

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2018

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2018 calendar year, or tax year beginning 07/01, 2018, and ending 06/30, 2019

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pend.

C Hardee County Farm Bureau, Inc. 1017 US HWY 17 N Wauchula, FL 33873-8751

D Employer identification no. 59-0752041 E Telephone number (863) 773-3117 F Group Exemption Number 1805

G Accounting method: [X] Cash [] Accrual Other (specify)

H Check [X] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: N/A J Tax-exempt status (check only one): [] 501(c)(3) [X] 501(c)(5) [] 4947(a)(1) or [] 527

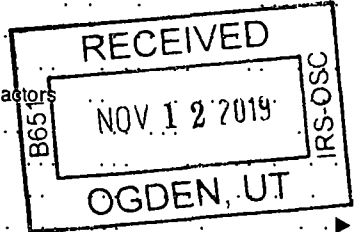
Form of organization: [X] Corporation [] Trust [] Association [] Other

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, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 127,745.

Part II 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 [X]

Table with 21 rows and 3 columns: Line number, Description, Amount. Includes revenue items (1-9) and expense items (10-17), ending with net assets (18-21).



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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 the year	(B) End of year
22 Cash, savings, and investments	231,759.	220,117.
23 Land and Buildings	31,618.	37,772.
24 Other assets (describe in Schedule O)	4,224.	2,083.
25 Total assets	267,601.	259,972.
26 Total liabilities (describe in Schedule O)	961.	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	266,640.	259,972.

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

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

What is the organization's primary exempt purpose? Education Information Economic

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, or other relevant information for each program title

28 SEE SCHEDULE O

(Grants \$) If this amount includes foreign grants, check here 28a

29

(Grants \$) If this amount includes foreign grants, check here 29a

30

(Grants \$) If this amount includes foreign grants, check here 30a

31 Other program services (attach schedule)

(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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable Compensation (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Greg L Shackelford Director	2	0.	0.	0.
Steve A Johnson Vice Preside	6	0.	0.	0.
Corey M Lambert Treasurer	2	0.	0.	0.
Scott B Henderson Secretary	.5	0.	0.	0.
Daniel H Smith Director	2	0.	0.	0.
Tommy Watkins President	6	0.	0.	0.
Woodrow Cornell Director	2	0.	0.	0.
Ryan Waters Diector	2	0.	0.	0.

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 [X]

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
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
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities
35 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
35 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
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
37 a Enter amount of political expenditures direct or indirect, as described in the instructions
37 b Did the organization file Form 1120-POL for this year?
38 a 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 unpaid at the start of the period covered by this return?
38 b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39 a Initiation fees and capital contributions included on line 9
39 b Gross receipts, included on line 9, for public use of club facilities
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955
40 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 900-EZ? If "Yes," complete Schedule L, Part I
40 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
40 d Section 501(c)(3) 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization
40 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
41 List the states with which a copy of this return is filed Florida
42 a The organization's books are in care of Robin C Weeks, CPA Tel no. 863-773-4556 Located at 118 Carlton Street, Wauchula, FL ZIP + 4 33873
42 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)
42 c At any time during the calendar year, did the organization maintain an office outside of the U S? If "Yes," enter the name of the foreign country
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041-- Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44 a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44 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
44 c Did the organization receive any payments for indoor tanning services during the year?
44 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
45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45 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 instr)

	Yes	No
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		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	47	Yes	No
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		
49 a Did the organization make any transfers to an exempt non-charitable related organization?	49a		
b If "Yes," was the related organization(s) a section 527 organization?	49b		

50 Complete this table for the 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 from the organization (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

51 Complete this table for the 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 address of each independent contractor	(b) Type of service	(c) compensation

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

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, this return is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: Thomas C. Watkins Date: 10/31/19
 Type or print name and title: President

Print preparer's name: _____ Preparer's signature: _____ Date: _____ Check if self-employed PTIN: _____

Paid Preparer Use Only Firm's name: _____ Firm's address: _____ Firm's EIN: _____ Phone no.: _____

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

2018

Open to Public
Inspection

Name of the organization

Hardee County Farm Bureau, Inc.

Employer identification number

59-0752041

Part I, Line 8 - Other Revenue

Service Fees	56,950.
Payroll Reimbursement	7,321.
Donations Received	215.
	<u>64,486.</u>

Part I, Line 10 - Expenses - Grants and similar amounts paid

Florida Farm Bureau Federation Dues	<u>20,582.</u>	
Totals:	<u>20,582.</u>	<u>0.</u>

Part I, Line 16 - Other Expenses

<u>Description</u>	<u>Total</u>
Office Expense	2,146.
Meetings & Travel	5,839.
Ag Fest	2,778.
Contributions	4,980.
Accounting	3,000.
Federal Taxes	2,377.
Eqpt Rent/Lease	5,328.
Dues & Subscriptions	279.
Special Projects/Promo	6,219.
YF & R	1,445.
Miscellaneous	230.
Sales Tax	19.
Totals:	<u>34,640.</u>

Part I, Line 20 - Other changes in net assets or fund balances

Gain/Loss on Investment	<u>4,249.</u>
	<u>4,249.</u>

Name of the organization

Hardee County Farm Bureau, Inc.

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Part II, Line 24 - Other Assets

Inventory

2,083.

2,083.Page 2, Part III - Line 31, Other Program ServicesDescription

Line 28) For more than 20 years, Hardee County Farm Bureau holds an Ag-Fest for local 4th grade students. This year's Ag Fest had 28 interactive stations, including cattle, citrus, beekeeping, fertilizers, nurseries, and local agricultural businesses. The event serves to educate young people about agriculture in their county. We also provide teachers with Ag-in-the Classroom materials to help educate the students throughout the year on the importance of agriculture.

Line 29) 4-H members had the opportunity to learn about the legislative process in Tallahassee. Students were assigned bills to research and work to convince their peers to pass their bills in committee then on the chamber floor. Learning about how the legislature works and how to communicate effectively will help these students when they are given the opportunity to discuss agricultural issues and communicate with the non-farming communities.

Line 30) We support students who participate in the fair. Showing animals at the fair teaches students many life lessons such as work ethics, business skills, how to deal with difficult situations and time management. We take the opportunity to promote our county farm bureau's mission and local agriculture to the general public and work towards the betterment of agriculture.