Form **990** 

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Departr	nent	of th	e Tr	easury
Internal	Rev	enue	Sen	vice

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

→ 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	2018 calendar year, or tax year beginning $$	JUN 30, 2019	· · · · · · · · · · · · · · · · · · ·
В	Check if applicable	C Name of organization	D Employer identifi	cation number
Г	Address	Terrebonne Parish Farm Bureau, Inc.		
	Name change	679896		
L	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s	,	
L	Final return/	PO_Box 95004	985-	<u>876-2876</u>
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	<u>345880.</u>
Ļ	Amende return	Bacon Rouge, LA 70895-9004	H(a) Is this a group re	
L	Applica-	F Name and address of principal officer O O III Wal Cite	for subordinates	Yes X No
	pending	1282 Corporate Drive, Houma, LA 70360 PC	H(b) Are all subordinates i	ncluded? Yes No
<u></u>	Tax-exer	npt status 501(c)(3)X _501(c)(5) ◀ (insert no.) 4947(a)(1) d	527 If "No," attach a	list (see instructions)
		: ► N/A	H(c) Group exemption	
			Year of formation: 1953 N	M State of legal domicile: LA
Р		Summary		<del></del>
ě	1 B	riefly describe the organization's mission or most significant activities Formed f	or the promot	ion and
Governance	1	protection of agriculture.		
ē	2 0	heck this box  if the organization discontinued its operations or disposed pumper of voting members of the governing body (Part VI. line 1a)	nore than 25% of its net as	ssets
õ	] 3 N	umber of voting members of the governing body (Part VI, line 1a)		<del>_</del> <del>_</del>
	4 N	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1) otal number of individuals employed in calendar year 2018 (Part V, line 2a)	0 4	8
ies	5 T	otal number of individuals employed in calendar year 2018 (Part V, line 2a)	UL 0 6 2020 8 5	4
Activities &	6	otal number of volunteers (estimate if necessary)	SS 6	8
Ac	1	otal unrelated business revenue from Part VIII, column (C), line 12	DEN UT	176567.
_	<u> b N</u>	et unrelated business taxable income from Form 990-T, line 38	7b	<u>-14139.</u>
			Prior Year 155147.	Current Year
ne	8 0	ontributions and grants (Part VIII, line 1h)		148205.
Revenue	9 P	rogram service revenue (Part VIII, line 2g)	6101. 6010.	6182.
Re	10 Ir	evestment income (Part VIII, column (A), lines 3, 4, and 7d)	175106.	8926.
	1	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	342364.	180308. 343621.
_		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1000.	1275.
		rants and similar amounts paid (Part IX, column (A), lines 1-3)	2225.	2067.
	l	enefits paid to or for members (Part IX, column (A), line 4)	148293.	145176.
Expenses	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) rofessional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ben	h T	otal fundraising expenses (Part IX, column (D), line 25)		
Ř	17 0	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	161648.	165884.
	1	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	313166.	314402.
	1	evenue less expenses Subtract line 18 from line 12	29198.	29219.
JO S	3	orented toda enperiode destruction to wear, mile the	Beginning of Current Year	End of Year
Net Assets or Fund Ralances	20 T	otal assets (Part X, line 16)	1127031.	1156171.
ASS	21 T	otal liabilities (Part X, line 26)	1231.	1152.
Set	22 N	et assets or fund balances Subtract line 21 from line 20	1125800.	1155019.
P	art II	Signature Block		<del></del>
Unc	ler penalti	es of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to the best of m	y knowledge and belief, it is
true	, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prep	oarer has any knowledge.	
Sig	n	Signature of officer	Date -1	1 1 1
He		John WALTHON PREIDENT		1/20
		Type or print name and title		
	F	Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pai	ק נ	ennifer Cook Fourroux ( MM HATTHUS	1 4 123/20 if self-employ	
Pre			nc. Firm's EIN	72-0491096
Use	Only F	irm's address ▶ PO Box 95004		
		Baton Rouge, LA 7 <b>0</b> 895-90 <b>0</b> 4	Phone no. 22	5-922-6200
Ма	y the IRS	discuss this return with the preparer shown above? (see instructions)		X Yes No

	n 990 (2018) Terrebonne Parish Farm Bureau, Inc. rt III   Statement of Program Service Accomplishments	72-0679896 Page <b>2</b>
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission	
•	To promote and protect agriculture	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O	Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expenses, and
	revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ including grants of \$) (Revenue A membership organization formed for the promotion and promotion and promotion are promotion and promotion and promotion and promotion are promotion are promotion and promotion are promotion are promotion and promotion are promotion and promotion are promotion are promotion and promotion are promotion are promotion are promotion and promotion are promotion are promotion are promotion are promotion are promotion and promotion are pr	orotection of
	agriculture.	<u>JIOCCCCION OI</u>
4b	(Code) (Expenses \$) (Revenue	ie \$ )
		<del></del>
4c	(Code) (Expenses \$ including grants of \$) (Revenu	ne \$
		,
		<del></del>
4d	Other program services (Describe in Schedule O )	
	(Expenses \$ including grants of \$ ) (Revenue \$	
4e	Total program service expenses	
		Form <b>990</b> (2018)

Terrebonne Parish Farm Bureau 72-0679896 Form 990 (2018) Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Х X Is the organization required to complete Schedule B, Schedule of Contributors? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for 3 X public office? If "Yes," complete Schedule C, Part I 3 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 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 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 X Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete 8 Х Schedule D. Part III 8 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? X If "Yes," complete Schedule D. Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 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 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X <u>1</u>1a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d 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 X Part X, line 16? If "Yes," complete Schedule D, Part IX 11d <u>11e</u> X e 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 X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? X If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? <u>14a</u> b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X 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 X foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 X complete Schedule G, Part III 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b

832003 12-31-18

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

832004 12-31-18

(gambling) winnings to prize winners?

Form 990 (2018)

	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)	0.00		age v
1 4	Statements negariting other mornings and tax compliance (continued)		1,4	Τ
0-	Fatastha asymptos of amplessas searched as Fasas W.O. Transported of Ware and Tay Otahananda		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return  2a 4	1 *	1	•
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<b>├</b>
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	_	.,	
3a		3a	X	├—
b		3b	X	├
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>├</b> ──	<u> </u>
b	If "Yes," enter the name of the foreign country			ŀ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	}	}	l
5a		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	—	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	—	<b></b> -
6a				
	any contributions that were not tax deductible as charitable contributions?	6a	Ь—	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	<u> </u>	
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	<u> </u>	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			1
	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		L
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
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		.	
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		L
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		L
10	Section 501(c)(7) organizations. Enter		1	
а	Initiation fees and capital contributions included on Part VIII, line 12			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	]		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	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		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			ĺ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			L
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		_ X

If "Yes," complete Form 4720, Schedule O

Form 990 (2018) Terrebonne Parish Farm Bureau, Inc. 72-0679896 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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 8			
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8			
2	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	Х	
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
7a	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?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	x	l
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	_		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	ľ	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1		
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	]		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1		
	taxable entity during the year?	16a	i	X
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	-	Ī	
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
 17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	only)	avaıla	ble
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	al	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Angela Beaudry - 985-876-2876			
	282 Corporate Drive, Houma, LA 70360			

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

Check if Schedule O contains a response or note to any line in this Part VII

Section A.	Officers, Directors,	Trustees, Key	y Employees,	, and Highest Con	npensated 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 nor any related organization					CO	mpei	nsat	ted any current officer, o		
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of
	week	_	cer ar	id a c	Irecia	T	(ee)	from	from related	other
	(list any	iect iect						the	organizations	compensation
	hours for related	D io	ᆲ			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	uste.	Itrus		8	uadu.		(44-27 1033-141130)		and related
	below	dualt	utona	_	l g	st co	5			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key e	Highest compensated employee	F.			3
(1) John Walther	1.50	Ţ						İ		
President		<u> </u>		X	<u> </u>	<u> </u>		919.	0.	0.
(2) Tom Ellender	1.50		ļ		ļ	}	ļ			
Vice President		╙		X		<u> </u>		1301.	0.	0.
(3) Barton Joffrion	1.00									
Secretary/Treasurer		<u> </u>	<u>_</u>	X		<u> </u>		500.	0.	0.
(4) Lloyd Triche	0.23					1			_	_
Board Member	-	↓_	_	_		ļ		500.	0.	0.
(5) Claude Triche	0.23							500		
Board Member			<u> </u>	-				500.	0.	0.
(6) Ronnie Triche	0.23	1						500	•	
Board Member		ļ	_	<u> </u>	-			500.	0.	0.
(7) Ricky Boudreaux	0.23	1	}							•
Board Member	0 22	╙	<u> </u>					0.	0.	0.
(8) Brian Ellender	0.23	┨						010	•	0
Board Member		╁						819.	0.	0.
		$\left\{ \right.$								
	<del></del>	├			-	<del> </del>				<u></u>
		1								
	·- <del></del>	-			<b></b>					
		1								
		ļ		ļ						
				ĺ	ĺ					
			_				_			
	<del>-</del>									
	<del></del>	1								
	•			•						
		ĺ								
						П				
		1								
							-			
932007 12-31-18										Form <b>990</b> (2018)

Form 990 (2018)

\$100,000 of compensation from the organization

		Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b d	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo	ts, and	148205.				
g d	g	Noncash contributions included in lines	1a-1f \$			İ		
<u>8</u> €	h	Total. Add lines 1a-1f		<b>•</b>	148205.			
Program Service Revenue	2 a b c	Exp Reimb & Sea	sonal S	Business Code 110000	6182.	6182.		
e a	d		-					
P.O.	е							
مة ا	f	All other program service reve	nue	<u> </u>				
$\rightarrow$		Total. Add lines 2a-2f		<b>•</b>	6182.		· · · · · · · · · · · · · · · · · · ·	
	3	Investment income (including other similar amounts) Income from investment of tax	▶	8926.			8926.	
	5	Royalties	, , , , , , , , , , , , , , , , , , , ,	<b>•</b>				
	_	•	(ı) Real	(II) Personal				
	6 a	Gross rents						
	þ	Less rental expenses						
İ		, ,						•
		Net rental income or (loss)		<b>&gt;</b>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other		:		
		assets other than inventory	-					
	D	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
		Net gain or (loss)		<b>•</b>				
Other Revenue	8 a	Gross income from fundraisin including \$ contributions reported on line	of					i ,
Re		Part IV, line 18	a a	6000.				
the	h	Less direct expenses	b	2259.				,
0		Net income or (loss) from fund	fraising events	<b></b>	3741.			3741.
		Gross income from gaming ac				,		
		Less direct expenses	b					•
		Net income or (loss) from gam		<b>_</b>			<del>-</del>	
	10 a	Gross sales of inventory, less						
		and allowances	а	<del> </del>				
		Less cost of goods sold  Net income or (loss) from sale	b s of inventory					
Ì		Miscellaneous Revenu		Business Code				
}	11 a	Insurance Servi		524298	176567.		176567.	
	b							
	С						<del></del>	
	d				455555			
		Total. Add lines 11a-11d		<b>&gt;</b>	<u>176567.</u>		176567	12667
	12	Total revenue. See instructions			343621.	6182.	<u> 176567.</u>	12667.

Sect	tion 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A)	
	Check if Schedule O contains a respon-	se or note to any line in t	this Part IX (B)	(C)	<u></u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1275.			<u>_</u>
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				•
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members	2067.			
5	Compensation of current officers, directors,				
	trustees, and key employees			<del>                                     </del>	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	10100			
7	Other salaries and wages	134220.		<del> </del>	
8	Pension plan accruals and contributions (include			İ	
	section 401(k) and 403(b) employer contributions)	100			
9	Other employee benefits	122.			
10	Payroll taxes	10834.			
11	Fees for services (non-employees)				
а	· · · · · · · · · · · · · · · · · · ·		·		
b		1110			
С	F	1140.			
d	, , , , , , , , , , , , , , , , , , ,				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	, ,				
	column (A) amount, list line 11g expenses on Sch O.)				<del></del>
12	Advertising and promotion	1,0501			
13	Office expenses	16591.			·
14	Information technology		<del></del>		
15	Royaltres	21369.	<del></del>	-	
16	Occupancy	375.			
17	Travel	3/3.			
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials  Conferences, conventions, and meetings	11603.		<del> </del>	
19		11003.			<del> </del>
20	Interest Payments to affiliates		<del></del>	<del>                                     </del>	<del></del>
21 22	Depreciation, depletion, and amortization	21363.	<del></del>		
23	Insurance	231.			
23 24	Other expenses. Itemize expenses not covered	231.		<del></del>	<del>-</del>
24	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 0.)	•			
а	Dues/Subscriptions	75096.	···-		· · · · · · · · · · · · · · · · · · ·
b	Repairs/Maintenance	18116.	<del>_</del>	<del></del>	
C	Repairs/ Maintenance				
d			·		
_	•				
25	Total functional expenses Add lines 1 through 24e	314402.			<del>-</del>
<u>25</u> 26	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 if following SOP 98-2 (ASC 958-720)				

Pai	rt X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	363429.	1	405861.	
	2	Savings and temporary cash investments		389727.	2	393399.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	<u> </u>	4		
	5	Loans and other receivables from current and fo	ormer officers, directors,			• ,
		trustees, key employees, and highest compensa			ı	
		Part II of Schedule L		5		
	6	Loans and other receivables from other disquali	fied persons (as defined under			
		section 4958(f)(1)), persons described in section	ı			Sm
		employers and sponsoring organizations of sect	Į.	•		'
Ø	1	employees' beneficiary organizations (see instr)	· · · · · · · · · · · · · · · · · · ·	•	6	
Assets	7	Notes and loans receivable, net			7	
As	8	Inventories for sale or use		· · · · · · · · · · · · · · · · · · ·	8	
	9	Prepaid expenses and deferred charges		435.	9	435.
	10a		ıı			
	'0"	basis Complete Part VI of Schedule D	10a 612423.			•
	Ь,	Less accumulated depreciation	10b 255947.	373440.	10c	356476.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 1	11		12	
	13	Investments · program-related See Part IV, line	f		13	·
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equ	1127031.	16	1156171.	
	17	Accounts payable and accrued expenses		1231.	17	1152.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
ψ	22	Loans and other payables to current and former		<del> </del>		•
Liabilities		key employees, highest compensated employee				•
abil		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities (including federal income tax, pa	yables to related third			
		parties, and other liabilities not included on lines	17-24) Complete Part X of			
		Schedule D			25	ļ <u> </u>
	26	Total liabilities. Add lines 17 through 25		1231.	26	1152.
		Organizations that follow SFAS 117 (ASC 958	), check here ▶ 🔲 and │		.	1
S		complete lines 27 through 29, and lines 33 an	d 34.			
ĕ	27	Unrestricted net assets		<u> </u>	27	
Fund Balances	28	Temporarily restricted net assets			28	
ğ	29	Permanently restricted net assets	}		29	<del> </del>
Ē		Organizations that do not follow SFAS 117 (A	SC 958), check here ▶ 🗶 📗			
		and complete lines 30 through 34.			.	
ets	30	Capital stock or trust principal, or current funds		0.	30	0.
\ss	31	Paid-in or capital surplus, or land, building, or ed		0.	31	0.
Net Assets or	32	Retained earnings, endowment, accumulated in	come, or other funds	1125800.	32	1155019.
Ž	33	Total net assets or fund balances		1125800.	33	1155019.
	34	Total liabilities and net assets/fund balances		<u>1127031.</u>	34	1156171.
						Form <b>990</b> (2018)

orn	1990 (2018) Terrebonne Parish Farm Bureau, Inc.	72-067989	6 Ра	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		<u>3436</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	3144	
3	Revenue less expenses Subtract line 2 from line 1	3		<u> 19.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4 1	<u> 1258</u>	<u>00.</u>
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		<u>   0 .                                </u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
		o 1	<u> 1550</u>	<u> 19.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII		_,	ᆜ
1	Accounting method used to prepare the Form 990 Cash X Accrual Other	[	Yes	No
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		1	}
22	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		x
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed or	——		
	separate basis, consolidated basis, or both	'		
	Separate basis Consolidated basis Both consolidated and separate basis	1		
h	Were the organization's financial statements audited by an independent accountant?	2b		х
•	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate b	<del>-</del> -	<b>†</b>	
	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 air	udit.		
Ŭ	review, or compilation of its financial statements and selection of an independent accountant?	20		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedu	<del></del>	1	
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	1	1	
	Act and OMB Circular A-133?	За		х
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		<del>                                     </del>	<del></del> -
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
			n 990	(2018)

#### **SCHEDULE C**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

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

2018

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

-	•	arate instructions), then	Avenue Commissão Deut III				
	section 50 ne of organ	)1(c)(4), (5), or (6) organiza	tions Complete Part III	<u> </u>		Emplo	yer identification number
ITUII	ic or organ		mme Dawigh Farm	Dumanu Tna	l l	Linpio	72-0679896
Pa	rt I-A	Complete if the ord	nne Parish Farm janization is exempt und	der section 501(c)	or is a section 5	27 or	nanization
			garinzation to exempt and	201 00011011 00 1(0)	0.10 0.00000000000000000000000000000000		
_	Drawda a	. dagamation of the avenue		nal agencian activities .	m Dort IV		
		,	ation's direct and indirect politic	cai campaign activities i	n Part IV	•	
		campaign activity expendit				•	
3	voluntee	r hours for political campa	gn activities			_	
Pa	rt I-B	Complete if the ord	ganization is exempt und	ler section 501(c)(	(3)		<u> </u>
			incurred by the organization uni		<u></u>	▶\$	
		•	incurred by organization manag			<b>S</b>	
		•	n 4955 tax, did it file Form 4720				Yes No
	•	rrection made?	11 4000 tax, did it iiio 7 01111 47 20	Tor tine your			Yes No
		describe in Part IV					
	rt I-C		anization is exempt und	der section 501(c),	except section	501(c	)(3).
1	Enter the	amount directly expended	by the filing organization for se	ction 527 exempt funct	tion activities	▶\$	
			ization's funds contributed to of			_	
		unction activities		J		▶\$	
3	Total exe	mpt function expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL,	•	_	
	line 17b	•				▶\$	
4	Did the fi	ing organization file Form	1120-POL for this year?			_	Yes No
5	Enter the	names, addresses and er	nployer identification number (E	IN) of all section 527 po	litical organizations to	which	the filing organization
	made pay	yments For each organiza	tion listed, enter the amount pai	d from the filing organiz	ation's funds. Also en	nter the	amount of political
	contribut	ions received that were pr	omptly and directly delivered to	a separate political orga	anization, such as a se	eparate	segregated fund or a
	political a	ction committee (PAC) If	additional space is needed, prov	vide information in Part	IV		
	-	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr	rom	(e) Amount of political
					filing organization		contributions received and
		,			funds. If none, ente	er -U	promptly and directly delivered to a separate
							political organization
							If none, enter -0-
			<u> </u>				
		<del></del>			<u> </u>		
					-		
		<del></del>			<del></del>	-+	<u> </u>
			· <u></u>		<del> </del>		<del></del>
				1			

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Schedule C (Form 990 or 990 EZ) 2018 T Part II-A Complete if the orga	erre inizatio	<u>bonne</u> on is exe	Parish Far mpt under secti	m Bureau, Indon <b>501(c)(3) and fil</b> e	<del>72 - 72 - 72 - 72 - 72 - 72 - 72 - 72 -</del>	0679896 Page 2 election under
• section 501(h)).						
A Check ▶ 🔲 if the filing organization	on belon	gs to an aff	iliated group (and list	ın Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share	of exces	ss lobbying	expenditures)			
B Check 🕨 🔛 if the filing organization	on check	ked box A a	nd "limited control" p	rovisions apply		
Limits (The term "expendit		bying Expe neans amoi		i.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	nce pub	olic opinion (	'grass roots lobbying'			<del> </del> -
<b>b</b> Total lobbying expenditures to influe	•			·	·	<del> </del>
c Total lobbying expenditures (add line		-	ay (direct lobbying)	ŀ		
d Other exempt purpose expenditures		u 10)		İ		<del> </del>
e Total exempt purpose expenditures		o 10 and 1	4/	<u> </u>		
, , , ,	•		•	th columns		
f Lobbying nontaxable amount Enter						·
If the amount on line 1e, column (a) or	(D) IS:		bying nontaxable ar			
Not over \$500,000			the amount on line 1			•
Over \$500,000 but not over \$1,000,	000		00 plus 15% of the ex			-
Over \$1,000,000 but not over \$1,500	0,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,000		• ,
Over \$1,500,000 but not over \$17,00	000,00	\$225,00	00 plus 5% of the exc	ess over \$1,500,000		
Over \$17,000,000	Over \$17,000,000 \$1,000,000					• ;
g Grassroots nontaxable amount (ente	er 25% o	of line 1f)				
h Subtract line 1g from line 1a If zero	or less, e	enter -0-		ſ		
Subtract line 1f from line 1c If zero c						<u> </u>
J If there is an amount other than zero			line 1i, did the organi	zation file Form 4720		<u> </u>
reporting section 4911 tax for this ye			,			Yes No
(Some organizations tha	it made	a section 5		• •	f the five columns	below.
	Lobi	oying Expe	nditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount			,			
b Lobbying ceiling amount						
(150% of line 2a, column(e))		·				
c Total lobbying expenditures				-		
d Grassroots nontaxable amount					· · · · · · · · · · · · · · · · · · ·	
e Grassroots ceiling amount (150% of line 2d, column (e))			. , .		···	
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 Terrebonne Parish Farm Bureau, Inc. 72-0679896 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

- (election under section 501(h)).

For each. "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description				(b)		
of th	ne lobbying activity	Yes	No	Amo	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or					
	local legislation, including any attempt to influence public opinion on a legislative matter					
	or referendum, through the use of				!	
ē		-				
k	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	-		·		
(	: Media advertisements?	<b>-</b>				
•						
6	Publications, or published or broadcast statements?	<del>                                     </del>				
1	Grants to other organizations for lobbying purposes?					
9	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?			-		
	Total Add lines 1c through 1i				<del></del>	
2 :	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	+		,	· ·	
	of "Yes," enter the amount of any tax incurred under section 4912					
	: If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			,	, .	
	rt III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)(5	5), or se	ction	_	
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_2	X		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from rt III-B Complete if the organization is exempt under section 501(c)(4), sect				X	
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical				
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		_2b			
C	: Total		_2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex-		-			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political	-			
_	expenditure next year?		4			
5 Pai	Taxable amount of lobbying and political expenditures (see instructions)  rt IV Supplemental Information		5		<del></del>	
		- liet\ Dest II A	Limas 1 -			
	ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou uctions), and Part II-B, line 1. Also, complete this part for any additional information	p list), Part II-P	A, IIIIeS I a	110 Z (588		
เกรแ	octions), and Part IPB, line 1. Also, complete this part for any additional information					
_		<del></del>				
		<del>-</del>				

Schedule C (Form 990 or 990-EZ) 2018

## **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.

► Attach to Form 990.

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

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	<u>Terrebonne Parish</u>	<u>Farm Bureau,</u>	Inc.	<u> 72-0679896</u>		
Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other:	Similar Funds or A	Accounts. Complete if the		
	organization answered "Yes" on Form 990, Part IV, lir	ne 6				
		(a) Donor advise	ed funds	(b) Funds and other accounts		
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year		-			
5	Did the organization inform all donors and donor advisors in	writing that the assets h	eld in donor advised fun	nds		
·	are the organization's property, subject to the organization's	J		Yes No		
6	Did the organization inform all grantees, donors, and donor a		rant funds can be used a			
Ū	for charitable purposes and not for the benefit of the donor	-		·		
	impermissible private benefit?	or dorior duvisor, or io. a	ily dater purpode conten	Yes No		
Pai		ganization answered "Ye	es" on Form 990. Part IV			
1	Purpose(s) of conservation easements held by the organizat			,		
'	Preservation of land for public use (e.g., recreation or		servation of a historically	umportant land area		
	Protection of natural habitat		servation of a certified hi			
	<del></del>	F163	servation of a certified in	istoric structure		
•	Preservation of open space	fied concentation contrib	ution in the form of a co	annonyation opposition the last		
2	Complete lines 2a through 2d if the organization held a quali	med conservation contrib	oution in the form of a co			
	day of the tax year			Held at the End of the Tax Year		
	Total number of conservation easements			2a		
þ	Total acreage restricted by conservation easements			2b		
	Number of conservation easements on a certified historic st		2c			
ď	Number of conservation easements included in (c) acquired	after 7/25/06, and not or	n a historic structure			
	listed in the National Register			2d		
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or	terminated by the organ	nization during the tax		
	year -					
4	Number of states where property subject to conservation ea	_	<del></del>			
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspec	tion, handling of			
	violations, and enforcement of the conservation easements			└ Yes └ No		
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, a	nd enforcing conservati	on easements during the year		
	<b></b>					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and er	nforcing conservation ea	asements during the year		
	<b>&gt;</b> \$					
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requiremen	its of section 170(h)(4)(E			
	and section 170(h)(4)(B)(ii)?			Yes No		
9	In Part XIII, describe how the organization reports conservat		•			
	include, if applicable, the text of the footnote to the organization	tion's financial statemen	ts that describes the org	ganization's accounting for		
D	conservation easements	4 Art Historical Tre	and or Other	Similar Assats		
Pai	t III Organizations Maintaining Collections o		easures, or Other	Similar Assets.		
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under SFAS 116 (AS					
	historical treasures, or other similar assets held for public ex		search in furtherance of	public service, provide, in Part XIII,		
	the text of the footnote to its financial statements that descr					
þ	b 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, e	ducation, or research in t	furtherance of public sei	rvice, provide the following amounts		
	relating to these items					
	(i) Revenue included on Form 990, Part VIII, line 1			► \$ ► \$		
	(ii) Assets included in Form 990, Part X			<b>▶</b> \$		
2	If the organization received or held works of art, historical tre	asures, or other similar a	issets for financial gain,	provide		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to	these items			
а	Revenue included on Form 990, Part VIII, line 1			<b>▶</b> \$		
Ь	Assets included in Form 990, Part X			<b>\$</b>		

Schedule D (Form 990) 2018

		nne Parish						72-06			
Pa	rt III   Organizations Maintaining C	collections of Ar	t, His	torical Tr	easures,	or Othe	er Simil	lar Asse	ts(conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, chec	k any of the	following th	nat are a s	ignificant	use of its	collectio	n item	ns
	(check all that apply)				-						
a	Public exhibition	d		Loan or exc	hange prog	ırams					
ь	Scholarly research	е	ш	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co			-				ose in Pai	rt XIII		
5	During the year, did the organization solicit of					her sımılaı	assets	_	_		_
	to be sold to raise funds rather than to be mi								_ Yes_		No_
Pa	reported an amount on Form 990, Pal	-	ete if the	e organizatio	on answered	l "Yes" on	Form 99	0, Part IV,	line 9, o	r	
1a	Is the organization an agent, trustee, custod		lary for	contribution	ns or other a	assets not	ıncluded				
	on Form 990, Part X?		, , ,					Г	Yes	Γ_	No
h	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowina i	table							
	Too, oxplain the arrangement are are	and complete the to	g						Amoun	 it	
С	Beginning balance						1c	l	- 7 1110011		
d	Additions during the year						1d				
	Distributions during the year						1e	<del> </del>			
e	- •						1f	$\vdash$			
f O-	Ending balance	arm 000 Dart V lina	01 for		ustadial aga	ount linbil			Yes		7
	Did the organization include an amount on Fi							L	_ res	 	_  No □
Pai	If "Yes," explain the arrangement in Part XIII  t V Endowment Funds. Complete i										┵
I G	Endownient   dilds. Complete				(c) Two ye			voare back	(a) Four		haak
		(a) Current year	(b) F	rior year	(c) Two ye	ars back	(a) Three	years back	(e) Fou	years	раск
1a	Beginning of year balance						<del></del>		<del> </del>		
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities					Ï			Ĭ		
	and programs										
f	Administrative expenses										
g	End of year balance								<u> </u>		
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1	g, column (a	a)) held as						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Temporarily restricted endowment	<u>~~~</u>									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are there endowment funds not in the posse	•	ation tha	at are held a	nd administ	tered for th	ne organi	zation			
	by						J		ſ	Yes	No
	(i) unrelated organizations								3a(i)		· · · ·
	(ii) related organizations								3a(ii)	 	<del></del>
h	b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?								3b		
4	Describe in Part XIII the intended uses of the	•							_ 05		
	t VI Land, Buildings, and Equipm		AALLIGE IC	idildə		<u></u>					
	Complete if the organization answered	d "Yes" on Form 990	, Part I\	/, line 11a S	See Form 99	0, Part X,	line 10				
	Description of property	(a) Cost or ot	ther	(b) Cost	or other	(c) Ac	cumulate	ed	(d) Boo	k valu	е
		basis (investm	nent)	basis	(other)	dep	reciation				
1a	Land				84742.					<u>84</u> 7	42.
b	Buildings			4	54482.		2127	29.	2	417	53.
	Leasehold improvements										
d	Equipment			<del></del>	55990.		391	64.		168	26.
	Other				17209.			54.		$\frac{131}{1}$	
	Add lines 12 through 10 (Column (d) must o	aval Come 000 Part				·				561	

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 Terrebonne Parish Fa	rm Bureau, Inc.	72-0679896 Page <b>4</b>
Part XI Reconciliation of Revenue per Audited Financial		
Complete if the organization answered "Yes" on Form 990, Part		
Total revenue, gains, and other support per audited financial statement		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII.)	2d	
e 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		
to the second se	4a	
5 (20)	4b	
A CONTRACTOR OF THE CONTRACTOR	<u> 40  </u>	
	121	5
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line Part XII Reconciliation of Expenses per Audited Financia	al Statements With Expens	
		es per ricturii.
Complete if the organization answered "Yes" on Form 990, Part	TV, 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	1 - 1	
a Donated services and use of facilities		
<b>b</b> Prior year adjustments	<u>2</u> b	
c Other losses	2c	
d Other (Describe in Part XIII )	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII )		
c Add lines 4a and 4b		4c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I,	line 18)	5
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a	and 4, Part IV, lines 1b and 2b, Pa	rt V, line 4, Part X, line 2, Part XI,
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to prov	ride any additional information	
		<del></del>
		<del></del>
	<del></del>	
		<u></u>
	<del></del>	0 1 1 1 5 /5 000 0040

### **SCHEDULE 0**

(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.

Open to Public

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

	Terrebonne Parish Farm Bureau, Inc.	<u> 72-0679896                                    </u>
Form 990, Part	VI, Section A, line 2:	
Board members I	Brian and Tom Ellender have a family relati	onship. Board
members Lloyd,	Claude and Ronnie Triche have a family rel	ationship.
Form 990, Part	VI, Section A, line 6:	
The organization	on has members and is a non profit organiza	tion.
Form 990, Part	VI, Section A, line 7a:	
The members of	the organization elect the governing board	•
Form 990, Part	VI, Section A, line 7b:	
The actions of	the governing board are approved by the me	mbers on a yearly
basis when elec	ctions take place.	
Form 990, Part	VI, Section B, line 11b:	
The Form 990 is	s reviewed at the next regularly scheduled	board meeting.
Form 990, Part	VI, Section C, Line 19:	
Inspection of t	the financial statements and governing docu	ments currently in
place are avail	lable upon request at an office of the organ	nization.
		^
<del>_</del>		