OMB No 1545-0047

2016

Open to Public

Inspection

20 17 D Employer identification number

**Paid** 

Preparer

**Use Only** 

Print/Type preparer's name

Oklahoma Farm Bureau

For Paperwork Reduction Act Notice, see the separate instructions.

Firm's address ▶ 2501 N Stiles, Oklahoma City Ok 73105

May the IRS discuss this return with the preparer shown above? (see instructions)

Shelley Braniff

Firm's name

Department of the Treasury Internal Revenue Service

For the 2016 calendar year, or tax year beginning

Check if applicable C Name of organization Rogers County Farm Bureau

		Address change Doing business as 73-0660293								73-0660293		
		Name c	Name change Number and street (or P O box if mail is not delivered to street address) Room/suite							E Telepho	ne number	
	V	Initial re	al return 1126 W Will Rogers								918-341-5112	
		Final retu	nal return/terminated City or town, state or province, country, and ZIP or foreign postal code									
		Amende	ed return	Claremore, Ok 740	17					<b>G</b> Gross re	ceipts \$ 140,068.6	
		Applicat	tion pending	F Name and address of	principal officer	Ray Heldermon			H(a) Is this a gro	up return for	subordinates? Yes No	
		• •		12321 E. 380 Rd. Cl		17		_	1		s included? Yes No	
	<u> </u>	Tax-exe	empt status	501(c)(3)		) ◀ (insert no ) ☐ 4947	(a)(1) or	527 <b>/</b>			list (see instructions)	
	J	Website					0		H(c) Group e	exemption	number ▶ 1480	
	K	Form of	organization	Corporation Trus	t Association [	Other ▶	L Yea	r of formati	on 1942	M State	of legal domicile Ok	
	P	art I	Summ	ary			1			<del>'</del>		
		1	Briefly de	escribe the organiza	ation's mission of	or most significant ac	ctivities:	Agricul	tural Member	ship Org	janization	
	9	1		-								
	lan	ļ										
	Activities & Governance	2	Check th	is box ▶ 🗌 if the o	rganization disco	ontinued its operatio	ns or dis	sposed o	f more than	25% of	its net assets.	
	ő	3	Number (	of voting members	of the governing	body (Part VI, line	1a)			3		
	9	4	Number of	of independent vot	ing members of	the governing body	(Part VI,	line 1b)		4		
	ties	5	Total nun	nber of individuals	employed in cal-	endar year 2016 (Pa	rt V, line	2a) .		5		
	₿	6	Total nun	nber of volunteers	estimate if nece	ssary)				6		
	Ac	7a				VIII, column (G), line				7a	118756.5	
		b	Net unrel	ated business taxa	ble income from	FOR ESSENTED	1	<u> </u>		7b	41554.7	
							S	1 L	Prior Yea	ir	Current Year	
	<b>o</b>	8	Contribut	tions and grants (Pa	art VIII, line 1h🏣	'JAN' 1' 6' 201	8 S	√ L	1	2928.00	12045 0	
	Pun	9	Program	service revenue (Pa	art VIII, line 2 <mark>g</mark> 99	JAIV I U LO	PS -	1 - L				
	Revenue	10	Investme	nt income (Part VIII	l, column (A),∏ine	s.3,4, and 7d)	<u> </u>	1 L		5886.12	3443 5	
	ш	11				6d, <b>QC92, 40c,</b> and		} . [_	10	7318.45	118756 5	
		12				equal Part VIII, colum		ie 12)	12	6132.57	134245 1	
		13				olumn (A), lines 1-3)						
		14		paid to or for memb				· ·  _	2	24206 48 22		
,	S	15				fits (Part IX, column (A	•	5–10)	3	6677.71	48910 4	
	Expenses	16a				in (A), line 11e) .			Carrier State of the Control	Wandson of the last	A. S. STRONG S. D. AV. S.	
	Š	b		draising expenses (	•			<b>E</b>	自場信等		學是認識的	
	_	17		penses (Part IX, col		· ·		· ·		9527.51	48110.3	
		18				al Part IX, column (A)	, line 25)	) · ⊢		0411.70	119168.8	
		19	Revenue	less expenses. Sul	otract line 18 fro	m line 12	<u>-:-:</u>	<del> </del> -		279.13)	15076 30	
	S or		<b>-</b>	. (5 . ) ( . 40)				<u> </u>	eginning of Cun		End of Year	
	Sset	20		ets (Part X, line 16)				· ·	77	7639 35	792069.7	
	Fund /	21	Total liabilities (Part X, line 26)							681.50	35.50	
		22			. Subtract line 2	1 from line 20 .	<del>· · · ·</del>	للنب	77	6957.85	792034.2	
		art III		ure Block		<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	
						r) is based on all informati					ny knowledge and belief, it i	
		·	1	Ca Holder	What	<u> </u>				1-8	-18	
	Sig	ın	Sign	ature of officer	7/100	0 0			Date		- / -	
	He			Pau Helder	mon Rog	Us là Pres.			Date	,		
			Type	or print name and title	11011	2 00 7 1 2 2 2					<del></del>	
			1, ,,,,,	,								

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2016, and ending

Date

Cat No 11282Y

Check I If

self-employed

Firm's EIN 🕨

Phone no

73-0660293

✓ Yes 
☐ No

918-341-5112





CDO

Parit	W Checklist of Required Schedules			age 0
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1_		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_	1	
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	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? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V$	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
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 Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	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 .	11f		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
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 foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<b>√</b>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<b>▼</b>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<b>√</b>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<b>√</b>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
		<u> </u>		

Part	Checklist of Required Schedules (continued)			
· 20 -	Did the expensation energies are as more hospital facilities? If "Ves." complete Schodule U	[00-	Yes	No
zu a b	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		1
21	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	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		<b>✓</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		<b>√</b>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>&gt;</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<b>√</b>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		<b>√</b>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u>▼</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			<del>-*</del> -
	Part VI	37		<b>✓</b>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38		<b>✓</b>
		Form	1 <b>990</b>	(2016)

Form **990** (2016)

			-9
Part			
<u> </u>	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u>.                                     </u>
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	Yes	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Lib		
2a	reportable gaming (gambling) winnings to prize winners?	1c	
b	Statements, filed for the calendar year ending with or within the year covered by this return  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	
За	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a ✓	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i> .	3b 🗸	<del> </del>
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	1
b	If "Yes," enter the name of the foreign country: ▶	<b>建建</b>	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1
c	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c	_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1	
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a	<b>-</b>
7	gifts were not tax deductible?	6b	<b>海</b>
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	
b b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b 7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	1300 765	Et 1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f	<b>⊢</b>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		245
_	sponsoring organization have excess business holdings at any time during the year?	8	1.40至天1
9	Sponsoring organizations maintaining donor advised funds.		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
Ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	1,000 34 6
10	Section 501(c)(7) organizations. Enter:		
a b	Initiation fees and capital contributions included on Part VIII, line 12		¥.
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 amounts due or received from them)		340
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-	TO L
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	##E
b			
	the organization is licensed to issue qualified health plans	<b>13.</b>	
C	Enter the amount of reserves on hand	IN EST	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	
b	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14h	1

	0 (2016)			Page <b>o</b>
Part				
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			ions.
	Check if Schedule O contains a response or note to any line in this Part VI			<u> </u>
<u>Secti</u>	on A. Governing Body and Management		- <del></del>	<del></del>
	- n	· ·	Yes	No.
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing body, or			
	of the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent .    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		人
3	Did the organization delegate control over management duties customarily performed by or under the direct			<del>                                     </del>
•	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6	<b>✓</b>	
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	✓	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			١.
	stockholders, or persons other than the governing body?	7b	Hand, 19	<b>√</b>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	224	氢酸	Eile I
a	The governing body?	8a	<b>√</b>	<del> </del>
ь	Each committee with authority to act on behalf of the governing body?	8b	✓_	├
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	İ	1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	<del></del> _
	on bit divided (17th december 2 toqueste mentional about periode the required by the internal received		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	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		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		經過	壁
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		<u> </u>
13	Did the organization have a written whistleblower policy?	13	<u> </u>	<b>/</b>
14 15	Did the organization have a written document retention and destruction policy?	14	DIE KL	<b>₩</b> ££.?
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	THE EX	1
b	Other officers or key employees of the organization	15b		<del>-</del>
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			181.1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		3	
	with a taxable entity during the year?	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	No.	操御	
				4
	organization's exempt status with respect to such arrangements?	16b	l	
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed No. Oklahoma  Section 6104 required on appropriate to probe the Forms 1003 (or 1004 if applicable), 000, and 000 T. (Contraction).		-1/61	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(	c)(3)s	only)
	•			
19	Own website Another's website Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte	aroc+	nolia.	, a
13	financial statements available to the public during the tax year.	<i>51</i> <del>C</del> Sl	holic	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	orde	. 🏲	
	Oklahoma Farm Bureau - 2501 N Stiles Oklahoma City, Ok 73105	Joius	. –	

Form	990	(201	6

Part VII	Compensation of Officers, Directors,	Trustees, Key Employees,	<b>Highest Compensated</b>	Employees, and
•	Independent Contractors			

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated 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 no	r any relate	d org	anız	atio	n c	ompe	nsa	ited any currer	t officer, director	, or trustee.
				(0	<b>C)</b>					
(A)	(B)	l			ition			(D)	(E)	(F)
Name and Title	Average					than one is both		Reportable	Reportable	Estimated
Tanto and This	hours per					or/trust		compensation	compensation from	amount of
	week (list any						<del>-</del>	from	related	other
	hours for	출할	ışt	Officer	(é)	夏草	Former	the	organizations	compensation
	related organizations	وَ قَ	重	ěř	eg .	loy	ē	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	ğ <u>a</u>	[ 읊		몽	% 5		(***-2/1099-WISC)		and related
	line)	Individual trustee or director	1 11		Key employee	퓛	İ			organizations
		tee	Institutional trustee		~	Sne		1		
	-		ě			Highest compensated employee				
(4) =										
(1) Ray Heldermon - President	11	,		,					_	_
	<del> </del>	/	<u> </u>	✓	<u> </u>	ļ	-	0	0	0
(2) Joe Tanner - Vice President	11		1		1		ł	ł		
				✓			_	0	0	0
(3) E.J. Snider - Director	11			ĺ			ĺ			
		1		<b>√</b>				l 0	o	0
(4) Tommy Orr - Treasurer	1	T					Π			
	†	1		1				٥	اه	0
(5) Tommy Orr - Secretary	1	<del></del>			_	<u> </u>		<u>_</u>		<u>~</u> <u>~</u>
(a) roming on - Secretary	<del>-</del> }	1		1					اه	o
(6) 1 D d D.			$\vdash$	•	├─	<del> </del>	$\vdash$	<u>v</u>		
(6) Joe Parker - Director	<del> 1</del>	,					ļ	_	ا	_
	ļ	<b>/</b>		<u> </u>			-	0	0	0
(7) Dennis Fry - Director	<u> </u>			١,			ļ	1	l l	
	ļ	<b>✓</b>			_			0	0	0
(8) Alvin Froese - Director	1									
		1						0	0	0
(9)	1									
	T	1								
(10)				-	-	_	-			
	<del></del>	ł								
(11)	<del> </del>	<del> </del>	-		$\vdash$	<b></b>	$\vdash$	<del></del>		<del></del>
<u>(11)</u>	<b></b>							Ì		
(12)		<b></b> -		_	$\vdash$					
3t	<del> </del>	1					l	1	]	
(13)	<del>                                     </del>		$\vdash$		<u>├</u>		-	<u> </u>		
1.9	† <b></b>	1			l		1			
(14)	<del> </del>	<del> </del>	$\vdash$		-	<b>-</b>	$\vdash$	<del></del>		
(17)	<b>†</b> -	ĺ					ĺ	1		

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees	s, aı	nd H	lighes	st C	ompensated E	mployees (	(continu	ed)
•					-	<b>C)</b>			[			
	(A)	(B)	(do n	ot ch		ition more	than o	one	(D)	(E)		(F)
	Name and title		Average box, unless person is both					an	Reportable compensation	Reportat compensatio	- 1	Estimated amount of
		hours per week (list any		_				<u> </u>	from	related		other
		hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizati (W-2/1099-N		compensation from the
		organizations	ecto	ution	4	mg !	est c	[ 역	(W-2/1099-MISC)		,,,,,,	organization
		below dotted line)	Ť	nai ti		oye	omp					and related organizations
			stee	uste	ŀ	"	ensa	İ				3
				ñ			ited					
(15)												
(16)					_			$\vdash$				
(17)			<u> </u>					-		· 		
								L				
(18)		<u> </u>										
(19)												
(20)					_	_		-				
(21)						<u> </u>			-			
32.17												
(22)												
(23)												
(24)								-			_	
(05)						_						
(25)												
1b	Sub-total							<b>&gt;</b>				
c	Total from continuation sheets to Part	VII, Sectio	n A									
d	Total (add lines 1b and 1c)							<u> </u>	<u> </u>			
2	Total number of individuals (including but reportable compensation from the organization)		to th	ose	list	ed a	above	e) w	ho received m	ore than \$1	00,000	of
									<del> </del>			Yes No
3	Did the organization list any former of employee on line 1a? If "Yes," complete of										ensated 	3
4	For any individual listed on line 1a, is the										om the	
	organization and related organizations											
	ındıvıdual											4 🗸
5	Did any person listed on line 1a receive of for services rendered to the organization											5 <b>4</b>
Section	on B. Independent Contractors											1 - 1 -
1	Complete this table for your five highest	compensate	ed inc	depe	end	ent	contr	acto	ors that receive	ed more tha	n \$100	),000 of
	compensation from the organization. Repyear	ort compe	nsatio	on fo	or th	ne c	alend	ar y	ear ending wit	h or within	the org	anization's tax
	(A) Name and business add	ress							(B) Description of s	enuces		(C) Compensation
	Marie and busiless add							<u> </u>		C. 11063		
												<del></del>
	Table and a second second				<del></del>	<del></del>		L			2076 AND 12	<b>E</b> which the design to the second
2	Total number of independent contractor							th	ose listed abo	ove) who		

Pari	Part VIII Statement of Revenue								
BRUFF 18	maric states	Check if Schedule O	contains a res	ponse or note to				· · · · · ·	
					(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Grants</b> nounts	1a	Federated campaigns	i <u>1a</u>						
ts, Grants Amounts	b	Membership dues .	<u>1b</u>	12045.00				5,617,11	
	С	Fundraising events .	undraising events 1c						
Gifts, ilar Ar	d								
imi	е	Government grants (con							
tioi er S	f	All other contributions, gi							
흋美		and similar amounts not incl	<u></u>	<u> </u>					
Contributions, Giff and Other Similar	g	Noncash contributions includ							
	<u>h</u>	Total. Add lines 1a-1	<u> </u>	Punisana Carla	12045.00				
ure	_			Business Code		it is a contract		S = 123/10 101/2 2	
eve	2a			ļ		<del> </del>			
e E	b								
Ž	C			<u> </u>					
Š	a								
rau	e	All other program con				<del>                                     </del>			
Program Service Revenue	g	All other program sentence Total. Add lines 2a-2				北 <b>州学校</b> 美国共享的			
	3	Investment income				TO THE RESERVE THE PARTY OF THE	(1) 10 mm (1) 1	<b>高水温度型 网络新亚洲 (40. 8.4 可能03.3)</b>	
		and other similar amo	•	_	3443.57			3443 57	
	4	Income from investment		ond proceeds▶					
,	5	Royalties							
	_	,	(i) Real	(ii) Personal					
	6a	Gross rents	34239.96						
	b	Less rental expenses	5823.46						
	c Rental income or (loss		28416.50						
	d	Net rental income or (		•	28416.50		28416.50		
	7a	Gross amount from sales of	(ı) Securities	(ıı) Other					
		assets other than inventory			4505	1 3			
	b	Less cost or other basis							
		and sales expenses							
	С	Gain or (loss) .	L						
	d	Net gain or (loss) .		<u>.</u>				Annual Control of the Control of	
enne	8 <b>a</b>	Gross income from fuevents (not including \$	ındraısıng						
ě		of contributions reporte	ed on line 1c).				94.54		
Other Reven			· · · · a						
Ţ.	b	Less: direct expenses	-						
O	C	Net income or (loss) f		events . ►					
	9a	Gross income from ga	aming activities.					AND THE PARTY OF T	
		See Part IV, line 19 .	a	·					
	b	Less: direct expenses	s <b>t</b>		a leading that				
	С	Net income or (loss) f		ivities ▶					
	10a						4 21	<b>建筑</b>	
		returns and allowance							
		Less: cost of goods s							
	С	Net income or (loss) for Miscellaneous R						Constitution in the control of the c	
	44-	·	evenue	Business Code	Etlesis II	<u> 119 i Siros</u>			
	11a b	Office Commissions		524113	3072.46		3072.46		
	C	Office Commissions		524126	84182.13		84182.13		
	d	Salary Reimbursement All other revenue		524126	3085.50	-	3085.50		
	e	Total. Add lines 11a-	11d		90240.00			P. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C. 18 C.	
	12	Total revenue. See in			134245.16		118756.59		
					137240.10	12045.00	110/30.39	3443 57 Form <b>990</b> (2016)	

Part IX	Statement	of Functional	<b>Expenses</b>

Section	in 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se or note to any li	ne in this Part IX	<u> </u>	🗆
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
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.				*: (1)
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	22148.01			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	45548.34			
7 8	Other salaries and wages				
9	Other employee benefits				
10	Payroll taxes	3362.08		<del> </del>	<del> </del>
11 a	Fees for services (non-employees):  Management				
b	Legal			· <del></del>	
c	Accounting	360.00			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17		医翼型 医蛋白	THE ENGINEERS	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	1915 54			
13	Office expenses	5500 98			
14	Information technology				ļ
15	Royalties			<del> </del>	ļ
16	Occupancy	18075.41			
17 18	Travel		<del></del>	<del> </del>	
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest	ļ	<u> </u>	<del>  -</del>	<del> </del>
21	Payments to affiliates		<del></del>	<u> </u>	<del></del>
22	Depreciation, depletion, and amortization .	8399.15			
23	Insurance	8704.21		·	<del> </del>
24	Other expenses. Itemize expenses not covered				AND MARKET
	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 O.)	Filling Head			
a	Federal Income Tax	3581 39		<u> </u>	
b	State Income Tax	1433 00		<del> </del>	
C C	Charitable Contributions	140.69	<u>.                                    </u>		
d	All other expanses	<u> </u>		<del>                                     </del>	ļ
e 25	All other expenses	110160 00			<del></del>
26	Joint costs. Complete this line only if the	119168.80		<u> </u>	<del>                                     </del>
_ <del>-</del>	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)				

ĮΡ	art X	Balance Sheet			_	
	•	Check if Schedule O contains a response o	r note to any line in this Pa	ırt X		
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing		135307.89	1	156134 37
	2	Savings and temporary cash investments .		392177.18	2	395614.96
	3	Pledges and grants receivable, net			3	
	4				4	
	5	Loans and other receivables from current and	former officers, directors,			
		trustees, key employees, and highest co	ompensated employees			
	1	Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified pers	sons (as defined under section		. y - c5t	
		4958(f)(1)), persons described in section 4958(c)(3)(B), ai				
	1	sponsoring organizations of section 501(c)(9) volur	ntary employees' beneficiary		1 S	<b>经工业。</b> 其
ţ		organizations (see instructions) Complete Part II of Sche	edule L		6	
Assets	7	Notes and loans receivable, net			7	
Ä	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges .	, .,	10521.62	9	9307 23
	10a	Land, buildings, and equipment: cost or	] ]	数目存储的数据		
		other basis. Complete Part VI of Schedule D	10a 501,111 29		3	
	b	Less: accumulated depreciation .	10b 279,098.14	239632.66	10c	231013 15
	11	Investments—publicly traded securities			11	
	12	Investments—other securities. See Part IV, line			12	
	13	Investments-program-related See Part IV, line	11		13	
	14	Intangible assets			14	
	15				15	
	16	Total assets. Add lines 1 through 15 (must equ		777639.35	_	792069.71
	17	Accounts payable and accrued expenses		681.50		35.50
	18	Grants payable			18	<u> </u>
	19	Deferred revenue			19	
	20	•			20	ļ
	21	Escrow or custodial account liability. Complete			21	
ies	22	Loans and other payables to current and for				
¥		trustees, key employees, highest comper			R	
Liabilities		disqualified persons Complete Part II of Schedi			22	
_	23	Secured mortgages and notes payable to unrela			23 24	
	24	Unsecured notes and loans payable to unrelated	•		24	<del> </del>
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines				
	ļ	of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		681.50	$\vdash$	35.50
	<del></del> -	Organizations that follow SFAS 117 (ASC 958	), check here ► 🗸 and			35.50
es		complete lines 27 through 29, and lines 33 an				
Ĕ	27	Unrestricted net assets		endinger stategier in det bliget eine die	27	A STATE OF THE STA
<b>Fund Balances</b>	28				28	
Q E	29	•		<del></del>	29	
ڄ	1	Organizations that do not follow SFAS 117 (ASC 9			H Y	
Z.		complete lines 30 through 34.	<u> </u>			
Net Assets or	30	Capital stock or trust principal, or current funds			30	The state of the s
Se	31	Paid-in or capital surplus, or land, building, or ed			31	
As	32	Retained earnings, endowment, accumulated in		776957.85	32	792034.21
Š	33	Total net assets or fund balances		776957.85		792034 21
_	34	Total liabilities and net assets/fund balances .	<u> </u>	777639 35		792069.71
-	_		·- <del></del> -			F 000 (2243)

Page	1	2

	90 (2016)			Page <b>12</b>
Par	XI Reconciliation of Net Assets			
•	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	<u>.</u>	<u> 🗆</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		134245 16
2	Total expenses (must equal Part IX, column (A), line 25)	2		119168 80
3	Revenue less expenses. Subtract line 2 from line 1	3		15076.36
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		776957 85
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		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	į		
	33, column (B))	10		792034.21
Part				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u> </u>	
1	Accounting method used to prepare the Form 990: Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in		Yes No
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:		2a	
þ	Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	 ed on a	2b	
C	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	2c	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	•		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		3a	1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	
			Form !	990 (2016)

### **SCHEDULE C** (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

	ngameadon answered Tee	, on rount boo, raitiv, mic o (riox)	rax, (ccc ccparati		<b>LL</b> , I dit V, III o ooo (I lox)
Гах) (s	ee separate instructions), t	hen			
	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III		1 <b></b>	
vame o	of organization			Employer ider	ntification number
	County Farm Bureau	<del> </del>	.: =0.44		73-0660293
Part		e organization is exempt und			
1	definition of "political car		·		·
2		y expenditures (see instructions) .			
3		cal campaign activities (see instruc			
Part	<u>-</u>	e organization is exempt und			
1		excise tax incurred by the organiza			) 
2	•	excise tax incurred by organization	•		
3	•	ed a section 4955 tax, did it file For	-		= =
4a					LYes LNo
b	If "Yes," describe in Part		· · · · · · · · · · · · · · · · · · ·		
Part		e organization is exempt und			<u>(c)(3).</u>
1		ly expended by the filing organiz		-	
_					
2		filing organization's funds contrib	_		
_	527 exempt function acti			<b>▶</b> \$	
3		expenditures. Add lines 1 and 2.			
4		n file <b>Form 1120-POL</b> for this year?		· · · · · · · · ·	
5		ses and employer identification nur			
		ents For each organization listed,			
		ontributions received that were proi fund or a political action committed			
	as a separate segregated	Tund or a political action committee	e (PAC) II addition	iai space is fieeded, provi	T T T T T T T T T T T T T T T T T T T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Schedule	C./Form	990 or	990-FZ	2016
Juliedale	CALCUIII	33U U	330-LZ	2010

Sch	edule C <sub>*</sub> (Form 990 or 990-EZ) 2016					Page 2
Pa	rt II-A Complete if the organizati section 501(h)).	on is exempt	under section 5	01(c)(3) and file	d Form 5768 (el	
	Check ► ☐ if the filing organization be name, address, EIN, expense.	enses, and sha	re of excess lob	byıng expenditui	res).	oup member's
В	Check ► ☐ If the filing organization c	hecked box A	and "limited con	trol" provisions a	apply.	
		bying Expendit		- · · · · · · · · · · · · · · · · · · ·	(a) Filing	(b) Affiliated
	(The term "expenditures" r	neans amounts	paid or incurred	.)	organization's totals	group totals
1	a Total lobbying expenditures to influence	e public opinion	(grass roots lobby	/ıng)		
	b Total lobbying expenditures to influence	e a legislative bo	ody (direct lobbyin	g)		
	c Total lobbying expenditures (add lines	1a and 1b) .				
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (ad	dd lines 1c and 1	ld)			
	f Lobbying nontaxable amount. Enter columns.	the amount f	rom the following	g table in both		
	If the amount on line 1e, column (a) or (b)	s: The lobbying	nontaxable amoun	nt is:		
	Not over \$500,000	20% of the ar	mount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	s 5% of the excess of	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000				<b>国</b> 地位置于1000
	g Grassroots nontaxable amount (enter 2	25% of line 1f)				
	h Subtract line 1g from line 1a If zero or	less, enter -0-				
	i Subtract line 1f from line 1c If zero or I					
	j If there is an amount other than zero		1h or line 1i, did	the organization	file Form 4720	
	reporting section 4911 tax for this year	r?	· · · · · · · ·	· · · · · · ·		Yes No
	(Some organizations that made a se	ection 501(h) ele	Period Under sec ection do not hav ructions for lines	e to complete all	of the five colum	ns below.
	Lobbyin	g Expenditures	During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	(e) Total
2	a 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					

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT fine (election under section 501(h)).	iled	Form	i 5768	I	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)		(b)	
	option of the lobbying activity.	Yes	No	A	mount	t
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:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?	V-1/2	- er - 30			
j	, and the same of	科制等	*******	Ball Carron		77 W.H
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	* in -g-300	करमञ	954		#(A)
b	If "Yes," enter the amount of any tax incurred under section 4912		1000			
C	, , , , , , , , , , , , , , , , , , ,		<b>1</b> 1	Lacren	5-7-06 U.S.	955
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<i>(E)</i>			情認等	经载
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(၁), (	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	1	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			3		1
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Ol answered "Yes."  Dues, assessments and similar amounts from members				line	3, is 
1 2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par						
Provid	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grounstructions); and Part II-B, line 1. Also, complete this part for any additional information.	ıp lıs	t); Par	t II-A, I	ines 1	and
					••	
				,	·	

#### SCHEDULE D (Form 990)

Department of the Treasury

# **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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

**2016** Open to Public

Inspection Internal Revenue Service Employer identification number Name of the organization Rogers County Farm Bureau 73-0660293 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . 1 Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . . . 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. Total number of conservation easements . 2b Total acreage restricted by conservation easements . . . . . . . . . b Number of conservation easements on a certified historic structure included in (a) . . . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? . In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 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, education, or research in furtherance of public service, provide the following amounts relating to these items: (ii) Assets included in Form 990, Part X . . . . . If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

b Assets included in Form 990, Part X .

Revenue included on Form 990, Part VIII, line 1 . . . .

Page	. 2

Part	III Organizations Maintaining	Colle	ctions of	Art. His	torical 1	reasures	, or O	ther Similar	Assets	(continued)
3	Using the organization's acquisition, collection items (check all that apply):	access								
_	☐ Public exhibition			a	□ Loan	or exchang	na nroa	rame		
a b	Scholarly research									
c	Preservation for future generations			•						
4	Provide a description of the organizations		ollections :	and eynla	en how t	hev further	the or	nanization's ex	emnt n	urnose in Part
•	XIII.	(1011 3 0	Ollections (	and expit	2111 11000 0	ney rantiner		garnzanon o cx	citipt p	arpood iii i art
5	During the year, did the organization	solicit	or receive	donation	s of art	historical ti	reasure	s or other sin	odar	
•	assets to be sold to raise funds rather	r than to	o be mainta	ained as i	part of the	e organizat	ion's co	ollection? .		Yes 🗌 No
Part								<del></del>		100 110
	Complete if the organization 990, Part X, line 21.			" on For	m 990, f	Part IV, line	e 9, or	reported an a	amoun	t on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?									Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII	and comple	ete the fo	llowing to	able:			<u>-</u>	
	, ,		•		ŭ				Amour	ıt
С	Beginning balance						10	;		
d	Additions during the year						10	1		
e	Distributions during the year .						16	9		
f							11			
<b>2</b> a	Did the organization include an amoun	nt on F	orm 990, P	art X, line	21, for e	scrow or c	ustodia	l account liabil	ıty?	Yes 🔲 No
b	If "Yes," explain the arrangement in P									
Pari	V Endowment Funds.	-								
	Complete if the organization	answ	ered "Yes	" on For	m 990, I	Part IV, line	e 10.			
		(a) C	urrent year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years b	ack (e)	Four years back
1a	Beginning of year balance									
b	Contributions									
Ċ	Net investment earnings, gains, and losses		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	-						
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of t	the curr	ent year er	nd balanc	e (line 1g	, column (a	)) held	as:		
а	Board designated or quasi-endowmer	nt 🕨	-	%	_					
b	Permanent endowment ▶	%								
С	Temporarily restricted endowment ▶		%							
	The percentages on lines 2a, 2b, and	2c sho	uld equal 1	00%.						
<b>3</b> a	Are there endowment funds not in the	e posse	ession of th	ne organi	zation tha	at are held	and ad	lministered for	the	
	organization by:								_	Yes No
	(i) unrelated organizations								3	a(i)
	(ii) related organizations								. 3	a(ii)
b	If "Yes" on line 3a(ii), are the related o								. [	3b
_4_	Describe in Part XIII the intended uses			on's endo	wment f	unds.				
Part								_		
	Complete if the organization	answ	ered "Yes	" on For	m 990, F	Part IV, line	e 11a.	See Form 99	0, Part	X, line 10.
	Description of property		(a) Cost or of (investm		, , ,	or other basis other)		Accumulated epreciation	(d)	Book value
1a	Land					61500.00		ik eresi		61500 00
b	Buildings	. [				427244.13		257840.95		169403.18
c	Leasehold improvements									
d	Equipment					21367.19		21257.19		109.97
e	Other									
Total.	Add lines 1a through 1e. (Column (d) n	nust eq	ual Form 9	90, Part )	K, columr	n (B), line 10	Oc.) .	<u>.</u>		231013.15

Part VII	Investments—Other Securities		on Form	OOO Port IV Ju	o 11h Soo For	m 000 Port V line 12
	Complete if the organization ans		on Folin	(b) Book value		In 990, Part A, IIIIe 12.
	(including name of security)	y	ŀ	(b) Dook value		nd-of-year market value
(1) Financial	derivatives				<del> </del>	
(2) Closely-I	neld equity interests					
(3) Other					]	
(A)						
(B)						
(C)						
(D)						<del>.</del>
(E)	***************************************					
(F)					<b>↓</b>	
(G)	,,,				<b>}</b>	<del></del>
(H)						
	b) must equal Form 990, Part X, col (B) line 12.)					
Part VIII	Investments—Program Relate			000 David IV II-	- 110 Coo For	000 Doub V June 10
	Complete if the organization ans	swered res c	on Form		<del></del>	
	(a) Description of investment		ł	(b) Book value		fethod of valuation nd-of-year market value
(1)					<del> </del>	<del></del>
(2)	<del></del>				<del> </del>	
(3)			<del>-  </del>			
(4)						<del></del>
(5)					<del> </del>	<del></del>
(6)						
(7)						
(8)						
(9)						
Total. (Column (	b) must equal Form 990, Part X, col (B) line 13) 🕨					<b>公司、188</b> 多三二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
Part IX	Other Assets.					
	Complete if the organization ans		on Form	990, Part IV, lir	ne 11d. See For	
		(a) Description				(b) Book value
(1)						<del></del>
(2)						<del> </del>
(3)					<del></del>	<del> </del>
(4)				<del></del>		<del> </del>
(5) (6)						<del></del>
(7)					<del>,</del>	<del> </del>
(8)						<del> </del>
(9)		·				<del> </del>
Total. (Colui	mn (b) must equal Form 990, Part X, c	ol (B) line 15.)				•
Part X	Other Liabilities.					
	Complete if the organization ans	wered "Yes" c	n Form	990, Part IV, lir	ne 11e or 11f. S	ee Form 990, Part X,
	line 25					
1.	(a) Description of liability	(b) Book	value			
(1) Federal in	come taxes					
(2)						
(3)						
(4)						
(5)	······································					
(6)		<b></b>				
(7)		<b></b>				
(8)		<del> </del>				
(9)	a) must aqual Form 000 Part V and 101 for 051 h	<del> </del>				
	n) must equal Form 990, Part X, col. (B) line 25)	I do the tout of the	1 foot1-	to the even		
organization's	uncertain tax positions. In Part XIII, prov s liability for uncertain tax positions unde	r FIN 49 (ASC 74)	TIOULHOLE	to the organization	ii s iinanciai staten	nents that reports the
		· · · · · · · · · · · · · · · · · · ·	J. OHECK	iore ii riie revi oli l	ine locatore has be	sen brownen in Latt Yill [7]

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Return.
1	Total revenue, gains, and other support per audited financial statements	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1
a		A Company
b b		
c	Donated services and use of facilities	
d	Other (Describe in Part XIII.)	
e	Add lines 2a through 2d	
3		2e 3
4	Subtract line <b>2e</b> from line <b>1</b>	3
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	-
c	Add lines <b>4a</b> and <b>4b</b>	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	er return.
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	
a	Donated services and use of facilities	
b	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIII.)	
е	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:	
	, , . = -,	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
a b	Investment expenses not included on Form 990, Part VIII, line 7b 4a  Other (Describe in Part XIII.)	
	Other (Describe in Part XIII.)	4c
_ b	Other (Describe in Part XIII.)	4c 5
b c 5 Part	Other (Describe in Part XIII.)	5
b c 5 Part Provid	Other (Describe in Part XIII.)	5 p; Part V, line 4; Part X, line
b c 5 Part Provid	Other (Describe in Part XIII.)	5 p; Part V, line 4; Part X, line
b c 5 Part Provid	Other (Describe in Part XIII.)	5 b; Part V, line 4; Part X, line information.
b c 5 Part Provid	Other (Describe in Part XIII.)	5 b; Part V, line 4; Part X, line information.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.
b c 5 Part Provid	Other (Describe in Part XIII.)	5; Part V, line 4; Part X, line offormation.

Schedule D.(For	m 990) 2016	Page <b>5</b>
Part XIII	Supplemental Information (continued)	
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### **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.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016 Open to Public Inspection **Employer identification number** 

OMB No 1545-0047

Rogers County Farm Bureau	73-0660293		
The Organization does not have stockholders but does have members. There are two types of membe	rs. One is an Associate		
member and the other a Voting member An Associate member includes someone who runs or operat			
gross agricultural income is less than half their total income. An associate member also includes som	neone working in Agribusiness.		
Someone who is not directly related to Agriculture is an Associate member. Lastly , an Associate mem	nber can hold their membership		
through a church, FFA chapter, as association, or by a corporation not producing agricultural products	s. A Voting member can be a family		
that gets the majority of its average gross income from the sale of agricultural products. A Voting mer	mber can also be held by a retired		
agricultural person living on an income or social security accrued and not employed full time in another	er occupation. A Voting member		
can also be held by a partnership or corporation receiving the majority of income from the sale of agricultural products.			
	·		