	004	n_E7	SHORE FORM	-	OMB NO 1545-1150			
Form 9.90-EZ			Return of Organization Exempt From Income	lax	2018			
	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except pr				ns)			
					Open to Rublic			
•			▶ Do not enter Social Security numbers on this form as it may be made	public	Inspection			
		of the Treasury nue Service	► Go to www.irs.gov/Form990EZ for instructions and the latest inform	10117	:			
			dar year, or tax year beginning 07/01, 2018, and ending	06/30	,2019			
R (Check opplica	ıf 🔼			dentification no.			
		s change	Lee County Farm Bureau, Inc.					
	Vame c	hange			59-1110069 Telephone number			
	nitial re	eturn	(239) 561-5100					
Final return Fort Myers, FL 33912-4331								
\equiv		ed return	F Group Exer	▶1805				
		tion pend.	d. ☑ Cash ☐ Accrual Other (specify) ▶ H					
G	ACCO	unting metho	d. ☑ Cash ☐ Accrual Other (specify) ▶ H		if the organization is			
I W	/ebsi	te: ► N/A			to attach Schedule B			
JT	ax-ex	cempt status	(check only one) - 501(c)(3) X 501(c)(5) (insert no) 4947(a)(1) or 527	(Form 990, 9	90-EZ, or 990-PF).			
KF	orm o	f organization	n: X Corporation Trust Association Other					
		·						
_L A	dd lin	es 5b, 6c, an	d 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more,	or if total asset	s			
<u> </u>	art II,	line 25, colu	mn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	▶\$	177,543.			
			Expenses, and Changes in Net Assets or Fund Balances (See the instructions		<u> </u>			
٦		_	e organization used Schedule O to respond to any question in this Part I		X			
- 4	1		is, gifts, grants, and similar amounts received	. 1				
ر	2		rvice revenue including government fees and contracts	2				
ן אַ	3	=	dues and assessments	. 3	85,192.			
i	4	-	income	4	199.			
i	5a		ant from sale of assets other than inventory 5a		199.			
2								
ξ S B			r other basis and sales expenses		205			
<u>ر</u>	_		. 5c	397				
• • •	6	Gaming and						
E V	а		ne from gaming (attach Schedule G if greater than					
Ě		\$15,000)	6a					
E N	ь	Gross incor	ne from fundraising events (not including \$ of contribution	s s				
U		from fundra	ising events reported on line 1) (attach Schedule G if					
_	ļ	the sum of	such gross income and contributions exceed \$15,000) 6b					
	С	Less. direct	expenses from gaming and fundraising events 6c					
İ	d	Net income	or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract					
	ļ	line 6c)		. 6d				
	7 a	Gross sales	of inventory, less returns and allowances					
	l		f goods sold					
	l		or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	990.			
	8		ue (describe in Schedule O)	8	89,165.			
	9		ue Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	175,149.			
	10			3. 10	38,807.			
	11		d to or for members	11				
E	12			12	68,604.			
EXPEZ	13	Professiona	fees and other payments to independent contractions NOV 1 2 2019	13	00,004.			
Z.		Occupancy	rent, utilities, and maintenance	14	24 111			
S	14		· · · · · · · · · · · · · · · · · · ·	1 }	24,111.			
S	15		olications, postage, and shipping	15	1,635.			
	16	=	ises (describe in Schedule O)	16	18,710.			
-	17		nses Add lines 10 through 16	<u>▶ 17</u>	151,867.			
Ą	18		deficit) for the year (Subtract line 17 from line 9)	18	23,282.			
ASSET THE	19		r fund balances at beginning of year (from line 27, column (A)) (must agree with					
۲Ę			figure reported on prior year's return)		273,072.			
s	20		es in net assets or fund balances (explain in Schedule O)	20	0.			
	21	Net assets of	r fund balances at end of year Combine lines 18 through 20	▶ 21	296,354.			
			tion Act Notice, see the separate instructions.		Form 990-EZ (2018)			
SBA	Co.	pyright 2018	Saxon Tax Software					

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Form 990-EZ (2018) Lee County F	arm Bureau, Inc.		59-1	110	069 Page 2
Partilli Balance Sheets. (see the					
Check if the organization used S	Schedule O to respond to any o	uestion in this Part II		<u>. </u>	<u>. </u>
		(A) B	eginning of the year		(B) End of year
22 Cash, savings, and investments			128,418.	22	<u> 153,978.</u>
23 Land and Buildings		<u> </u>	144,341.	23	<u>141,800.</u>
24 Other assets (describe in Schedule O) .			1,381.	24	1,652.
25 Total assets		· · · · · · · · <u> </u>	274,140.	25	<u>297,430.</u>
26 Total liabilities (describe in Schedule O)			1,068.	26	1,076.
Net assets or fund balances (line 27 of	column (B) must agree with lir	ne 21)	273,072.	27	<u>296,354.</u>
Partill Statement of Program					Expenses
Check if the organization used S	Schedule O to respond to any o	uestion in this Part III .	X		quired for section
What is the organization's primary exempt pur	pose? Education Ir	nformation E	conomic		(c)(3) and 501(c)(4) anizations; optional
Describe the organization's program service a	ccomplishments for each of its	three largest program s	ervices, as		others)
measured by expenses in a clear and concise					
benefited, or other relevant information for each	ch program title				
28 SEE SCHEDULE O					
(Grants \$) if th	s amount includes foreign gran	ts check here	▶ □	28a	
29	o amount moladoo to olgii gian	a, oncon nois			
(County f)	s amount includes foreign gran	to check here		29a	
· · · · · · · · · · · · · · · · · · ·	s amount includes foreign gran	is, check here		29a	
30					
	s amount includes foreign gran	ts, check here	<u>,,,,,,,</u> ▶ ∐	30a	
31 Other program services (attach schedule)		• •			
***************************************	s amount includes foreign gran			31a	
32 Total program service expenses (add l				32	
Rart IV: List of Officers, Directors, Tru					instructions for Part IV.
Check if the organization used S	1	(c) Reportable	(d) Health benefit		<u> : - - - - - - - - </u>
(a) Name and title	(b) Average hours per week	Compensation	contributions to em	ployee	(e) Estimated amount other compensation
	devoted to position	(If not paid, enter -0-	deferred compens	sation	
Richard Voellinger	_ _				
Sec/Treas	1	0.		0.	0.
Tim Eckert					
Director	1	0.		0.	0.
Keith Councell	_			ł	
Vice President	1	0.		0.	0.
Chad Flint					
Director	_ 1	0.		0.	0.
Richard Pritchett					
President	5	0.		0.	0.
Cory Dombrowski					
Director	- ₁	0.		0.	0.
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SBA Copyright 2018 Saxon Tax Software				Form	990-EZ (2018)

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for Part V.) Check: if the organization used Schedule O to respond to any question in this Part V State	Form:	990-EZ (2018) Lee County Farm Bureau, Inc. 59-111006 V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instruc-			je 3
33 Did the organization engage in any activity not previously reported to the IRS7 if "Yes", provide a detailed description of each activity in Schedule 0. 34 Were any significant changes made to the organization or governing documents? If "Yes", attach a conformed copy of the arrended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions). 35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on line 2, 8a, and 7a, among others)? 35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on line 2, 8a, and 7a, among others)? 36 b If "Yes", to line 35a, has the organization field a Form 990-T for the year? If "Yes," provide an explanation in Schedule 0 Was the organization store of \$1,000 or more during the year? If "Yes," complete schedule of the first of year of the year? If "Yes," complete applicable parts of Schedule N. Part II of the year? 37 a Einer amount of political expenditures direct or indirect, as described in the instructions 1374 0. 1. 38 b Did the organization in Form 1120-PCL for the year? 39 b Did the organization in Form 1120-PCL for the year? 39 b Did the organization in Form 1120-PCL for the year? 39 b Did the organization in Form 1120-PCL for the year? 30 b Did the organization in Form 1120-PCL for the year? 31 b If "Yes," complete Schedule I. Part II and enter the total amount involved 32 b If "Yes," complete Schedule I. Part II and enter the total amount involved 39 c Section 501c(X), 501c(X), 40, and 501c(X), 20 organizations Did the organization engage in any section 4915 2. 40 b Section 501c(X), 501c(X), 40, and 501c(X), 20 organizations Einter amount of tax on line 40 c reimbursed by the organization is enter amount of tax emposed on organization managers or disqual culting the tax year, was the organization is		for Part V.) Check if the organization used Schedule O to respond to any question in this Part V			
desch actively in Schedule O Were any spinGaant changes made to the organization or governing documents? If "Yes," attach a conformed copy of the amended documents of they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions). 34	(Yes	No
34 Were any significant changes made to the organization of poverning documents? If Yes,* attach a conformed copy of the amended documents if they reflect a change to the organization share. Otherwise, explain the change on Schedule O (see instructions). 35 a D dit the organization have unrelated business gross income of 31,000 or more during the year from business activities (such as those reported on the 2,6 a, and 7a, among others)? b If Yes,* to line 35e, has the organization field a Form 990 -1 for the year? If Yes, 1 provided an explanation in Schedule O Was the organization of Stock (56, 6501(c)6), 6701(c)6),	33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description			
amended documents if they reflect a change to the organization's name Otherwise, explain the change on Schedule O (See instructions). 34		•	33		
Schedule O (see instructions) 3	34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the	<u> </u>	<u> </u>	X
35 a Dd the organization have unrelated business gross income of \$1,000 or more during the year from business activities (activa strokes reported on hine ¢, ata, and 7a, among others)? b If "Yes", to line \$5a, has the organization filed a Form \$90-T for the year? If "No," provide an explanation in Schedule O		amended documents if they reflect a change to the organization's name. Otherwise, explain the change on	l	Ì	l
to the those reported on line 2, 6a, and 7a, among others)? bit "Yes", bit in 85a, has the organization filed a form 990-11 for the year? If "No," provide an explanation in Schedule C, or which the organization as 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		Schedule O (see instructions)	34		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 with the programation a section 501(c)(4), 501(c)(5), 650(c)(6)(5), 650(c)(6)(6), 650(c)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)	35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities			
c Was the organization a section 501c(s)4), 501c(s)6), or 501c(s)6) organization subject to section 6033(e) notice, reporting and proxy tax requirements during the year? If "Yes," complete splicable parts of Schedule N. 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 policical expenditures direct or indirect, as described in the instructions ▶ 37a		(such as those reported on line 2, 6a, and 7a, among others)?			
and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III. 5 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 7 a Einer amount of political expenditures direct or indirect, as described in the instructions \$374	þ	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	
38 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 ▶ [37a]	C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting,			
year? If "Yes," complete applicable parts of Schedule N 7 a Eiter amount of political expenditures direct or indirect, as described in the instructions ▶ 37a		and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
The armount of political expenditures direct or indirect, as described in the instructions ▶ 37a	36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the			
b Did the organization file Form 1120-POL for this year? 37		year? If "Yes," complete applicable parts of Schedule N	36	Ĺ	\mathbf{x}_{-}
Did the organization borrow from, or make any loans to, any officer, director, fusities, 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? S88 X	37 a	Enter amount of political expenditures direct or indirect, as described in the instructions 37a 0.	•		
any such loans made in a prior year and still unpaid at the start of the period covered by this return? 38a	b	Did the organization file Form 1120-POL for this year?	37b		Х
b If "Yes", complete Schedule L, Part II and enter the total amount involved 38 Section 501(c)(7) organizations. Enter: 39 Initiation fees and capital contributions included on line 9. 39 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 >	38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	-		
39 Section 501(c)(7) organizations. Enter: a Initiation less and capital contributions included on line 9		any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		Х
39 Section 501(c)(7) organizations. Enter: a Initiation less and capital contributions included on line 9	ь		· ·	,	
a initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39b 39c 39b 39b 39b 39b 39b 39b 39b 39b 40 a Section 501(c)(3) grganizations 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 4956 excess benefit transaction on any of its prior Forms 990 or 900-EZ If "Yes," complete Schedule I, Part I c Section 501(c)(3) 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 400 reimbursed by the organization 500 reimbursed by the organization 400 reimbursed by the organization 500 reimbursed by the organization 400 reimbursed by the organization 500 reimbursed 500	39		1 · .	•	, 4
do a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶		· // · · ·			
40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ ; section 4912 ▶ ; section 4915 ▶ ; section 4915 ▶ ; section 4915 ▶ ; section 4916 ▶ ; section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization in an prior year that has not been reported on any of its prior Forms 990 or 900-E27 if "Yes," complete Schedule L, Par1	ь	· · · · · · · · · · · · · · · · · · ·		_	22
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-EZ7 if "Yes," complete Schedule L. Part 1			1		
b Section 501(c)(3), 501(c)(4), and 501(c)(2e) organizations. Did the organization engage in any section 4956 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, Parl 1			l		}
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–E27. If "Yes," complete Schedule I, 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 40c reimbursed by the organization 41 List the states with which a copy of this return is filled. ►FLOTIGA 41 List the states with which a copy of this return is filled. ►FLOTIGA 42 a The organization's books are in care of ►TAINI. Caraway Located at ► 14180 Metropolis Ave Ste 1, Ft. Myers All any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR). 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. ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). c At any time during the calendar year, did the organization maintain an office outside of the U.S? If "Yes", enter the name of the foreign country. ► 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. 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ. Did the organization receive any payments for indoor tanning services during the year? 44b X 44c X 45c Did the organization receive any payments for indoor tanning services during the year? If "No," provide		, 300doli 1012 p	t		
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–E27. If "Yes," complete Schedule I, 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 40c reimbursed by the organization 41 List the states with which a copy of this return is filled. ►FLOTIGA 41 List the states with which a copy of this return is filled. ►FLOTIGA 42 a The organization's books are in care of ►TAINI. Caraway Located at ► 14180 Metropolis Ave Ste 1, Ft. Myers All any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR). 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. ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). c At any time during the calendar year, did the organization maintain an office outside of the U.S? If "Yes", enter the name of the foreign country. ► 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. 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ. Did the organization receive any payments for indoor tanning services during the year? 44b X 44c X 45c Did the organization receive any payments for indoor tanning services during the year? If "No," provide	ь	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess	ļ		
reported on any of its prior Forms 990 or 900–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 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 filled. ►F1.0rida 42 a The organization's books are in care of ▶ Tami Caraway Located at ▶ 14180 Metropolis Ave Ste 1, Ft. Myers ZIP+4 ▶ 33912-4331 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes", enter the name of the foreign country. ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). c At any time during the calendar year, did the organization maintain an office outside of the U.S? If "Yes", enter the name of the foreign country. ► Section 4947(a)(1) nonexempt charitable rusts 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 Late of Form 990-EZ Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ and a explanation in Schedule O 44a 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 44d X Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," F			İ		
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 relimbursed by the organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. List the states with which a copy of this return is filed. ►Plorida 1 List the states with which a copy of this return is filed. ►Plorida 1 List the states with which a copy of this return is filed. ►Plorida 2 a The organization's books are in care of ► Tami Caraway Tel no. ► 239-561-5100 Located at ► 14180 Metropolis Ave Ste 1, Ft. Myers ZiP+4 ► 339912-4331 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, secunties account, or other financial account)? If "Yes", enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). C At any time during the calendar year, did the organization maintain an office outside of the U.S? If "Yes", enter the name of the foreign country. ► 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 Lod the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ. Did the organization recieve any payments for indoor tanning services during the year? Lod the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed unstead of Form 990-EZ (see instr.) Assational form 990-EZ. Lod the organization recieve any payme			406		
on organization managers or disqualified persons during the year under sections 4912, 4955, and 4956. d Section 501(c)(3) 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c relimbursed 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 8868-T 40e X 41 Lst the states with which a copy of this return is filed. Florida 42 a The organization's books are in care of Tami Caraway			700	**	<u>z</u> .
d Section 501(c)(3) 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed. ►Florida 12 a The organization's books are in care of ► Tami_Caraway Located at ► 14180 Metropolis Ave Ste 1, Ft. Myers ZIP+4 ➤ 33912-4331 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, secunities 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). 13 A tany 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. 3 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 44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44b X 45c No 44c Yes No 45c	·				9 ~
d Section 501(c)(3) 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c relimbursed by the organization 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					
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	1990-EZ (2018) Lee County Fa	, , , , , , , , , , , , , , , , , , , ,					Yes	ge I
46	Did the organization engage, directly or in	directly, in political campaig	n activities on behalf of	or in opposition	to	1	5	
	candidates for public office? If "Yes," com	plete Schedule C, Part I .				. 4	6	
Pa	rtiVI Section 501(c)(3) organiza	ations only						
	All section 501(c)(3) organizations r	must answer questions 47-4	19b and 52, and comple	ete the tables for l	ines 50	and 5	1	
	Check if the organization used Sch	edule O to respond to any	question in this Part VI					[
<u></u> 47	Did the organization engage in lobbying a	activities or have a section 5	O1(h) election in effect of	during the tax yea	r? If		Yes	I
	"Yes," complete Schedule C, Part II					4	7	1
48 40 -	Is the organization operating a school as						_	+
49 a b	Did the organization make any transfers to If "Yes," was the related organization(s) a	·			• • •	· -	9а 9b	╁
50	Complete this table for the five highest co	-			 ey emp			ac
	received more than \$100,000 of compens					, ,		
		(b) Average	(C) Reportable	(d) Health benefi	ts			
	(a) Name and title of each employee	hours per week	compensation	contributions to em benefit plans, and d	ployee	(e) Estin	nated an er compe	
		devoted to position	(Forms W-2/1099-MISC)					
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51 	Complete this table for the five highest co from the organization. If there is none, ent (a) Name and address of each independent of the complete this table for the five highest continuous complete this table for the five highest continuous complete this table for the five highest continuous con	ter "None "	(b) Type of se			ompens		atı
								
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	Total number of other independent contra	actors each receiving over \$	100,000 . ▶					
_	Did the organization complete Schedule A		_	ach a		7 Vaa		۸l،
d 52	Did the organization complete Schedule A completed Schedule A	A? Note All section 501(c)(3	organizations must att	and statements, and	. ▶ [Yes est of my	knowle	dge
52 —	Did the organization complete Schedule A completed Schedule A Under penalties of perjury, I declare that I had and belief, it is true, correct, and complete to	A? Note All section 501(c)(3	organizations must att	and statements, and	. ▶ to the beparer h	est of my	knowle	dge
52 Sign	Did the organization complete Schedule A completed Schedule A Under penalties of perjury, I declare that I hand belieft, it is true, correct, and complete to signature of efficer Signature of efficer	A? Note All section 501(c)(3	organizations must att	and statements, and	. ▶ to the beparer h	est of my	knowle	dge
Sign	Did the organization complete Schedule A completed Schedule A Under penalties of perjury, I declare that I hand belief, it is true, correct, and complete to signature of efficer Type or print name and title	A? Note All section 501(c)(3	organizations must att	and statements, and primation of which primation Date Check if self-	. D to the beparer h	est of my as any kn	knowle	No dge
Sign	Did the organization complete Schedule A completed Schedule A Under penalties of perjury, I declare that I hand belief, it is true, correct, and complete to signature of efficer Type or print name and title preparer's name	A? Note All section 501(c)(3	organizations must att	and statements, and primation of which primation Date	31	est of my as any kn	knowle	dge

Schedule Q

(Form \$90 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.

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

2018
Openito Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Lee County Farm Bureau, Inc.

Employer identification number 59-1110069

Part I - Line 5, Sales of Securities and Non-inventory Items Sales Expenses/ Imprvmnts Deprec Price Description Cost 211. 94. Ballast/Lamps Date Acquired: How Acquired: Date Sold: Sold to: 195. 86. Ballast/Lamps Date Acquired: How Acquired: Date Sold: Sold to: 186. 89. Ballast/Lamps Date Acquired: How Acquired: Date Sold: Sold to: Ballast/Lamps 165. 91. Date Acquired: How Acquired: Date Sold: Sold to: Part I, Line 8 - Other Revenue Service Fees 88,894. 2. Sales Tax Collected 269. Misc 89,165. Part I, Line 10 - Expenses - Grants and similar amounts paid Florida Farm Bureau Federation Dues 38,807. 38,807. Totals:

Name of the organization

Lee County Farm Bureau, Inc.

Employer identification number 59-1110069

Part I, Line 16 - Other Expenses

Description	Total
Office Expense Meeting & Travel Sales Tax Misc Awards Contributions Eqpt Rent/Lease Advertising Special Proj/Prom YF & R Esp	3,350. 7,609. 1. 291. 1,036. 201. 4,762. 1,090. 70. 300.
Totals:	18,710.
Part II, Line 24 - Other Assets Deposits Inventory Account Receivable	440. 1,202. 10. 1,652.
Part II, Line 26 - Other Liabilities Payroll Liabilities	1,076. 1,076.

Name of the organization

Lee County Farm Bureau, Inc.

Employer identification number

59-1110069

Page 2, Part III - Line 31, Other Program Services

Description

- 28) The members of the Lee County helped with the youth fair which works for the betterment of agriculture by demonstrating how to properly care for livestock in a humane atmosphere. The county Farm Bureau sponsored awards to encourage good animal stewardship.
- 29) Lee County members gave educational workshops and seminars on proper handling techniques of apairiy and best management practices. They also worked with individuals who wanted to learn to manage bees.
- 30) Lee County Farm Bureau hosted its annual youth speech contest. Students were asked to research the topic 'How has the introduction of agricultural mobile apps impacted the agricultural industry?' Students are taught presentation, organization, and research skills necessary to excel in school and/or work environment. The topics are meant to introduce the diversity and changes in the agricultural industry.