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Form **990**

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

2009

Open to Public Inspection

Address change Name change Initial return Application pending F Name and address of principal officer DONALD TREADWAY JR 1600 QUARTER HORSE DR AMARILLO, TX 79104 F Name and address of principal officer DONALD TREADWAY JR 1600 QUARTER HORSE DR AMARILLO, TX 79104 I Tax-exempt status F Solic) (5) ◄ (insert no)	H(a) Is this a group return for affiliates? H(b) Are all affiliates included?
Address change Name change Initial return Terminated Amended return Application pending F Name and address of principal officer DONALD TREADWAY JR 1600 QUARTER HORSE DR AMARILLO, TX 791680001 F Name and address of principal officer DONALD TREADWAY JR 1600 QUARTER HORSE DR AMARILLO, TX 79104 I Tax-exempt status F S01(c) (5) (insert no) 4947(a)(1) or 527 J Website: WWW AQHA COM K Form of organization Corporation Trust Association Other PROMOTE EDUCATION RELATIVE TO THE BREED, AND TO AMERICAN QUARTER HORSE RACING JOURNAL AND "AMI A Number of voting members of the governing body (Part VI, line: A Number of organization by the program service revenue (Part VIII, line 2a) Total number of volunteers (estimate if necessary) A Total gross unrelated business revenue from Part VIII, column by Net unrelated business taxable income from Form 990-T, line 3 B Contributions and grants (Part VIII, line 1h)	H(a) Is this a group return for affiliates? Yes If "No," attach a list (see instructions H(c) Group exemption number
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DONALD TREADWAY JR 1600 QUARTER HORSE DR AMARILLO,TX 79104 Tax-exempt status	affiliates?
Tax-exempt status	H(b) Are all affiliates included?
Tax-exempt status	If "No," attach a list (see instructions H(c) Group exemption number L Year of formation 1940 M State of legal domic stactivities THE AMERICAN QUARTER HORSE CONTINUED ON SCH OF TO PUBLISH "THE AMERICAN QUARTER HORSE JOURNAL", AMERICA'S HORSE" State of legal domic stactions or disposed of more than 25% of its net assets State of legal domic stactions or disposed of more than 25% of its net assets State of legal domic stactions or disposed of more than 25% of its net assets State of legal domic stactions or disposed of more than 25% of its net assets State of legal domic stactions State of legal domic state o
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8 Contributions and grants (Part VIII, line 1h)	Prior Year Current Year
8 Contributions and grants (Part VIII, line 1h)	Prior Year Current Year 8,308,961 8,170 42,394,271 40,630 7d)
Program service revenue (Part VIII, line 2g)	8,308,961 8,170 42,394,271 40,630 7d)
Program service revenue (Part VIII, line 2g)	42,394,271 40,630 (d) -2,009,785 1,788 0c, and 11e) 586,520 1,284 II, column (A), line 49,279,967 51,873 1-3) 6,696,211 9,263
Total revenue—add lines 8 through 11 (must equal Part VIII, 612)	7d) -2,009,785 1,788 0c, and 11e) 586,520 1,284 II, column (A), line 49,279,967 51,873 1-3) 6,696,211 9,263
Total revenue—add lines 8 through 11 (must equal Part VIII, 612)	0c, and 11e) 586,520 1,284 I, column (A), line 49,279,967 51,873 1-3) 6,696,211 9,263
Total revenue—add lines 8 through 11 (must equal Part VIII, 612)	1, column (A), line 49,279,967 51,873 1-3) 6,696,211 9,263
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13 Grants and similar amounts paid (Part IX, column (A), lines 1- 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A))	1-3) 6,696,211 9,263
14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A))	
15 Salaries, other compensation, employee benefits (Part IX, colu	,
10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	
16a Professional fundraising fees (Part IX, column (A), line 11e)	18,727,082 15,874
)
b Total fundraising expenses (Part IX, column (D), line 25) ▶0	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f	24f)
18 Total expenses Add lines 13-17 (must equal Part IX, column	mn (A), line 25) 56,343,027 52,231
19 Revenue less expenses Subtract line 18 from line 12	7,063,060 -358
	Beginning of Current End of Year
20 Total assets (Part X, line 16)	Year
了成 20 Total assets (Part X, line 16)	
21 Total liabilities (Part X, line 26)	
	24,708,064 24,729
Part II Signature Block	
Under penalties of perjury, I declare that I have examined this return, includ	
	cluding accompanying schedules and statements, and to the best of my knowledger than officer) is based on all information of which preparer has any knowledge
Sign <u>******</u>	cluding accompanying schedules and statements, and to the best of my knowle r than officer) is based on all information of which preparer has any knowledge
Here Signature of officer	r than officer) is based on all information of which preparer has any knowledge 2011-07-21
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TRENTON TAYLOR TREASURER	r than officer) is based on all information of which preparer has any knowledge 2011-07-21
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Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

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2		ition undertake any significant p 90 or 990-EZ?	rogram services during the year wh	ich were not listed on	Yes ✓ No
	If "Yes," describ	oe these new services on Schedi	ıle O		
3			significant changes in how it condu		Yes √ No
	If "Yes," describ	e these changes on Schedule O			
4	Section 501(c)	(3) and 501(c)(4) organizations	each of the organization's three larg and section 4947(a)(1) trusts are r venue, if any, for each program serv	required to report the amount	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
			HE PEDIGREES OF THE AMERICAN QUARTER S AND IS MAINTAINING 5,987,288 REGISTE		N RELATING TO THE BREED
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	PUBLICATION OF '	'THE AMERICAN QUARTER HORSE JOUF CULATION OF THESE PUBLICATIONS AS	RNAL", "THE AMERICAN QUARTER HORSE R OF 9/30/10 WAS 300,026	ACING JOURNAL", "AMERICA'S HOP	RSE", AND "CUARTO DE
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	-				
4d	Other program	services (Describe in Schedule	· O)		
	(Expenses \$	ıncludıng	grants of\$) (Revenue \$)
4e	Total program	service expenses►\$			

Part TV	Checklist	of Requir	ed Sche	dules
4: I L T L T	CHECKHSL	UI KEYUII	eu Stile	uuies

			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		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νo
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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νo
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ 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.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Νο
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
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 U S? If "Yes," complete Schedule F, Part II	15	Yes	
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 U S ? If "Yes," complete Schedule F, Part III	16	Yes	
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		Νο
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		Νο
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		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	Yes	
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
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		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2009)

art V	Statements	Regarding	Other	TRS Filing	s and Ta	ax Compliance
	ota to illoilto	ive gar aring	001101	±1.00 1 1111119	-	an compilation

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	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		No
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
1	Organizations that may receive deductible contributions under section 170(c).			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	file Form 8282?	7c		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
_	benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7g		
"	required?	7h		
3	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		
)	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	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)			
.2a	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			

AMARILLO, TX 79104 (806) 376-4811

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
та Б	Enter the number of voting members of the governing body	1		
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	Yes	
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		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		N o
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	<u> </u>		
Re	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
	Other officers or key employees of the organization	15b	Yes	
=	If "Yes" to line a or b, 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 taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure	•		
17	List the States with which a copy of this Form 990 is required to be filed▶		<u> </u>	
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			
19	Own website Another's website Vupon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the DON TREADWAY 1600 QUARTER HORSE DRIVE	ne orga	ınızatıor	. ►

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated 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. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, or 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 the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

For	m 990 (2009)				Page
1b	Total	,983,210 124,2	36		176,64
2	Total number of individuals (including but not limited to those listed above) who received in \$100,000 in reportable compensation from the organization 12	more than	•		
				Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest con line 1a? If "Yes," complete Schedule J for such individual		3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other comporganization and related organizations greater than \$150,000? If "Yes," complete Schedule individual		4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organ rendered to the organization? If "Yes," complete Schedule J for such person		5		No
	ection B. Independent Contractors				
1	Complete this table for your five highest compensated independent contractors that receives \$100,000 of compensation from the organization	ved more than			
	(A) Name and business address	(B) Description of services		(C Compe	
PO I	DERWOOD WILSON BERRY BOX 9158 LEI RILLO, TX 79105	GAL			215,344
_					

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization 🗗

Form **990** (2009)

Form 9								Page 9
Part	/	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
\$ \$	1a	Federated cam	paıgns 1a					
ig in	ь	Membership du	es 1b	8,170,351				
s, ç	С	Fundraising eve	ents 1c					
¥g,⊭	d	Related organiz	rations 1d					
ž.	e	Government grants	s (contributions) 1e					
ntío er s	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above					
Contributions, gifts, grants and other similar amounts	g	Noncash contri	butions included in					
E E	 h	lines 1a-1f \$ _		▶	8,170,351			
<u>Q 48</u>	"	Total. Add filles		Business Code	0,1, 0,001			
Program Serwce Revenue	2a	SPONSORSHIP INC	COME	541,800	7,826,690	7,776,690	50,000	
e Ke	ь	RACING CHALLENG		900,099	6,138,642	6,138,642	30,000	
ě E	c			541,800	5,449,087	3,133,312	5,449,087	
¥.	d	PUBLICATION ADVERTISIN REGISTRATION		900,099	5,109,313	5,109,313		
ૐ ⊆	e	WORLD CHAMPION	ISHIP SHO	900,099	3,847,393	3,847,393		
gran	f	All other progra	am service revenue		12,259,313	12,259,313		
Š	q	Total Add lines	s 2a-2f	L	40,630,438			
	3		ome (including dividen		40,030,130			
			aramounts)	. F	1,040,240			1,040,240
	4			· · · · -				
	5	Royalties		· · · · · · · · · · · · · · · · · · ·	375			375
	6a	Gross Rents	(ı) Real	(II) Personal				
	Ь	Less rental						
	_c	expenses Rental income						
	d	or (loss)	me or (loss)	<u> </u>				
	<u> </u>	Net rental incol	(i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	8,202,310	(11) 0 01101				
	ь	than inventory Less cost or other basis and sales expenses	7,454,302					
	c	Gain or (loss)	748,008					
	d 8a		s)	▶	748,008			748,008
eune	Oa	events (not inc \$	rom fundraising luding s reported on line 1c)					
Other Revenue		See Part IV, lin	ne 18 a					
됐	b c		penses b (loss) from fundraising	events .				
-	9a	Gross income f	rom gaming activities					
	b c		a penses b (loss) from gaming acti	vities b -				
		Gross sales of returns and allo	ınventory, less	vicies				
	Ь	=	a oods sold b	entory				
	С	Miscellaneous	(loss) from sales of inve s Revenue	Business Code				
	11a	MISCELLANEC		900,099	1,196,941	1,196,941		
	ь	ADMINISTRAT		900,099	407,000	407,000		
	c	PARTNERSHIP		900,099	-320,042			-320,042
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		1,283,899			
	12	Total revenue.	See Instructions .	· .	51,873,311	36,735,292	5,499,087	1,468,581

Form 990 (2009) Page 10								
Part	Statement of Functional Expenses							
	Section 501(c)(3) and 501(c)(4) organizations mu			(B)				
	ll other organizations must complete column (A) but are not required to	complete column	s (B), (C), and B)	(D). (C)	(D)			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses		Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV $$ line 21 $$	1,996,228						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	6,456,304						
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	810,537						
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	1,702,004						
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$							
7	Other salaries and wages	9,698,618						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,706,661						
9	Other employee benefits	930,017						
10	Payroll taxes	837,097						
11	Fees for services (non-employees)	00.7017						
	Management							
a		F2 724						
	Legal	52,724						
с	Accounting	181,125						
d	Lobbying							
е	Professional fundraising See Part IV, line 17							
f	Investment management fees	151,428						
g	Other	964,456						
12	Advertising and promotion	5,040,724						
13	Office expenses	2,017,641						
14	Information technology	363,742						
15	Royalties							
16	Occupancy	782,859						
17	Travel	1,171,079						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	181,798						
20	Interest	16,874						
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	1,292,748						
23	Insurance	273,036						
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)							
а	PUBLICATIONS	3,187,495						
Ь	WORLD CHAMPIONSHIP SHOW	2,653,915	 		_			
c	RC NOMINATIONS EXPENSE	1,979,444						
	SPONSORSHIPS	1,456,102						
e	GENOTYPING EXPENSE	1,209,233	 					
f	All other expenses	4,118,015						
25	Total functional expenses. Add lines 1 through 24f	52,231,904		†				
26		32,231,904		 				
20	Joint costs. Check here ► if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation							
	. 5							

Part X Balance Sheet (A) (B) Beainning of vear End of year 1,424,174 1.638.939 1 1 2,490,863 2 1.142.041 2 3 3 4 1.108.975 4 901.759 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 111,776 95,808 Notes and loans receivable, net 7 30.853 23,147 Inventories for sale or use 534,889 608,117 Land, buildings, and equipment cost or other basis Complete 15.134.294 10a 10a Part VI of Schedule D 10b 8.653.846 6.258.990 6.480.448 b Less accumulated depreciation 10c 48,585,963 11 50,718,581 11 5,976,389 12 4,078,800 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 327.548 15 650.974 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 66,850,420 16 66,338,614 2,122,639 17 3.156.438 17 Accounts payable and accrued expenses . 18 18 20,341,415 19 19,084,721 19 20 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 19.678.302 25 Other liabilities Complete Part X of Schedule D 25 19.367.563 26 Total liabilities. Add lines 17 through 25 42,142,356 41,608,722 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 24,708,064 24,729,892 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 📂 🥅 and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 24,708,064 33 Total net assets or fund balances 33 24,729,892 34 Total liabilities and net assets/fund balances 66.850.420 34 66,338,614

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	☐ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493202012571

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Open to Public

me of the organization ERICAN QUARTER HORSE ASSOCIATION			loyer identific	ation numbe	r
organizations Maintaining Donor And organization answered "Yes" to Form 99			or Account	s. Complet	e if the
	(a) Donor advised funds	(b) Funds and	other accour	nts
Total number at end of year					
Aggregate contributions to (during year)					
Aggregate grants from (during year)					
Aggregate value at end of year					
Did the organization inform all donors and donor advi funds are the organization's property, subject to the	-	onor advi	sed	☐ Yes	┌ No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit				☐ Yes	┌ No
rt II Conservation Easements. Complete	ıf the organization answered "Yes"	to Forn	n 990. Part I	V. line 7.	
Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	on or pleasure) Preservation of a	a certifie	d historic stru	•	1
			Held at the	e End of the	Year
Total number of conservation easements		2a			
Total acreage restricted by conservation easements	:	2b			
Number of conservation easements on a certified his	storic structure included in (a)	2c			
Number of conservation easements included in (c) a	cquired after 8/17/06	2d			
Number of conservation easements modified, transfe the taxable year <u>*</u>		·	ie organizatior	i during	
Does the organization have a written policy regarding enforcement of the conservation easements it holds:	g the periodic monitoring, inspection, ha		violations, an	d Yes	┌ No
Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation ease	ments d	uring the year	-	
A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easemer	nts during	g the year ► \$		
Does each conservation easement reported on line 2 $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	2 (d) above satisfy the requirements of se	ection		☐ Yes	┌ No
In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financi				
Complete if the organization answered		, or Ot	her Similar	Assets.	
If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or resea	arch in fu			ı
If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research			•	
(i) Revenues included in Form 990, Part VIII, line 1			► \$		
(ii) Assets included in Form 990, Part X					
If the organization received or held works of art, hist following amounts required to be reported under SFA		for finan			
Revenues included in Form 990, Part VIII, line 1			- \$		

Par	Till Organizations Maintaining Co	ollections of Ar	t, His	tori	<u>cal Trea</u>	sures, or (<u> 2the</u>	<u>er Similar As</u>	sets (c	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	ny of th	ne foll	owing that	t are a sıgnıfıc	ant ι	use of its collect	ion	
а	Public exhibition		d	\sqcap	Loan or e	xchange prog	rams	3		
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expl	aın hov	w they	/ further th	ne organizatio	n's e	xempt purpose	ın	
5	During the year, did the organization solicity assets to be sold to raise funds rather than								☐ Yes	┌ No
Par	t IV Escrow and Custodial Arrang						ed "\	es" to Form 9	90,	
	Part IV, line 9, or reported an ar		-							
	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ns or other as	sets		☐ Yes	Г No
Ь	If "Yes," explain the arrangement in Part XI	V and complete the	follow	/ıng ta	able	Ī		1 -		
								An	nount	
C	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	•	ne 21?						Yes	☐ No
	If "Yes," explain the arrangement in Part XI\				1 1157 11	. = 000				
Pa	rt V Endowment Funds. Complete	(a)Current Year		Mere Prior Y		<u>to Form 990</u>)Two Years Back		rt IV, line 10. Three Years Back	(e)Four \	ears Back
1a	Beginning of year balance	(a) carrent rear	(2)	,	(4	jino rears back	1	, rince rears back	(5). 54.	cars back
b	Contributions						+			
c	Investment earnings or losses									
d	Grants or scholarships									
e	Other expenditures for facilities									
	and programs									
f	Administrative expenses						-			
g	End of year balance									
2	Provide the estimated percentage of the year	ar end balance held	as							
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨									
С	Term endowment 🕨									
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	zation	that a	re held ar	nd administere	d for	the	Yes	No
	(i) unrelated organizations							3a(140
	(ii) related organizations							3a(
b	If "Yes" to 3a(II), are the related organization							31	,	
4	Describe in Part XIV the intended uses of th	ne organization's en	dowme	ent fu	nds				•	
Par	t VI Investments—Land, Building	s, and Equipme	ent. S	ee F	orm 990	, Part X, line	10.			
	Description of investment) Cost or oth is (investme			(c) Accumulated depreciation	(d) B	ook value
1a	Land				197,	.529				197,529
b	Buildings				6,159,	,077		3,754,11	5	2,404,962
c	Leasehold improvements									
d	Equipment				8,767,	,525		4,899,73	1	3,867,794
e	Other				10	,163	Ţ			10,163

6,480,448

(a) Description of security or category	Form 990, Part X, line 12 (b)Book value	(c) Metho	d of valuation
(including name of security) Financial derivatives	,	Cost or end-of	-year market value
Closely-held equity interests			
Other			
real estate limited partnership investments	4,078,800		F
			_
-			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	4,078,800		
Part VIII Investments—Program Related. See		<u> </u> 3	
			d of valuation
(a) Description of investment type	(b) Book value		-year market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13)			
(a) Descrip			(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
INCENTIVE FUND	9,617,293		
RC PROGRAM NOMINATIONS	4,143,320		
MINIMUM PENSION LIABILITY	5,424,071		
CAPITAL LEASE LIABILITY	182,879		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	19,367,563		

	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	113	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	51,873,311
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	52,231,904
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-358,593
4	Net unrealized gains (losses) on investments	4	380,421
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	380,421
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	21,828
Part		er R	· · · · · · · · · · · · · · · · · · ·
1	Total revenue, gains, and other support per audited financial statements	1	47,748,325
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	47,748,325
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	4,124,986
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	51,873,311
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	47,726,497
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		
С	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-4,505,407
3	Subtract line 2e from line 1	3	52,231,904
4	A mounts 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		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	52,231,904
	XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part XII, Line 4b - Other Adjustments		UNREALIZED GAINS 4124986
Part XIII, Line 2d - Other Adjustments		UNREALIZED GAINS -4505407

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As Filed Data -

DLN: 93493202012571

OMB No 1545-0047

2009

Open to Public Inspect ion

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Totals .

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" to Form 990,

Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Employer identification number

4 M F	ERICAN QUARTER HORS	E ASSOCIATIO	N					
	INICHII QUARIER IIORS	2 //330 01//110	•			75-0725576	5	
Pa	General Info "Yes" to Form 9			de the United States	s. Complete	e if the orgar	nization answered	
1				ecords to substantiate (the amount	of the grant	s or	
				assistance, and the se				
	the grants or assistar	nce?					. 🔽 Yes 🗆	No
2	For grant makers. Descr United States	ibe in Part IV the	organization's pr	ocedures for monitoring th	ne use of grai	nt funds outsıd	e the	
3	Activites per Region (U	se Schedule F-1	(Form 990) ıf add	ditional space is needed)				
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	ıs a progr describe sı	ty listed in (d) am service, pecific type of s) in region	(f) Total expenditure for region	 s
See	e Add'l Data			the regiony		- , · · · · · · · · · · · · · · · · ·		_
								_
								_
								_
								_

886,955

1	(b) IRS code	(c) Region	space is needed. (d) Purpose of	(e) A mount of	(f) Manner of	(g) A mount of	(h) Description	(i) Method of
(a) Name of	section	(C) Region	grant	cash grant	cash	of non-cash	of non-cash	valuation
organization	and EIN (if		grant	cusii giuiit	disbursement	assistance	assistance	(book, FMV,
organization	applicable)					assistante	assistante	appraisal, other)
		SOUTH AMERICA	BUSINESS PLAN	9,893	WIRE AND CHECKS	40,968	TRAVEL EXPENSE	COST
							AND JUDGING FEES	
		EUROPE	BUSINESS PLAN	178,002	WIRE AND CHECKS	88,689	TRAVEL EXPENSE AND JUDGING FEES	COST
		EAST ASIA AND THE PACIFIC	BUSINESS PLAN	3,313	WIRE AND CHECKS	23,476	TRAVEL EXPENSE AND JUDGING FEES	COST
		NORTH AMERICAN	BUSINESS PLAN	47,370	WIRE AND CHECKS	39,214	TRAVEL EXPENSE AND JUDGING FEES	COST
		MIDDLE EAST AND NORTH AFRICA	BUSINESS PLAN	187	WIRE AND CHECKS	16,621	TRAVEL EXPENSE AND JUDGING FEES	COST
		CENTRAL AMERICA AND THE CARIBBEAN	BUSINESS PLAN	4,009	WIRE AND CHECKS	8,171	TRAVEL EXPENSE AND JUDGING FEES	COST
		NORTH AMERICAN	WORLD SHOW	13,863	CHECKS			
		lent organizations lis for which the grante			ies by the foreign co			0

RACING CHALLENGE

SOUTH AMERICA

1

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (a) Type of grant or (b) Region (d) A mount of (e) Manner of cash (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash assistance assistance (book, FMV, appraisal, other) WORLD SHOW NORTH AMERICA 12 23,745 CHECK 932 BUCKLES, SADDLES, COST BOOTS, ECT WORLD SHOW SOUTH AMERICA 1 3,208 CHECK 11,532 BUCKLES, SADDLES, WORLD SHOW EUROPE 3 13,177 CHECK COST BOOTS, ECT 82,334 CHECK INCENTIVE FUND EUROPE 416 127,870 CHECK INCENTIVE FUND NORTH AMERICA 518 SOUTH AMERICA INCENTIVE FUND 2 43 CHECK INCENTIVE FUND 1 43 CHECK SUB-SAHARAN AFRICA INCENTIVE FUND CENTRAL AMERICA 26 CHECK 1 & THE CARIBEAN INCENTIVE FUND 251 CHECK 3 EAST ASIA AND THE PACIFIC INCENTIVE FUND MIDDLE EAST AND 1 17 CHECK NORTH AFRICA

5,591 CHECK

Schedule F (Form 990) 2009

Part IV Supplemental Inform Complete this part to pr		d in Part I, line 2, and any additional information.
Identifier	ReturnReference	Explanation
Procedure for Monitoring Grants Outside the U S		Schedule F, Part I, Line 2 > AQHA Business Plan Funding - The American Quarter Horse Association provides funding to its international affiliates based on membership and horse population. This funding is used for the promotion of the Quarter Horse in the affiliate country and must be accounted for by sending copies of expenditures and examples of promotion. Incentive Fund- is a program whereby AQHA nominated show participants and breeders win cash prizes based on total points accumulated during each show year. In order to be eligible, breeders must pay nomination fees for their stallions and foals. The nomination fees and the related investment income represent the source of funds for the cash prizes awarded. Nominated stallions and foals are eligible to receive payments from the Incentive Fund based on total show points earned during the previous year. Racing Challenge Program - is an incentive-type program open to all registered American Quarter Horse foals. The Racing Challenge receives funds from individuals for the nomination of their horses. Nominations received are used to supplement purse awards at Challenge races and are paid to the nominators and owners as bonus awards. Race entry fees are received from individuals to enter a Challenge race and are added to the purse award. Corporate sponsors contribute funds to the
		purse awards as well
Method Used to Acccount for Expenditures		Schedule F, Part I, Line 3 American Quarter Horse Association requireS the use of queries of our accounting system to identify foreign expenditures in our financial statements revealing the source and geographic origin of those expenditures
		g g

Software ID: Software Version:

EIN: 75-0725576

Name: AMERICAN QUARTER HORSE ASSOCIATION

Form 990 Schedule F Part I - Activities Outside The United States

Form 990 Schedule F P	<u> Part I - Activit</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) A ctivities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA			PROGRAM SERVICES	BUSINESS PLAN	50,860
EUROPE			PROGRAM SERVICES	BUSINESS PLAN	270,578
CENTRAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICES	BUSINESS PLAN	16,539
SUB-SAHARAN AFRICA			PROGRAM SERVICES	BUSINESS PLAN	4,181
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	BUSINESS PLAN	26,789
NORTH AMERICAN			PROGRAM SERVICES	BUSINESS PLAN	86,584
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	BUSINESS PLAN	16,808
SOUTH AMERICA		1	PROGRAM SERVICES	PROMOTION OF RACING CHALLENGE	12,640
NORTH AMERICA		1	PROGRAM SERVICES	PROMOTION OF QUARTER HORSE	64,743
SOUTH AMERICA			PROGRAM SERVICES	RACING CHALLENGE	5,591
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	INCENTIVE FUND	51
EUROPE			PROGRAM SERVICES	INCENTIVE FUND	90,317
NORTH AMERICA			PROGRAM SERVICES	INCENTIVE FUND	129,916
SOUTH AMERICA			PROGRAM SERVICES	INCENTIVE FUND	230
CENTRAL AMERICA			PROGRAM SERVICES	INCENTIVE FUND	26
MIDDLE EAST AND N AFRICA			PROGRAM SERVICES	INCENTIVE FUND	17
SUB-SAHARAN AFRICA			PROGRAM SERVICES	INCENTIVE FUND	43
NORTH AMERICA			PROGRAM SERVICES	AIM GRANT	14,200
EUROPE			PROGRAM SERVICES	EURO CHAMPIONSHIP	30,385
NORTH AMERICA			PROGRAM SERVICES	WORLD SHOW	38,540
SOUTH AMERICA			PROGRAM SERVICES	WORLD SHOW	3,208
EUROPE			PROGRAM SERVICES	WORLD SHOW	24,709
		•			

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

AMERICAN QUARTER HORSE ASSOCIATION

DLN: 93493202012571 OMB No 1545-0047

Employer identification number

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspection

AMERICAN QUARTER HORSE A	SSOCIATION					75-0725576	
Part I General Informa	ation on Grants and	l Assistance					
 Does the organization mains the selection criteria used t Describe in Part IV the organization 	o award the grants or as	sıstance [?]					▽ Yes 「
Form 990, Part IV,	, line 21 for any recip	ient that received r	rganizations in the nore than \$5,000. Ch needed	eck this box if no one	e recipient receive	ed more than \$5,000	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section	on 501(c)(3) and govern	ment organizations .	<u>.</u>				7
3 Enter total number of other	organizations		<u> </u>	<u> </u>		<u> ▶ </u>	26

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book FMV , appraisal, other)	, (f) Description of non-cash assistance
world show	603	1,586,846	1,641,860	cost	Buckels, Saddles, Trophies
racing challenge	98	143,217			
incentive fund	6605	2,098,279			
AQHA PROMOTION AND SPONSORSHIP AWARDS	163	47,836	419,204	cost	Buckels, Saddles, Trophies
TEAM WANGLER/ CHAMPIONSHIP AND ROOKIE WINNERS	338	35,000	484,062	cost	Buckels, Saddles, Trophies

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
		·
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 > Affiliate Program / AIM - AQHA has partnerships with like-minded grassroots American Quarter Horse associations to help promote the benefits of American Quarter Horse involvement. There are 83 state/provincial AQHA Affiliates representing all fifty states and seven provinces. If an association handles both the race and show segments of our industry then AQHA has only one affiliate in that state or province. In the case where those segments are represented by their own entity then AQHA could have two affiliates in that location. The Affiliate/AQHA Partnership will unite American Quarter Horse ownership and participation. To generate growth of affiliate membership via the educational programs, recognition, monitoring public policy, marketing, promotion and publicity of the American Quarter Horse. The Affiliate/AQHA Partnership will be the effective industry voice serving all AQHA members and horse owners at the local level with diverse programs that promote the American Quarter Horse. Pacing Council Grants - is a program where requests for grants are submitted by our State Affiliates for racing promotion initiative purposes. Grants are reviewed and approved by our Racing Council. Place of Affiliates for racing promotion initiative purposes. Grants are reviewed and approved by our Racing Council. Place of Affiliates for racing promotion initiative purposes. Grants are reviewed and approved by our State Affiliates for racing promotion initiative purposes. Grants are reviewed and approved by our Racing Council. Place of Affiliates for racing promotion initiative purposes. Grants are reviewed and approved by our State Affiliates for racing promotion initiative purposes. Grants are reviewed and approved by our State Affiliates for racing and the related investment income represent the source of funds for their stalloins and foals are eligible to receive payments from the Incentive Fund based on total show points earned during the previous year -Racing Challenge Program - is an incentive-ty
-		

Software ID:

Software Version:

EIN: 75-0725576

Name: AMERICAN QUARTER HORSE ASSOCIATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
23 PARTNERSHIP3154 N TWIN OAKS VALLEY RD SAN MARCOS,CA 92069	20-5154856		9,092	1,318	COST	BUCKLES, BOOTS, JACKETS, ECT	WO RLD SHOW
AMERICAN QUARTER HOUSE FOUNDATIONPO BOX 32111 AMARILLO,TX 79120	51-0187823	501(c)(3)	522,678				MUSEUM OPERATIONS, EQUINE RESEARCH, YOUTH SCHOLARSHIPS
ARIZONA QUARTER HORSE RACING ASSOCPO BOX 1316 THATCHER,AZ 85552	86-0551878		5,000				RACING COUNCIL GRANT
BACK COUNTRY HORSEMEN OF NORTH GEORGIA340 SWAN LANE BLUE RIDGE,GA 30513	87-0772268		6,498				STEP PRO GRAM GRANTS
CAROL ROSE QUARTER HORSES4500 N I-35 GAINESVILLE,TX 76240	75-1339598		8,523				INCENTIVE FUND
CAROL ROSE QUARTER HORSES4500 N I-35 GAINESVILLE,TX 76240	75-1339598		19,536	1,733	COST	BUCKLES, BOOTS, JACKETS, ECT	
CHAPARROSA ENTERPRISES L PPO BOX 549 LA PRYOR,TX 78872	76-0401645		12,662	1,668	COST	BUCKLES, BOOTS, JACKETS, ECT	WO RLD SHO W
CIRCLE STAR LAND & CATTLE COPO BOX 125 PONTOTOC,TX 76869	77-0399267		18,882	1,844	COST	BUCKLES, BOOTS, JACKETS, ect	
CIRCLE STAR LAND & CATTLE COPO BOX 125 PONTOTOC,TX 76859	77-0399267		6,697				INCENTIVE FUND
COLORADO STATE UNIVERSITY408 UNIVERSITY SERVICES FORT COLLINS, CO 80523	84-6000545	501(c)(3)	9,500				HORSEMANSHIP GRANTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) COST BUCKLES, BOOTS, DANNY O RATLIFF1740 20-0336838 507 WORLD SHOW MIDWAY JACKETS, ect 6,729 LEWISVILLE, TX 75056 FLORIDA OUARTER HORSE 43-2098089 501(C)(6) RACING COUNCIL GRANTS RACING ASSN9085 20,000 MAGNOLIA HILL DRIVE TALLAHASSEE, FL 32309 23-7411804 501(C)(5) AIM GRANT IOWA QUARTER HORSE ASSOCIATIONPO BOX 269 5,800 GREENFIELD, IA 50849 27-0007295 208 COST BUCKLES, BOOTS, MERIDIAN SPRINGS FARM WORLD SHOW LLC1930 HIGHWAY 117 S JACKETS, ect 7,272 SULPHUR, OK 73086 PERMANENTLY DISABLED 20-5110346 501(C)(3) RACING COUNCIL JOCKEYSPO BOX 803 GRANTS 25,000 ELMHURST, IL 60126 501(C)(3) RACING MEDICATION AND 72-1559413 **EQUINE RESEARCH** TESTING821 CORPORATE 100,000 DRIVE LEXINGTON, KY 40503 20-4137857 501(C)(6) RACING COUNCIL RACING OFFICIALS ACCREDITATION821 GRANTS 10,000 CORPORATE DRIVE LEXINGTON, KY 40503 ROBBIE & JOAN 75-2963729 INCENTIVE FUND SCHROEDER6736 HIGHWAY 7,791 82 GAINESVILLE, TX 76240 RACING COUNCIL **ROCKY MOUNTAIN** 84-0383075 501(C)(5) QUARTER HORSE RACING GRANTS 10,000 ASSOC4701 MARION ST307 DENVER, CO 80216 415 COST BUCKLES, BOOTS. SPANKY BROWNE9200 NW 73-1108923 WORLD SHOW HIGHWAY 2 JACKETS, ect 7,701 WILBURTON, OK 74578

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 57-1144177 STANLEY OR SUSAN INCENTIVE FUND SCOTT LLC10624 NW 6,505 HIGHWAY 225A OCALA, FL 34482 STANLEY OR SUSAN 26-5787038 INCENTIVE FUND SCOTT LLC10624 NW 7,094 HIGHWAY 225A OCALA, FL 34482 COST SWEET LAKE LAND & OIL 72-0330970 208 BUCKLES, BOOTS, WORLD SHOW CO INCPO BOX 997 JACKETS, ect 5,698 LAKE CHARLES, LA 70602 501(C)(3) TECH TEXAS UNIVERSITY 75-2142549 10,383 COST TRAVEL EXPENSES HORSEMANSHIP PO BOX 42141 GRANT 2,626 LUBBOCK,TX 79409 COST BUCKLES, BOOTS, TERRY BRADSHAW 27-2450678 7,356 WORLD SHOW QUARTER HORSESRR 1 JACKETS, ect 13,096 BOX 1033 THACKERVILLE, OK 73459 TEXAS A&M AGRILIFE113 74-6000541 501(C)(3) 8,582 COST TRAVEL EXPENSES HORSEMANSHIP JACK K WILLIAMS GRANT 3,710 COLLEGE STATION, TX 77843 COST THE KAPLOW FAMILY74 06-0349669 6,323 BUCKLES, BOOTS, WORLD SHOW **DEVOERD** JACKETS, ect 9,613 CHAPPAQUA, NY 10514 86-0385857 507 COST TOM LYONS INCPO BOX BUCKLES, BOOTS, WORLD SHOW 298 JACKETS, ect 9,226 GRANDVIEW, TX 76050 HORSEMANSHIP 501(C)(3) TRAVEL EXPENSES UNIVERSITY OF 39-6064630 6,930 COST WISCONSIN410 S 3RD ST GRANT 2,787 RIVER FALLS, WI 54022 VESSELS STALLION FARM 33-0050075 RACING CHALLENGE LLCPO BOX 776 14,359 BONSALL, CA 92003

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WACO BEND RANCH LTD 842 PHILLIPS RANCH RD GRAHAM,TX 76450	32-0119639		13,222	1,668	COST	BUCKLES, BOOTS, JACKETS, ect				
WINRIDGE FARM4401 COUNTY ROAD 424 CLEBURNE,TX 76031	45-6846822		5,691				INCENTIVE FUND			
HOOVES & STALLS RACING STABLES INC608 LINCOLN RD WEST HELENA, MT 59602	20-3601793		6,900				RACING CHALLENGE			

DLN: 93493202012571

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

AME	RICAN QUARTER HORSE ASSOCIATION			
Do	rt I Questions Regarding Compensation 75-0725576			
Ρđ	Questions Regarding Compensation		Yes	Νο
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		165	NO
	First-class or charter travel Housing allowance or residence for personal use			
	✓ Travel for companions			
	✓ Tax idemnification and gross-up payments ✓ Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	✓ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		
Ь	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		

section 53 4958-6(c)?

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a									
	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation		
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ		
(1) (11)	232,796 0	680 0	1 '	9,000	26,270 0	324,280	0		
(I) (II)	144,302 0	933 0	10,627 0	4,500 0	21,467 0	181,829	0		
(1) (11)	366,139 0	149,237 0	4,767 0	8,644 0	18,181 0	546,968	0		
(1) (11)	166,100 0	0	11,249 0	10,740 0	12,493 0	200,582	0		
(I) (II)	35,965 0	149,459 0	12,115 0	0	2,345 0	199,884	0		
(I) (II)	37,042 122,391		- /						
(I) (II)	128,189 0	0	- /	0	16,843 0	153,595	0		
		ļ	<u> </u>						
		<u> </u>	 		—	!	<u> </u>		
\longrightarrow				 	<u> </u>		 		
			 						
							<u> </u>		
\rightarrow			1			1			
	(1) (1) (1) (1) (1) (1) (1) (1) (1)	(B) Breakdown of (i) Base compensation (i) Base compensation (i) 232,796 (ii) 144,302 (ii) 366,139 (ii) 366,139 (ii) 166,100 (ii) 35,965 (ii) 0 (ii) 37,042 (ii) 37,042 (iii) 128,189	(B) Breakdown of W-2 and/or 1099-MIS (i) Base compensation (i) 232,796 680 0 (ii) 144,302 933 0 (ii) 366,139 149,237 0 (ii) 166,100 0 (ii) 35,965 149,459 0 (ii) 37,042 0 (ii) 37,042 0 (iii) 128,189 0	(i) Base compensation (i) Base compensation (ii) Bonus & (iii) Other reportable compensation (i) 232,796 680 55,534 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(i) Base compensation (ii) Base compensation (iii) Base compensation (iii) Base compensation (iii) Base compensation (iii) 232,796 (a) 680 (b) 55,534 (b) 9,000 (c) (a) 144,302 (b) 10 (c) 10 ((i) Base compensation (ii) Bonus & (iii) Bonus & (iii) Other reportable compensation (iii) Bonus & (iiii) Other reportable compensation (iv) Compensation (i	(i) Base compensation (ii) Bonus & incentive compensation (iii) Other reportable compensation (iii) Ot		

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier Refer	Explanation e
Part I, L	4a Bıll Brewer - \$149,237 Trent Taylor - \$933 Don Treadway Jr - \$680

Schedule J (Form 990) 2009

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DLN: 93493202012571

OMB No 1545-0047

Department of the Treasury

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Internal Revenue Service

Name of the organization AMERICAN QUARTER HORSE ASSOCIATION **Employer identification number**

75-0725576

1 (a) Name of disqu	ualified i	person	(b) Description of trans				neaction			(c) Corrected?		
1 (1)				(b) Desc	Прсто				Yes	No		
2 Enter the amount of tax Impose section 4958							ear under	\$	<u> </u>	I		
3 Enter the amount of tax, If any,	on line	2, abov	e, reimbursed by th	e organization .			•	\$				
Part II Loans to and/or F Complete if the organiz				Part IV line 26	or F	nrm 990-F	7 Part V	line 38a				
(a) Name of interested person and purpose	(b) Lo	an to m the	(c)O riginal	(d)Balance due	(4	e) In fault?	(f) Approv	ved d or	(g) Writt			
	То	From		Yes	No	Yes	No	Yes	No			
ONALD TREADWAY JR PLIT DOLLAR LIFE INSURANCE GREEMENT		X	159,680	95,808		No	Yes		Yes			
otal			<u> </u> ▶ \$	95,808			1					
a rt III Grants or Assistan	ce Be	nefitti	ng Interested F	ersons.								
Complete if the orga			ered "Yes" on For Relationship betwe									
(a) Name of Interested perso	on ———		and the org	•		ļ `, <i>'</i>			e of assis			
yle Fuller		Son	Son of Jerry Fuller				\$2,000 scholarship from American Quarter Horse Foundation, a related party					
orry Bailey		Dau	Daughter of Paul Bailey				\$2,000 scholarship from American Quarter Horse Foundation, a related party					
			Daughter of Faur Daney				\$6,250 scholarship from American Quarte					
aylor Joseph Jeane		Son	Son of Suzy Jeane				Horse Foundation, a related party \$5,000 scholarship from American Quarter					
1ackenzeı Adams			Daughter of Tracy Adams				Horse Foundation, a related party					
auren Halvorson			Daughter of Wayne Halvorson				\$2,000 scholarship from American Quarter Horse Foundation, a related party					
Part IV Business Transact	ions T	nvolvi	na Interested I	Persons.								
Complete if the orga					, line	28a, 28	b, or 28	С.				
(a) Name of interested person			Relationship een interested son and the	(c) A mount of transaction		(d) Desc	ription of	transactio	n organ	naring o ization' enues?		
		0	rganization						Yes	No		
ohnny Trotter		Executi Membe	r Committee,	10,7	40	Cattle for show				Νo		
attı Colbert		Directo	r	20,0	00 9	Sponsored	Event			Νo		
					\dashv							

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DLN: 93493202012571

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Supplemental Information to Form 990

Name of the organization
AMERICAN QUARTER HORSE ASSOCIATION

Employer identification number

75-0725576

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		>JOE CARTER, DIRECTOR AT LARGE AND PATTI CARTER-PRATT, DIRECTOR - FAMILY RELATIONSHIP >DIRK JONES, DIRECTOR AND R C JONES, DIRECTOR - FAMILY RELATIONSHIP

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		The American Quarter Horse Association is a nonprofit corporation which is comprised of over 300,000 members world wide. The members in attendance each have a vote at the annual membership meetings. These members are divided into geographical areas representing states, provinces, countries or regions. These members are represented on the Board of Directors. The total number of elected directors is 150. The number of directors representing an area is determined by the number of Registered American Quarter Horses in their geographic region. The members from each region elect the Directors from their region. The members approve all decisions of the board of directors and executive committee at the annual meeting. See Section II & III of the bylaw's

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		The Board of Directors is comprised of these elected directors (noted in #6), past presidents, directors emeriting, directors-at-large, honorary vice-presidents and appointed international directors. All of these have voting rights on the Board of Directors provided they adhere to the policies to maintain their voting rights. The Board of Directors meets annually at the annual membership meeting. The Board of Directors elects the Executive Committee, which has all rights of the board of directors except the power to change bylaws and any rules pertaining to the registration of horses. The Executive Committee is a five member committee consisting of the President, First Vice President, Second Vice President and two members. See section IV & V of the bylaws.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7b		The decisions of the Executive Committee are approved by the Board of Directors. The actions of the board of directors are approved by the members at the annual membership meeting.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The 990 is completed with the assistance of the accounting department in conjunction with the Treasurer. The 990 is then reviewed by the Treasurer and the Executive Vice President. The final approval before it is filed comes from the Executive Committee which has all rights of the board of directors. The Executive Committee and the Investment Oversight Committee also serve as the audit committee for the organization. After filing, the 990 is available to anyone upon request.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		All Board members are required to fill out the conflict of interest statements on an annual basis. All of these responses are reviewed by the Executive Committee to determine where conflicts exist.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The Executive Committee approves compensation for all staff including the Executive Vice President, Treasurer and key employees. They have comparability data available to review for both nonprofit and for profit corporations. They have received independent reviews of the Executive Vice President's compensation in the past, but it is not done on an annual basis. The documentation of their decisions is reflected in the minutes of the Executive Committee meetings.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The organizations governing documents are printed in the annual Official Handbook that is distributed to all members and is posted on the AQHA wiebsite. The Conflict of Interest policy is available on the AQHA wiebsite and available upon request. The consolidated audited financial statements are presented to the members at the annual meeting and then posted on the AQHA wiebsite. In addition, each director receives quarterly unaudited financials to share with the members they represent.

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DLN: 93493202012571

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization AMERICAN QUARTER HORSE ASSOCIATION				Employer identi	rication number
WIENTEN GOVERN HORSE / 6556 EM 1014				75-0725576	
Part I Identification of Disregarded Entities (Complete	e if the organization a	answered "Yes" on	Form 990, Part I	V, line 33.)	
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Er	(e) nd-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organiza or more related tax-exempt organizations during the	tions (Complete if the tax year.)	ne organization an	swered "Yes" on I	Form 990, Part I	V, line 34 because it had one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity stat (if section 501(c)(us Direct controlling 3)) entity
AMERICAN QUARTER HORSE FOUNDATION			1		
PO BOX 32111	support of educational projects of interest to	тх	501(c)(3)	11 - typ	e 1 none
AMARILLO, TX 79120 51-0187823	devotees of the quarter horse		301(0)(3)		
	1	-	<u> </u>	-	<u> </u>

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end asset	-of-year	(h Disprop allocat	ortionate	Code amount ır Sched	(i) V—UBI n box 20 of ule K-1 n 1065)	(j Gener mana parti	al or Iging
								Yes	No			Yes	No
												+	
				s a Corporation on treated as a corpo				nswer	ed "Y	es" on F	orm 990, P	art IV,	
	cause it flad offe t		elated organizations				(f))		(-)	(5)		
(a) Name, address, and EIN o	f related organization	(b) Primary a	ctivity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	Share o	f total	Sh end-	(g) nare of -of-year ssets	(h) Percentag ownership		
									1				

(6)

Part \	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV	, line 34, 35, or 36.)											
Not	e. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No								
1 Durin	g the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-	IV?											
a Re	ceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No								
b Gif	t, grant, or capital contribution to other organization(s)		1b	Yes									
c Gıf	t, grant, or capital contribution from other organization(s)		1 c		No								
d Lo	ans or loan guarantees to or for other organization(s)		1d		No								
e Lo	ans or loan guarantees by other organization(s)		1e		No								
	• Sale of accets to other organization(s)												
f Sa													
g Pu	rchase of assets from other organization(s)		1 g		No								
h Ex													
i Lea	se of facilities, equipment, or other assets to other organization(s)		1 i		No								
j Lea	se of facilities, equipment, or other assets from other organization(s)		1j		No								
k Pe	rformance of services or membership or fundraising solicitations for other organization(s)		1k		No								
l Per	formance of services or membership or fundraising solicitations by other organization(s)		11		No								
m Sharing of facilities, equipment, mailing lists, or other assets													
n Sh	arıng of paid employees		1n		No								
o Re	ımbursement paıd to other organization for expenses		1o		No								
	imbursement paid by other organization for expenses		1p		No								
p Re	imbarsement para by other organization for expenses		-										
q Ot	her transfer of cash or property to other organization(s)		1 q		No								
r Ot	ner transfer of cash or property from other organization(s)		1r		No								
	he answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationsh	ups and transaction thros	nolds										
	(a)	(b) Transaction		(c)									
	Name of other organization	type(a-r)	Amount	involve	ed								
	CAN QUARTER HORSE FOUNDATION	В		52	2,678								
(1) See Ad	ditional Data Table												
(2)													
(3)													
(4)													
(E)													
(5)													

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets		r) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	agın tner?
			Yes	No		Yes	No		Yes	N
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Software ID: Software Version:

EIN: 75-0725576

Name: AMERICAN QUARTER HORSE ASSOCIATION

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours		((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
ADRIANA GOMEZ BARNOLA DIRECTOR	1 00	Х						0	0	0		
AL DUNNING DIRECTOR AT LARGE	1 00	Х						0	0	0		
ALICE W HOLMES DIRECTOR	1 00	х						0	0	0		
ANDY MOORMAN DIRECTOR	1 00	х						0	0	0		
ANDY REES HONORARY VICE PRESIDENT	1 00	х						0	0	0		
ANNA RIGGS-EADER DIRECTOR	1 00	Х						0	0	0		
ANTONIO A GIRAUDINI DIRECTOR	2 00	х						0	0	0		
BEN L HUDSON DIRECTOR AT LARGE	2 00	Х						0	0	0		
BENNIE T SARGENT DIRECTOR	15 00	х						5,600	0	0		
BILL C HOBURG DIRECTOR	1 00	Х						0	0	0		
BILLY L CRESS DIRECTOR AT LARGE	1 00	Х						0	0	0		
BOB MOORHOUSE DIRECTOR	1 00	Х						0	0	0		
BRAD TATE PAST PRESIDENT	1 00	Х						0	0	0		
BUTCH HAMMER DIRECTOR	20 00	х						0	0	0		
C A CARRUTHERS DIRECTOR EMERITUS	1 00	Х						0	0	0		
C A COFER DIRECTOR EMERITUS	1 00	Х						0	0	0		
C DAVID FLOHR DIRECTOR	1 00	Х						0	0	0		
CW ENGLUND JR PAST PRESIDENT	1 00	Х						0	0	0		
CAROL A BRADLEY DIRECTOR	1 00	Х						0	0	0		
CAROL ROSE DIRECTOR	2 00	Х						0	0	0		
CATHY HANSON DIRECTOR	2 00	Х						0	0	0		
CHARLES H MENKER HONORARY VICE PRESIDENT	1 00	Х						0	0	0		
CHARLES W CROWE DIRECTOR	2 00	х						0	0	0		
CHARLES W GRAHAM DIRECTOR AT LARGE	5 00	Х						0	0	0		
CHRIS HARDCASTLE DIRECTOR	2 00	Х						0	0	0		
<u> </u>	1	1	1			<u> </u>	<u> </u>					

Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F)													
(A) Name and Title	(B) Average hours per		tion (that a	che	')		ı	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation			
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations			
CHRISTA L BALDWIN DIRECTOR	1 00	х						0	0	0			
CHRISTIAN BEAUCHEMIN DIRECTOR	1 00	Х						0	0	0			
CLARENCE SCHARBAUER JR PAST PRESIDENT	1 00	×						0	0	0			
CLARK BRADLEY DIRECTOR	2 00	х						2,800	0	0			
CLAY E MACLEOD DIRECTOR	1 00	х						4,000	0	0			
CLAYTON RUSSELL DIRECTOR	1 00	Х						0	0	0			
COL EARL A LILLEY DIRECTOR EMERITUS	1 00	Х						0	0	0			
D JOE SMITH DIRECTOR	4 00	Х						0	0	0			
DAN TREIN DIRECTOR	4 00	Х						0	0	0			
DAVID L NELSON DIRECTOR AT LARGE	2 00	Х						0	0	0			
DAVID S NELSON DIRECTOR	4 00	х						0	0	0			
DAVID WHITAKER DIRECTOR AT LARGE	3 00	Х						0	0	0			
DEAN ROSS DIRECTOR	1 00	Х						0	0	0			
DEBBY BREHM DIRECTOR	2 00	Х						0	0	0			
DEE DEE MCGRANE HONORARY VICE PRESIDENT	1 00	Х						0	0	0			
DENNY HASSETT DIRECTOR	2 00	Х						0	0	0			
DICK MONAHAN SECOND VICE PRESIDENT	10 00	Х		х				0	0	0			
DIRK JONES DIRECTOR	1 00	Х						0	0	0			
DON BELL DIRECTOR	1 00	Х						0	0	0			
DON BURT PAST PRESIDENT	1 00	Х						1,500	0	0			
DONALD R TOPLIFF DIRECTOR	5 00	Х						0	0	0			
DORN PARKINSON DIRECTOR	1 00	Х						0	0	0			
DORVAN SOLBERG DIRECTOR EMERITUS	10 00	Х						0	0	0			
DR CALVIN R WHITE DIRECTOR	1 00	Х						0	0	0			
DR CAROLE J GABOURY DIRECTOR AT LARGE	1 00	х						0	0	0			

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per	Posi t	tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
DD DICKCON WADNED			"			<u> </u>						
DR DICKSON VARNER DIRECTOR	2 00	Х						0	0	0		
DR MICHAEL MARTIN DIRECTOR	2 00	Х						0	0	0		
DR R M CHRISTENSEN DIRECTOR AT LARGE	1 00	х						0	0	0		
DR RONALD WOHLIN DIRECTOR	1 00	Х						0	0	0		
DR TOMMY HAYS DIRECTOR	1 00	Х						0	0	0		
DUANE MCDAVITT HONORARY VICE PRESIDENT	1 00	Х						0	0	0		
DUANE W WALKER DIRECTOR AT LARGE	1 00	Х						0	0	0		
DUAYNE DIDERICKSEN DIRECTOR	8 00	Х						0	0	0		
EF ALDERSON HONORARY VICE PRESIDENT	1 00	Х						0	0	0		
ED MURRAY DIRECTOR AT LARGE	2 00	Х						0	0	0		
EDWARD J MCNELIS DIRECTOR	10 00	Х						0	0	0		
EDWARD L SQUIRES HONORARY VICE PRESIDENT	1 00	Х						0	0	0		
FLOYD E WISE DIRECTOR	1 00	Х						0	0	0		
FRANK D HOWELL PAST PRESIDENT	1 00	Х						0	0	0		
FRANK G MERRILL PAST PRESIDENT	5 00	Х						0	0	0		
FRANK VESSELLS III PAST PRESIDENT	1 00	Х						0	0	0		
FRITZ LEEMAN DIRECTOR	1 00	Х						0	0	0		
GALE LITTLE DIRECTOR	5 00	Х						0	0	0		
GARY LYNN OLSON DIRECTOR	1 00	Х						0	0	0		
GAYLA DRAKE MCCULLOCH DIRECTOR	1 00	Х						0	0	0		
GENE GRAVES MEMBER OF EXECUTIVE COMM	10 00	Х		х				0	0	0		
GENE PARKER DIRECTOR	2 00	Х						0	0	0		
GENEVIEVE MATHESON DIRECTOR EMERITUS	1 00	Х						0	0	0		
GEORGA M SUTTON DIRECTOR	1 00	Х						0	0	0		
GEORGE PHILLIPS DIRECTOR	1 00	Х						0	0	0		

Compensated Employees, and Independent Contractors													
(A) Name and Title	(B) Average hours per	Posi t	tion ((che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation			
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations			
GEORGIANNA V RENOUARD DIRECTOR	1 00	x						О	О	0			
GIL SWITZER DIRECTOR AT LARGE	1 00	х						0	0	0			
GINGER HYLAND PAST PRESIDENT	1 00	×						0	0	0			
GLEN GABEL DIRECTOR	1 00	Х						10,700	0	0			
GLENN BLODGETT DIRECTOR	1 00	Х						0	0	0			
GLORIA ENGER DIRECTOR EMERITUS	1 00	Х						0	0	0			
GRETCHEN MATHES DIRECTOR	1 00	Х						0	0	0			
GUNNAR R OTNESS HONORARY VICE PRESIDENT	2 00	Х						0	0	0			
GUS BARAKIS JR DIRECTOR	1 00	Х						0	0	0			
HARRY A KNIGHT DIRECTOR	1 00	Х						0	0	0			
HEATHER L THRAPP MAUCK DIRECTOR	1 00	Х						0	0	0			
HOMER R STUDE DIRECTOR AT LARGE	2 00	Х						0	0	0			
HOWARD R WEISS PAST PRESIDENT	1 00	Х						0	0	0			
J D YATES DIRECTOR	2 00	Х						0	0	0			
J WADE ELLERBROEK JR DIRECTOR	2 00	Х						0	0	0			
JACKIE KRSHKA DIRECTOR	1 00	Х						0	0	0			
JAMES A RUDOLPH DIRECTOR	2 00	Х						0	0	0			
JAMES BARTON PAST PRESIDENT	2 00	Х						0	0	0			
JAMES E HELZER PRESIDENT	20 00	Х		х				0	0	0			
JAMES M ELLER III DIRECTOR	2 00	×						0	0	0			
JAMES R HOOTMAN DIRECTOR	1 00	Х						0	0	0			
JANE BLAIR DARNELL DIRECTOR EMERITUS	1 00	Х						0	0	0			
JANET NEWTON DIRECTOR	2 00	Х						0	0	0			
JEFF TERPSTRA DIRECTOR	1 00	Х						0	0	0			
JERRY L MATTHEWS DIRECTOR AT LARGE	1 00	х						0	0	0			

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage Po hours per		tion (che	')			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
JERRY W FULLER DIRECTOR	1 00	Х						0	0	0
JERRY WINDHAM PAST PRESIDENT	1 00	Х						0	0	0
JIM J SHOEMAKE PAST PRESIDENT	1 00	Х						0	0	0
JIM PURDY DIRECTOR	1 00	х						0	0	0
JO ANNE PERLICH DIRECTOR	1 00	Х						0	0	0
JOE CARTER DIRECTOR AT LARGE	1 00	х						30,300	0	0
JOE H YOUNG HONORARY VICE PRESIDENT	1 00	х						0	0	0
JOHANNES ORGELDINGER FIRST VICE PRESIDENT	15 00	Х		Х				0	0	0
JOHN ANDREINI DIRECTOR	2 00	Х						0	0	0
JOHN BOBENRIETH II DIRECTOR	1 00	Х						0	0	0
JOHN D HAMMES DIRECTOR	1 00	Х						0	0	0
JOHN H SEDGWICK DIRECTOR	1 00	Х						0	0	0
JOHN HOVDE DIRECTOR	1 00	Х						0	0	0
JOHN PIPKIN DIRECTOR	2 00	Х						0	0	0
JOHN R HARDY DIRECTOR EMERITUS	1 00	Х						0	0	0
JOHN R SHAW JR DIRECTOR	1 00	Х						0	0	0
JOHN SCHMAHL DIRECTOR	2 00	Х						0	0	0
JOHNE DOBBS MEMBER OF EXECUTIVE COMM	2 00	Х						0	0	0
JOHNNNY TROTTER DIRECTOR	1 00	Х						0	0	0
JOSE A JIMENEZ MANGAS DIRECTOR	2 00	Х						0	0	0
JOSEPH H MCALLISTER DIRECTOR	1 00	Х						0	0	0
JOYCE A WYATT DIRECTOR AT LARGE	1 00	Х						0	0	0
JUDY COY-HORTON DIRECTOR	1 00	Х						0	0	0
JULIE DAY HONORARY VICE PRESIDENT	1 00	Х						0	0	0
KAREN A BINGHHAM DIRECTOR EMERITUS	1 00	×						0	0	0

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per		tion (that a	che	')	_	ı	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
KATE LEHANE JOHNSON DIRECTOR	1 00	×						0	0	0
KELLY BOLES CHAPMAN DIRECTOR	4 00	Х						0	0	0
KELVIN CHILDERS DIRECTOR	1 00	х						0	0	0
KEN COCHRANE DIRECTOR	1 00	х						0	0	0
KEN MUMY PAST PRESIDENT	20 00	х		х				0	0	0
KEN PAUTZKE DIRECTOR	3 00	х						0	0	0
KENNETH BANKS DIRECTOR	2 00	Х						0	0	0
KENNETH T SMITH PAST PRESIDENT	1 00	Х						0	0	0
LANCE R TREPTOW DIRECTOR AT LARGE	1 00	х						2,000	0	0
LARRY LARSON DIRECTOR	1 00	х						0	0	0
LAUREL B CAPURRO-WACHTEL DIRECTOR	1 00	х						0	0	0
LAUREL WALKER-DENTON DIRECTOR	1 00	Х						0	0	0
LAWRENCE A LEMKE DIRECTOR	2 00	Х						0	0	0
LESLIE VAGNEUR LANGE DIRECTOR	2 00	Х						500	0	0
LLOYD BENOIT JR DIRECTOR	1 00	Х						0	0	0
LORI PFAFF DIRECTOR	1 00	Х						0	0	0
LORI S BUCHOLZ DIRECTOR	3 00	Х						0	0	0
LUKE CASTLE DIRECTOR	2 00	Х						0	0	0
M O BREEDING HONORARY VICE PRESIDENT	1 00	Х						0	0	0
MARGO LEA BALL DIRECTOR	2 00	х						11,200	0	0
MARILYN RANDALL DIRECTOR	2 00	х						1,000	0	0
MARK DUNHAM DIRECTOR	1 00	х						0	0	0
MARK S CLOUDT DIRECTOR	10 00	х						0	0	0
MARNIE SOMERS DIRECTOR	10 00	х						0	0	0
MARTEN A CLARK PAST PRESIDENT	1 00	×						0	0	0

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	Posi t	tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
MARY HANNAGAN DIRECTOR	1 00	х						0	0	0
MATT R WITMAN DIRECTOR	2 00	х						0	0	0
MEREDITH EDMONDSON DIRECTOR EMERITUS	2 00	Х						0	0	0
MICHAEL D MURPHY DIRECTOR	2 00	Х						0	0	0
MICHAEL JENNINGS DIRECTOR	1 00	Х						0	0	0
MICHAEL L SWAIN DIRECTOR	1 00	Х						0	0	0
MICHAELA KAYSER DIRECTOR	1 00	Х						2,000	0	0
MICHEL H CLITES DIRECTOR	1 00	Х						0	0	0
MIKE J PERKINS PAST PRESIDENT	1 00	х						1,500	0	0
MILTON RIGETTI DIRECTOR	2 00	Х						0	0	0
NANCY A MARTIN DIRECTOR	1 00	Х						0	0	0
P G PAWLEY-WILSON DIRECTOR	1 00	Х						0	0	0
PARIS WIXON DIRECTOR	1 00	Х						0	0	0
PATTI CARTER-PRATT DIRECTOR	10 00	Х						0	0	0
PATTI L COLBERT DIRECTOR	2 00	Х						0	0	0
PAUL E BAILEY DIRECTOR	2 00	Х						0	0	0
PAUL KNAPPER DIRECTOR AT LARGE	4 00	Х						0	0	0
PAUL LINDSEY JR DIRECTOR	2 00	Х						0	0	0
PAUL TREADWELL DIRECTOR	1 00	Х						0	0	0
PETE KYLE DIRECTOR	1 00	Х						0	0	0
PETER J COFRANCESCO III MEMBER OF EXECUTIVE COMM	10 00	Х		х				0	0	0
R C JONES DIRECTOR AT LARGE	1 00	Х						0	0	0
R H STEVENS JR PAST PRESIDENT	2 00	Х						0	0	0
RALPH SEEKINS DIRECTOR	1 00	Х						0	0	0
RANDY ALDERSON DIRECTOR	8 00	×						0	0	0

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per		tion (that a	che	')	_	T	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
RICHARD L HARRIS DIRECTOR AT LARGE	1 00	х						0	0	0
RICHARD SHIFFLER DIRECTOR	5 00	Х						0	0	0
RICK ADKINS DIRECTOR	1 00	Х						0	0	0
RICK BAILEY DIRECTOR	1 00	Х						0	0	0
RICK C JOHNS PAST PRESIDENT	1 00	Х						0	0	0
RICK CHAYER DIRECTOR	1 00	х						0	0	0
ROB BROWN PAST PRESIDENT	1 00	Х						0	0	0
ROBBIE RAINER DIRECTOR	1 00	Х						0	0	0
ROBERT C MILKIE DIRECTOR EMERITUS	1 00	Х						0	0	0
ROBERT C NORRIS PAST PRESIDENT	1 00	Х						0	0	0
ROBERT E BLAKEMAN DIRECTOR AT LARGE	10 00	Х						0	0	0
RO GER ELDER DIRECTO R	4 00	Х						0	0	0
RONALD D SMITH DIRECTOR	1 00	Х						0	0	0
RONALD J HARTLEY DIRECTOR	1 00	Х						0	0	0
ROSS ROARK DIRECTOR	1 00	Х						0	0	0
RUTH R DISMUKE-BLAKELY DIRECTOR	1 00	Х						0	0	0
SAM ROSE DIRECTOR	1 00	Х						14,900	0	0
SANDRA K ARLEDGE DIRECTOR	5 00	Х						0	0	0
SANDRA VAUGHN DIRECTOR	6 00	Х						2,800	0	0
SARAH N KUNKLE DIRECTOR	1 00	Х						0	0	0
SCOTT A MERRITT DIRECTOR	3 00	Х						0	0	0
SCOTT NEUMAN DIRECTOR	1 00	Х						5,600	0	0
SCOTT R FLACH DIRECTOR	1 00	Х						0	0	0
SHANNON BURWASH DIRECTOR	1 00	Х						0	0	0
SHAWN T MAGEE DIRECTOR	5 00	Х						0	0	0

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	Posi t	tion (that a	(che	')		ı	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
SHELDON W SO DERBERG	1 00	х						0	0	0
DIRECTOR SHERRI A TEARNEY DIRECTOR	10 00							0	0	0
SKIP SALOME DIRECTOR	2 00	Х						0	0	0
STARLET HUNT DIRECTOR	1 00	Х						0	0	0
STEPHEN J KLEBERG PAST PRESIDENT	1 00	Х						0	0	0
STEVEN CLAY OSBORNE DIRECTOR	5 00	Х						0	0	0
STUART J SPROUSE DIRECTOR EMERITUS	10 00	Х						0	0	0
SUZY JEANE DIRECTOR	1 00	Х						0	0	0
THOMAS H BRADBURY DIRECTOR EMERITUS	1 00	Х						0	0	0
THOMAS M DOWNING DIRECTOR	1 00	Х						0	0	0
THOMAS R SCOTT DIRECTOR AT LARGE	1 00	Х						0	0	0
TOM BIVINS DIRECTOR	3 00	Х						0	0	0
TOM MCBEATH DIRECTOR	1 00	Х						0	0	0
TOM R LENZ HONORARY VICE PRESIDENT	1 00	Х						0	0	0
TRACY LEANNE ADAMS DIRECTOR	4 00	Х						0	0	0
ULLRICH VEY DIRECTOR AT LARGE	12 00	Х						0	0	0
VAUGHN M COOK DIRECTOR	10 00	Х						0	0	0
VINCENT O GENCO DIRECTOR	5 00	Х						0	0	0
W MICHAEL JUNG DIRECTOR	1 00	Х						0	0	0
W R BRIGDEN DIRECTOR	1 00	Х						0	0	0
WALT KNORPP DIRECTOR	1 00	Х						0	0	0
WALTER FLETCHER PAST PRESIDENT	1 00	Х						0	0	0
WALTER L KIMES DIRECTOR	1 00	Х						0	0	0
WALTER T HUGHES DIRECTOR AT LARGE	1 00	Х						0	0	0
WANDA WATERS HONORARY VICE PRESIDENT	1 00	×						0	0	0

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	Average Position (check all hours that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
WAYNE HALVORSON DIRECTOR	1 00	Х						0	0	0
WILLARD A RHODES DIRECTOR EMERITUS	1 00	Х						0	0	0
WILLARD B NORDICK DIRECTOR EMERITUS	1 00	х						0	0	0
WILLIAM M CROUCH DIRECTOR EMERITUS	2 00	х						0	0	0
WILLIAM R HORTON DIRECTOR	1 00	х						0	0	0
DONALD TREADWAY JR EXECUTIVE VP	60 00			х				289,010	0	35,270
TRENTON TAYLOR TREASURER	60 00			х				155,862	0	25,967
BILLIE BREWER PRIOR EXECUTIVE VP	40 00			X				520,143	0	26,825
WILLIAM ROSS EXE DIR OF JUDGES	40 00				x			177,349	0	23,233
CAM FOREMAN PRIOR EXE DIR OF SHOWS	40 00				x			112,362	0	4,846
GARY GRIFFITH PRIOR EXE DIR OF REG	40 00				х			197,539	0	2,345
GARY CARPENTER PRIOR DIRECTOR FOUNDATION	40 00				х			40,683	124,236	17,654
BILLY SMITH EXE DIR OF IT	40 00					Х		136,752	0	16,843
KAREN LATTA EXE DIRECTOR OF MARKETING	40 00					Х		109,993	0	10,298
TOM PERSECHINO DIRECTOR OF MARKETING	40 00					Х		131,744	0	7,039
ROBERT PIERCE ATTORNEY	40 00					х		127,735	0	11,169

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
SPONSORSHIP INCOME	541,800	7,826,690	7,776,690	50,000	
RACING CHALLENGE INCOM	900,099	6,138,642	6,138,642		
PUBLICATION ADVERTISIN	541,800	5,449,087		5,449,087	
REGISTRATION	900,099	5,109,313	5,109,313		
WORLD CHAMPIONSHIP SHO	900,099	3,847,393	3,847,393		

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
PUBLICATIONS	3,187,495			
WORLD CHAMPIONSHIP SHOW	2,653,915			
RC NOMINATIONS EXPENSE	1,979,444			
SPONSORSHIPS	1,456,102			
GENOTYPING EXPENSE	1,209,233			