ for instructions and the latest information.**2017****Open to Public Inspection**Department of the Treasury
Internal Revenue Service**A** For the 2017 calendar year, or tax year beginning Nov 1, 2017, and ending Oct 31, 2018**B** Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

WALKER COUNTY FARM BUREAU

Number and street (or P.O. box, if mail is not delivered to street address)

P O BOX 1706

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

HUNTSVILLE, TX 77342

D Employer identification number

74-6066625

E Telephone number

(936) 291-2136

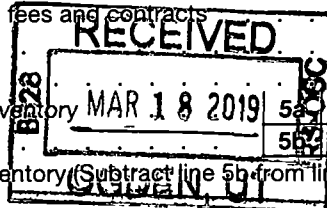
F Group Exemption Number**G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) _____**I** Website: N/A**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**J** Tax-exempt status (check only one) — ☐ 501(c)(3) ☒ 501(c) (5) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Form of organization. ☒ Corporation ☐ Trust ☐ Association ☐ 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

\$ 114,397.

Part I 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 ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	50,160.
	4	Investment income	4	111.
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8	64,126.	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	114,397.	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	1,110.
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	45,165.
	13	Professional fees and other payments to independent contractors	13	975.
	14	Occupancy, rent, utilities, and maintenance	14	18,782.
	15	Printing, publications, postage, and shipping	15	115.
	16	Other expenses (describe in Schedule O)	16	38,750.
	17	Total expenses. Add lines 10 through 16	17	104,897.
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	9,500.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	138,719.
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	148,219.



SCANNED APR 22 2019

For Paperwork Reduction Act Notice, see the separate instructions. BAA

REV 10/16/18 PRO

Form **990-EZ** (2017)

67

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II ☒

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	63,125.	22 61,968.
23	Land and buildings	218,138.	23 221,568.
24	Other assets (describe in Schedule O)	2,257.	24 2,929.
25	Total assets	283,520.	25 286,465.
26	Total liabilities (describe in Schedule O)	144,801.	26 138,246.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	138,719.	27 148,219.

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III . . ☒

What is the organization's primary exempt purpose? PROMOTING AGRICULTURE

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section
501(c)(3) and 501(c)(4)
organizations, optional for
others)

28 SEE SCHEDULE O

(Grants \$) If this amount includes foreign grants, check here ☐

28a

29 SEE SCHEDULE O

(Grants \$ _____) If this amount includes foreign grants, check here ☐

29a

30 SEE SCHEDULE O

(Grants \$) If this amount includes foreign grants, check here ☐

30a

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here ► ☐

31a

32 Total program service expenses (add lines 28a through 31a) **▶**

32

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV ☐

[illegible]

Part 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 ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	X
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed 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	X
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)?	35a X	
b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b X	
c 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	35c	X
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	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a _____		
b Did the organization file Form 1120-POL for this year?	37b	X
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	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b _____	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a _____	
b Gross receipts, included on line 9, for public use of club facilities	39b _____	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____; section 4912 ► _____; section 4955 ► _____		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 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	
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		
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	40e	X
41 List the states with which a copy of this return is filed ► _____		
42a The organization's books are in care of ► <u>TEXAS FARM BUREAU</u> Telephone no. ► <u>(254) 751-2337</u> Located at ► <u>P O BOX 2689, WACO TX</u> ZIP + 4 ► <u>76702-2689</u>		
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).	42b	X
c 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: ► _____	42c	X
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	43	<input type="checkbox"/>
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	X
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	X
c Did the organization receive any payments for indoor tanning services during the year?	44c	X
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	X
b 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 Form 990-EZ (see instructions)	45b	X

- 46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

- 47 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

	Yes	No
47		

- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		
----	--	--

- 49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		
-----	--	--

- b If "Yes," was the related organization a section 527 organization?

49b		
-----	--	--

- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(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 amount of other compensation

f Total number of other employees paid over \$100,000 0

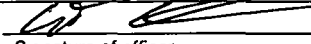
- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

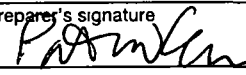
(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 0

- 52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ☐ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here		3/5/19
	Signature of officer	Date
	PRESIDENT	
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Patrick Ehlers		2-13-19		P01278523
	Firm's name	Firm's EIN			
	Texas Farm Bureau	74-1145986			
	Firm's address	Phone no			
	P.O. Box 2689, Waco, TX 76702	(254) 751-2337			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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**

Name of the organization

WALKER COUNTY FARM BUREAU

Employer identification number

74-6066625

Pt III, Line 28-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 as the local 4-H Clubs and FFA Chapters participate in this important event.

Pt III, Line 29-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.

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.

Pt III, Line 31: Ag in the Classroom-County Farm Bureau volunteers contributed their time and resources to an Agriculture in the Classroom Program. Using various specially developed materials (in conjunction with Texas Farm Bureau), teachers around the state guide Texas students in grades 1 thru 6 in exploring various facets of food and fiber production in Texas. How agriculture contributes to the lifestyles of people throughout the world is also presented.

Name of the organization	Employer identification number
WALKER COUNTY FARM BUREAU	74-6066625

Members of the County Farm Bureau are also members of Texas Farm Bureau, a statewide agriculture 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 legislation that affects agriculture.

Pt I, Line 8:

Description: INS SERVICE FEES \$45,913

Description: INS AGENT INCOME \$16,140

Description: TFB AWARDS \$2,050

Description: MISCELLANEOUS INCOME \$5

Description: SIGN INCOME \$18

Pt I, Line 16:

Description: STATE MEMBERSHIP DUES \$25,687

Description: COMMITTEE/CONTRACT SERVICES \$78

Description: TRAVEL/CONFERENCES/MEETINGS \$470

Description: OTHER EXPENSES \$3,703

Description: OFFICE OPERATIONS EXPENSES \$6,709

Description: EQUIPMENT EXPENSES \$2,103

Pt II, Line 24:

Description: Utility Deposit Beginning of Year: \$25 End of Year: \$25

Description: Prepaid Income Tax Beginning of Year: \$2,232 End of Year: \$2,904

Pt II, Line 26:

Description: Accounts Payable & Accrued Expenses Beginning of Year: \$408 End of Year: \$422

Description: Notes Payable-Building Beginning of Year: \$144,393 End of Year: \$137,824