Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047 Open to Public Inspection

ΑΙ	For the	e 2012 calendar year, or tax year beginning and	enaing				
В	Check if applicable	C Name of organization		D Employer identifi	cation number		
	Addre	THE UNITED STATES PONY CLUBS, INC.					
	Name chang	Doing Business As UNITED STATES PONY CLUBS,	INC.	61-1	352306		
	Initial return		Room/suite	E Telephone numbe	er		
	Termii ated	4041 IKON WORKS FRWI, KI HOKSE FAKK		859-	254-7669		
L	Amen return	City, town, or post office, state, and ZIP code		G Gross receipts \$	3,301,286.		
	Application pendi	LEXINGTON, KY 40511-8483		H(a) Is this a group re	eturn		
	pendi	F Name and address of principal officer: DANIEL G. MURPHY		for affiliates?	Yes X No		
		SAME AS C ABOVE		H(b) Are all affiliates inc	cluded? Yes No		
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) 0	or 527	,	list. (see instructions)		
		te: WWW.PONYCLUB.ORG		H(c) Group exemption			
		organization: X Corporation Trust Association Other	L Year	of formation: 1954 N	M State of legal domicile: KY		
Pa	art I	Summary					
9	1	Briefly describe the organization's mission or most significant activities:	ONTLED	STATES PON	Y CLUBS,		
Activities & Governance		INC., DEVELOPS CHARACTER, LEADERSHIP, COL					
ēr	1	Check this box if the organization discontinued its operations or dispos					
် ဗ				3	24		
જ		Number of independent voting members of the governing body (Part VI, line 1b)			28		
ties	1	Total number of individuals employed in calendar year 2012 (Part V, line 2a)			2000		
⋛		Total number of volunteers (estimate if necessary)					
Ac	1	Total unrelated business revenue from Part VIII, column (C), line 12			0.		
	b	Net unrelated business taxable income from Form 990-T, line 34					
		Contributions and grants (Dort VIII line 11)	-	Prior Year 222,791.	Current Year 233, 733.		
ne	8	Contributions and grants (Part VIII, line 1h)		2,063,343.	1,681,224.		
Revenue	1	Program service revenue (Part VIII, line 2g)		164,428.	62,819.		
æ	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		214,238.			
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,664,800.			
	_	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.			
S	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		910,927.	-		
Expenses	16a			0.	0.		
bei	b	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 157,0	95.				
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,684,407.	1,505,303.		
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,595,334.	2,510,376.		
		Revenue less expenses. Subtract line 18 from line 12		69,466.	-364,931.		
or	3	·	Ве	ginning of Current Year	End of Year		
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		5,548,220.	5,401,517.		
t As	21	Total liabilities (Part X, line 26)		1,399,445.	1,337,083.		
콾	22	Net assets or fund balances. Subtract line 21 from line 20		4,148,775.	4,064,434.		
	art II	Signature Block					
		lties of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is		
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.			
		Signature of officer		Data			
Sig		,	. D.D. O.E.	Date			
Her	re	DANIEL G. MURPHY, PRESIDENT OF THE BOX Type or print name and title	ARD OF	GOVERNORS			
		,		Date Check	II PTIN		
D-'		Print/Type preparer's name Preparer's signature Preparer's signature		OHOOK L			
Pai		R. ALLEN NORVELL R. ALLEN NORVEL	<u>ь Г</u>	7/11/13 if self-employ	_{/ed} №00005513 35-1178661		
	parer	Firm's name BLUE & CO., LLC	n	Firm's EIN	32-TT\000T		
บริย	Only	Firm's address 250 WEST MAIN STREET, SUITE 290 LEXINGTON, KY 40507	U	Dhana na O	59-253-1100		
<u> </u>	ا جمله ب	-		Phone no. 8	11		
ivia	y trie li	RS discuss this return with the preparer shown above? (see instructions)			🔼 Yes 📖 No		

1,619,001.

Form **990** (2012)

Total program service expenses ▶

Form 990 (2012) THE UNITED S Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Λ	
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		х
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect)		
7	during the tax year? If "Yes," complete Schedule C, Part II	4		x
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		х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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?			l
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		37	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
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	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	Ha		
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	112		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1 1 a		
J	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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	17		X
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		Ь

Form 990 (2012) THE UNITED STATES Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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		X
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 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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		X
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):			37
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		Х
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If Tes, complete schedule in	29		
30	and the time of the Was II as make to Cabadula M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
٠.	If "Yes," complete Schedule N, Part I	31		х
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		Х
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		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		X
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? If "Yes," complete Schedule R, Part VI	37		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2012)

Form 990 (2012) THE UNITED STATES PONY CLUBS, II Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V										
			Yes	No							
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	Ŀ									
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b										
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming										
	(gambling) winnings to prize winners?	1c	X								
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 28	3									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X								
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)										
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X							
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			x							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?										
b	If "Yes," enter the name of the foreign country: ►										
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.										
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X							
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х							
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v							
	any contributions that were not tax deductible as charitable contributions?	6a		X							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ch									
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b									
7 a	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		Х							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b									
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required										
Ŭ	to file Form 8282?	7c		х							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d										
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g									
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h									
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting										
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		<u> </u>							
9	Sponsoring organizations maintaining donor advised funds.										
	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>							
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b									
10	Section 501(c)(7) organizations. Enter:										
	Initiation fees and capital contributions included on Part VIII, line 12	_									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities										
11	· · · · · · · · · · · · · · · · · · ·										
	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	-									
b	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									
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	.Zu									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	_									
	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										
С	Enter the amount of reserves on hand										
	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									

Pai	TVI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	a "No"	respor	ise
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a		4		
	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	3		
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	X	
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?			X
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		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		1	
	more members of the governing body?	. 7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			l
	persons other than the governing body?	. 7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		١	
а	The governing body?		X T	
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			\
800	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.)		Vac	No
100	Did the erganization have local chapters, branches, or affiliates?	10a	Yes	No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	. 102	+	
b	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	x	
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		77	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	116	+	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		+	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	120		X
13	Did the organization have a written whistleblower policy?	13	Х	
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?			
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			١
	taxable entity during the year?	16a		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			
800	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶KY, AL, AK, AR, AZ, CA, CT, DC, F	T. C	тн	TT.
17 10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only			.,
18	for public inspection. Indicate how you made these available. Check all that apply.	ij avalič	νie	
	X Own website X 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 fine	ncial	
.0	statements available to the public during the tax year.		15141	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organ	zation:	•	
-	KAREN CLARK - 859-559-0659	• • •		
	4041 IRON WORKS PKWY, KY HORSE PARK, LEXINGTON, KY 40511-8483			
23200	CEE COUEDITE O FOR FILL LIGH OF CHAMPS			(0010)

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

Check if Schedule O contains a response to any question in this Part VII

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 in		orga	aniza			mpe	nsa			
(A)	(B)		(C) Position					(D)	(E)	(F)
Name and Title	Average		not c	heck	more	than		Reportable	Reportable	Estimated
	hours per week	offi	, unle: cer an	ss pe d a d	rson irecto	is bot or/trus	h an tee)	compensation from	compensation from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	or director				Dis.		organization	(W-2/1099-MISC)	from the
	related	tee or	nstee			ensat		(W-2/1099-MISC)		organization
	organizations	al trustee	nal tr		loyee	om b				and related
	below	Individual 1	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DANIEL G. MURPHY	3 • 0 0	프	lus	#0	-S	E E	요			
(1) DANIEL G. MURPHY PRESIDENT & BOARD MEMBER	3.00	x		х				0.	0.	0.
(2) MIKE AMOS	3.00			21				0.	0.	<u> </u>
BOARD MEMBER	3.00	Х						0.	0.	0.
(3) SARAH ANDRES	3.00								•	•
BOARD MEMBER	3.00	x						0.	0.	0.
(4) MACY CARMEN	3.00									
BOARD MEMBER		х						0.	0.	0.
(5) ANNA CLADER	3.00									
CHAIRPERSON & BOARD MEMBER		х						0.	0.	0.
(6) LORELEI COPLEN	3.00									
CHAIRPERSON & BOARD MEMBER		Х						0.	0.	0.
(7) KATRINA DEANE	3.00									
BOARD MEMBER		Х						0.	0.	0.
(8) ERIC DIERKS	3.00									
BOARD MEMBER		Х						0.	0.	0.
(9) LISA EVANS	3.00							_	_	_
CHAIRPERSON & BOARD MEMBER		Х						0.	0.	0.
(10) KATIE GRAHAM	3.00									•
VP OF ACTIVITIES & BOARD MEMBER	1 2 0 0	Х		Х				0.	0.	0.
(11) CLAIRE HARMON	3.00							2 225		•
VP OF MARKETING & BOARD MEMBER	2 00	Х		Х				3,025.	0.	0.
(12) ALICIA HENDERSON	3.00	٠,,							_	0
CHAIRPERSON & BOARD MEMBER	3.00	Х						0.	0.	0.
(13) JULIE HERMAN BOARD MEMBER	3.00	x						0.	0.	0.
(14) CHRISTINA HOFFMAN	3.00	^						0.	0.	0.
BOARD MEMBER	3.00	Х						0.	0.	0.
(15) JODY HOFFMAN	3.00							0.	0.	<u> </u>
TREASURER & BOARD MEMBER	3.00	Х		х				7,000.	0.	0.
(16) STEVE JERMAN	3.00					\vdash		,,,,,,,,,		
CHAIRPERSON & BOARD MEMBER		x						0.	0.	0.
(17) ALLISON MURPHY	3.00	Ť					\vdash			
BOARD MEMBER		x						0.	0.	0.

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees			ighe	st C	ompensated Employe	es (continued)				
(A) Name and title	(B) Average hours per week	box	not c , unle	Posi heck ss per	ition more erson i	than	h an	(D) Reportable compensation from	(E) Reportable compensation from related		an	(F) timate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	frorga orga	pensa om th anizat d relat anizati	e ion ed
(18) MARGI PENCE BOARD MEMBER	3.00	x						0.	().			0
(19) NANCY PITTMAN	3.00			H	┢			•		~			
VP & BOARD MEMBER		x		х				0.	(۱. (0
(20) APRIL SMITH	3.00												
VP OF ADMINISTRATION & BOARD MEMBER		Х		Х				0.	().			0
(21) JENNIFER SWEET	3.00												
BOARD MEMBER		Х						0.	() •			0
(22) LISA WESTERFIELD	3.00												_
BOARD MEMBER	2 22	Х		Ш	$ldsymbol{f eta}$			0.	(١.			0
(23) DEB WILLSON	3.00	,,						0 175	,	.			^
BOARD MEMBER	3.00	Х		$\vdash\vdash$	⊢	_		2,175.	() •			0
(24) JOHN WURZLER VP OF INSTRUCTION & BOARD MEMBER	3.00	x		х				0.	().			0
(25) KAREN WINN	40.00				╁			0.	•	$\stackrel{\prime}{+}$			
CHIEF OPERATING OFFICER	1000	ł		х				62,486.	().		9,4	29
(26) KEVIN PRICE	40.00				\vdash							- , -	
CHIEF EXECUTIVE OFFICER		1		Х				91,011.	().	1	0,4	84
1b Sub-total						▶		165,697.) •	1	9,9	13
c Total from continuation sheets to Part VI	II, Section A							0.) •			0
d Total (add lines 1b and 1c)				<u></u>	<u></u>	<u> </u>		165,697.	().	1	9,9	13
Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	ed al	DOV	e) wl	no re	eceived more than \$100	,000 of reportable				(
												Yes	No
3 Did the organization list any former officer, line 1a? If "Yes." complete Schedule J for s	,		•	,	•	•	•	highest compensated e	. ,		3		Х
4 For any individual listed on line 1a, is the su										·			
and related organizations greater than \$150	•							•		[4		Х
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	-				-			~		Ī	5		х
Section B. Independent Contractors	pioto Coriodai	-	0, 00	1011	00,0	,,,,,				•••			
Complete this table for your five highest co	mpensated in	depe	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of compe	ensa	ation f	rom	
the organization. Report compensation for	•	-						the organization's tax	· · · · · · · · · · · · · · · · · · ·				
(A) Name and business	address	N	ONE	3				(B) Description of s	ervices	C	(C omper		n
							7						
							+						
					-								
2 Total number of independent contractors (i	ncluding but r	ot li	mite	d to		se li:	sted	above) who received m	nore than				

Form 990 (2012) THE UNITED STATES PONY CLUBS, INC.

Part VIII Statement of Revenue

		Check if Schedule O contains a respo	nse to any question	in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
छछ	1.0	Federated campaigns 1a	T		Teveride	Tevende	513, 01 514
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b		-			
اغ ج		Fundraising events 1c	-				
iffs ar A		Related organizations 1d	<u> </u>				
S, G		Government grants (contributions) 1e		-			
Sign		All other contributions, gifts, grants, and					
la pt	•	similar amounts not included above 1f	233,733.				
Öğ	q	Noncash contributions included in lines 1a-1f: \$	•				
a G	_	Total. Add lines 1a-1f	>	233,733.			
			Business Code				
9	2 a	MEMBERSHIP	900099	970,661.	970,661.		
ē Ķ		ACTIVITIES	900099	248,399.	248,399.		
S ul	С	CHAMPIONSHIPS AND EVE		216,154.	216,154.		
ran Sev	d		900099	108,745.	108,745.		
Program Service Revenue	е	ANNUAL MEETING	900099	108,591.	108,591.		
ا ء	f	All other program service revenue	900099	28,674.	28,674.		
\rightarrow	g	Total. Add lines 2a-2f)	1,681,224.			
	3	Investment income (including dividends, in		100 151			1.00 454
		other similar amounts)		108,454.			108,454.
	4	Income from investment of tax-exempt bo	•				
	5	Royalties					
	_	(i) Real	(ii) Personal	-			
		Gross rents 131, 35		-			
		Less: rental expenses 10,91 Rental income or (loss) 120,43	1.1.	-			
		. ,	79.1	120,439.			120,439.
			(3) OH	120,439.			120,439.
	<i>i</i> a	Gross amount from sales of assets other than inventory 939,97	ies (ii) Other	-			
	h			-			
	b	Less: cost or other basis	4.				
	•	and sales expenses 985,61 Gain or (loss) -45,63	55.	-			
	4	Net gain or (loss)	•	-45,635.			-45,635.
		Gross income from fundraising events (no		23,0331			13,0331
une	o a	including \$ of	`				
e e		contributions reported on line 1c). See					
Ŗ.		Part IV, line 18	a				
Other Reven	b	Less: direct expenses					
٥		Net income or (loss) from fundraising ever					
		Gross income from gaming activities. See					
		Part IV, line 19	, a				
	b	Less: direct expenses					
	С	Net income or (loss) from gaming activities	s				
	10 a	Gross sales of inventory, less returns					
		and allowances					
	b	Less: cost of goods sold	ь 159,316.				
ļ	С	Net income or (loss) from sales of inventor		36,519.	36,519.		
ļ		Miscellaneous Revenue	Business Code	10 511	10 511		
	11 a	OTHER	900099	10,711.	10,711.		
	b		_				
	C		_				
		All other revenue		10,711.			
		Total. Add lines 11a-11d Total revenue. See instructions.			1,728,454.	0	. 183,258.
	12	i viai i cvellue. Oce ilibii uciiOlib.		2 / エせい / せせい・	エ ,		·

Form 990 (2012) THE UNITED ST. Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	mplete column (A).	
	Check if Schedule O contains a respon		is Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	4 = 0 4 0 0			
	trustees, and key employees	153,498.	85,958.	53,920.	13,620.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	640.064	260 012	000 450	C 4 . E E O
7	Other salaries and wages	649,264.	362,013.	222,479.	64,772.
8	Pension plan accruals and contributions (include	11 000	6 205	2 070	0.07
_	section 401(k) and 403(b) employer contributions)	11,080.	6,205.	3,878.	997.
9	Other employee benefits	133,200.	68,607.	53,567.	11,026.
10	Payroll taxes	58,031.	32,497.	20,311.	5,223.
11	Fees for services (non-employees):				
a		103,580.		102 500	
b	<u> </u>	25,156.	13,584.	103,580.	1,258.
	Accounting	25,156.	13,304.	10,314.	1,230.
	Lobbying Drofossional fundraising convices. See Part IV line 17				
e	· •	42,012.		42,012.	
f	Investment management fees	42,012.		42,012.	
g	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	24 005	10 000	14 104	1 010
13	Office expenses	34,825.	18,909.	14,104.	1,812.
14	Information technology				
15	Royalties	EE 222	10 022	22 400	1 000
16	Occupancy	55,223.	19,833.	33,490.	1,900.
17	Travel	19,265.	10,461.	7,802.	1,002.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	24 404		24 404	
19	Conferences, conventions, and meetings	24,404. 27,003.		24,404.	
20	Interest	41,003.		41,003.	
21	Payments to affiliates Depreciation, depletion, and amortization	64,129.	34,630.	26,293.	3,206.
22	,	182,881.	182,881.	20,233	3,200.
23 24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25. column (A)	102,001.	102,001.		
	amount, list line 24e expenses on Schedule 0.)	220 002	220 002		
a	ACTIVITIES AND COMMITTE	230,083. 191,455.	230,083. 191,455.		
b	INSTRUCTION/SEMINARS	-			
C	COMMUNICATIONS OTHER EXPENSES	109,001.	109,001. 29,871.	66,164.	2 127
d		99,172. 297,114.	223,013.	24,959.	3,137. 49,142.
	All other expenses SEE SCH O	2,510,376.	1,619,001.	734,280.	157,095.
25	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization	4,310,370.	I, UIJ, UUI•	134,400.	131,033.
26					
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
	Check here if following SOP 98-2 (ASC 958-720)				Farm QQ ((2012)

Form 990 (2012)
Part X Balance Sheet

<u> </u>	Balance Sheet					
	Check if Schedule O contains a response to any	questic	on in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			719,419.	1	476,636.
2					2	67,806.
3					3	23,000.
4				7,288.	4	18,669.
5						
	trustees, key employees, and highest compensa	ted em	oloyees. Complete			
	Part II of Schedule L				5	
6	Loans and other receivables from other disquali					
	section 4958(f)(1)), persons described in section					
	employers and sponsoring organizations of sect	ion 501	(c)(9) voluntary			
	employees' beneficiary organizations (see instr).	ete Part II of Sch L		6		
7	Notes and loans receivable, net				7	
8	Inventories for sale or use			83,769.	8	66,939.
9	Prepaid expenses and deferred charges			77,906.	9	43,816.
10a						
	basis. Complete Part VI of Schedule D		2,605,560.			
b	Less: accumulated depreciation	10b	910,069.	1,617,070.		1,695,491. 2,842,432.
11				2,835,924.	11	2,842,432.
12					12	
13	Investments - program-related. See Part IV, line	11			13	
14	Intangible assets	4.64 5.55	14	166 500		
15	Other assets. See Part IV, line 11			166,728.		
16						5,401,517.
			115,582.		129,869.	
				002 150		050 040
l				903,159.		852,843.
	•				21	
22						
		s, and c	disqualified persons.			
	•			270 520		2/2 526
				370,333.		343,536.
					24	
25						
	0 1 1 1 0	-	•	10 165		10,835.
26						1,337,083.
26				1,333,443.	26	1,337,003.
			There Zan and			
27				3 777 286.	27	3 667 463.
	Temporarily restricted net assets					3,667,463. 396,971.
		37272030		33073720		
23					23	
		30 330)	, check here			
30					30	
l						
32					32	
ا حد			4,148,775.	33	4,064,434.	
33	Total net assets or fund balances		I	4,140,//2.	33	4,004,434.
	2 3 4 5 6 7 8 9 10 a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and fo trustees, key employees, and highest compensa Part II of Schedule L 6 Loans and other receivables from other disqualit section 4958(f)(1)), persons described in section employers and sponsoring organizations of sect employees' beneficiary organizations (see instr). 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 1 Investments - program-related. See Part IV, line 1 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal Total assets, Add lines 1 through 15 (must equal Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Escrow or custodial account liability. Complete Escrow or custodial account liability. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, payarties, and other liabilities not included on lines Schedule D 7 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (Accomplete lines 27 through 29, and lines 33 and Unrestricted net assets Organizations that do not follow SFAS 117 (Accomplete lines 27 through 29, and lines 33 and Complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equal times and complete lines 30 through 34.	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former off trustees, key employees, and highest compensated empart II of Schedule L 6 Loans and other receivables from other disqualified pers section 4958(f)(1)), persons described in section 4958(c) employers and sponsoring organizations of section 501 employees' beneficiary organizations (see instr). Comple of Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule L 23 Secured mortgages and notes payable to unrelated third Unsecured notes and loans payable to unrelated third Dother liabilities, Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958) and complete lines 30 through 34. 30 Capital stock or trust principa	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(i)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 11 Investments - publicity traded securities 12 Investments - publicity traded securities 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 11 Escrow or custodial account liability. Complete Part IV of Schedule D 10 Total iabilities (Complete Part IV of Schedule D 10 Deferred revenue 12 Secured mortgages and notes payable to unrelated third parties 14 Unsecured notes and loans payable to unrelated third parties 15 Other liabilities (including federal income tax, payables to related third parties 16 Total liabilities. Add lines 17 through 25 17 Organizations that follow SFAS 117 (ASC 958), check here 18 Temporarily restricted net assets 19 Permanently restricted net assets 20 Permanently restricted net assets 21 Temporarily restricted net assets 22 Permanently restricted net assets 23 Permanently restricted net assets 24 Unrestricted lines 30 through 34. 36 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or	1 Cash - non-interest-bearing 719 , 419 . 2 Savings and temporary cash investments 3,087 . 3 Pledges and grants receivable, net 42,250 . 4 Accounts receivable, net 42,250 . 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4986(f)(1), persons described in section 498(6)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instr). Complete Part II of Sch L 77, 906 . 8 Inventories for sale or use 83,769 . 9 Prepald expenses and deferred charges 92	Cash - non-interest-bearing 719 , 419 , 1 2

Pa	TEXT RECONCILIATION OF NET ASSETS					
	Check if Schedule O contains a response to any question in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,14		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,51		
3	Revenue less expenses. Subtract line 2 from line 1	3		-36	-	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	,14		
5	Net unrealized gains (losses) on investments	5		28	0,5	90.
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				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	4	,06	4,4	<u>34.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII		<u></u>			X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	_X_	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	;,			
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	_X_	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	-	ıdit			
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE UNITED STATES PONY CLUBS, INC.

Employer identification number 61-1352306

Part I	Reason	for Public Char	fity Status (All organiz	ations mu	st complet	te this part	:.) See inst	tructions.					
he organ	ization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	ox.)						
1			s, or association of chur).					
2			′0(b)(1)(A)(ii). (Attach Sc										
з 🗌			tal service organization			170(b)(1)	(A)(iii).						
4	•		operated in conjunction					(b)(1)(A)(ii	i). Enter t	he hospita	l's nam	ne.	
	city, and stat		-,					(-/(-/(-/(-/(-	.,			,	
5	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or o	perated by	a governi	mental uni	t describe	ed in			
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)										
6	A federal, sta	ite, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1	I)(A)(v).						
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in												
	section 170(b)(1)(A)(vi). (Complete Part II.)												
8				(Complete	Part II.)								
9 X	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from												
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross receipts from												
			axable income (less sect										
		509(a)(2). (Complete			,			,e e.ge			,		
10			perated exclusively to te	st for publ	ic safety 5	See sectio	n 509(a)(4	1\					
11 🗔	-	-	perated exclusively for the	•	•				v out the	nurnoses	of one	or	
—	•		ations described in section						•			0.	
			organization and comple		•	, , ,	-). 000 00) 000 i	u)(0): 0110	30K the 507	· triat		
	a Type I		· — ·	ype III - Fu	_		,	gyT 🔲 t	e III - Nor	n-functional	lly inter	arated	
	,,		at the organization is not		•	-		• • •				-	
c			han one or more publicly										
f			tten determination from t						<i>σ</i> (α)(1) Οι .	30000011300	J(a)(∠).		
•		rganization, check th						5 III					
a		,	nis box organization accepted ar					owing por	2				
g											Vac	Na	
			lirectly controls, either al								Yes	No	
			upported organization?									_	
			n described in (i) above?										
			person described in (i) o							11g(iii)	<u>ш</u>	<u> </u>	
h	Provide the f	ollowing information	about the supported or	ganization	(S).								
(i) Nama	of ounported	/::\ EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Did voi	ı notify the	(vi) ls	the	(vii) Amoun	t of mou	noton/	
. ,	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9		sted in your			(vi) Is organizatio (i) organiz	on in col.	` '	oport	iletai y	
org	amzation		above or IRC section	governing	document?	(i) of your	support?	U.S	.?	oup	,port		
			(see instructions))	Yes	No	Yes	No	Yes	No				

 $\mbox{\sc LHA}$ For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sed	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")								
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3								
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)								
6	Public support. Subtract line 5 from line 4.								
	ction B. Total Support			•		•			
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
7	Amounts from line 4	, ,	, ,	, ,		, ,	,		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources								
9	Net income from unrelated business								
_	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part IV.)								
11	Total support. Add lines 7 through 10								
	Gross receipts from related activities,	etc. (see instructi	ons)			12			
	First five years. If the Form 990 is for					L			
	organization, check this box and stor	~			•				
Sed	ction C. Computation of Publ								
14	Public support percentage for 2012 (l	ine 6, column (f) d	ivided by line 11,	column (f))		14	%		
	Public support percentage from 2011					15	%		
	33 1/3% support test - 2012. If the o					nore, check this bo	x and		
	stop here. The organization qualifies	as a publicly supr	orted organization	n			> □		
b	33 1/3% support test - 2011. If the o								
	and stop here. The organization qual								
17a									
	a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization								
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
b	b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or								
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the								
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
18	Private foundation. If the organization								
							•		

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support										
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
	Gifts, grants, contributions, and	, ,	` '	,	,	` '				
	membership fees received. (Do not									
	include any "unusual grants.")	957,289.	1000514.	1066478.	1177406.	1204394.	5406081.			
2	Gross receipts from admissions,	-								
	merchandise sold or services per-									
	formed, or facilities furnished in									
	any activity that is related to the organization's tax-exempt purpose	785,250.	774,459.	759,484.	1108728.	906,398.	4334319.			
3	Gross receipts from activities that	-	,	•		,				
_	are not an unrelated trade or bus-									
	iness under section 513									
4	Tax revenues levied for the organ-									
·	ization's benefit and either paid to									
	or expended on its behalf									
5	The value of services or facilities									
•	furnished by a governmental unit to									
	the organization without charge									
6	Total. Add lines 1 through 5	1742539.	1774973.	1825962.	2286134.	2110792.	9740400.			
	Amounts included on lines 1, 2, and									
	3 received from disqualified persons	27,124.	33,325.	33,717.	20,464.	9,794.	124,424.			
b	Amounts included on lines 2 and 3 received		-	-	-	-				
	from other than disqualified persons that									
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.			
c	Add lines 7a and 7b	27,124.	33,325.	33,717.	20,464.	9,794.	124,424.			
	Public support (Subtract line 7c from line 6.)						9615976.			
	ction B. Total Support									
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
9	Amounts from line 6	1742539.	1774973.	1825962.	2286134.	2110792.	9740400.			
10a	Gross income from interest,									
	dividends, payments received on securities loans, rents, royalties									
	and income from similar sources	-1424048.	633,876.	42,229.	63,579.	1179783.	495,419.			
b	Unrelated business taxable income									
	(less section 511 taxes) from businesses									
	acquired after June 30, 1975									
c	Add lines 10a and 10b	-1424048.	633,876.	42,229.	63,579.	1179783.	495,419.			
11	Net income from unrelated business									
	activities not included in line 10b, whether or not the business is									
	regularly carried on									
12	Other income. Do not include gain						_			
	or loss from the sale of capital assets (Explain in Part IV.)	269,222.	221,409.	169,057.		10,711.	860,723.			
13	Total support. (Add lines 9, 10c, 11, and 12.)	587,713.	2630258.	2037248.	2540037.	3301286.	11096542.			
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,			
	check this box and stop here						<u></u>			
Sec	ction C. Computation of Publ	ic Support Pe	rcentage							
15	Public support percentage for 2012 (I	ine 8, column (f) di	ivided by line 13, c	olumn (f))		15	86.66 %			
	Public support percentage from 2011					16	93.64 %			
	ction D. Computation of Inves									
17	Investment income percentage for 20	112 (line 10c, colun	nn (f) divided by lin	17	4.46 %					
		from 2011 Schedule A, Part III, line 17								
19a	19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not									
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization									
b	b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and									
	line 18 is not more than 33 $1/3\%$, che	eck this box and st	t op here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐			
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	structions	<u></u> ▶□			