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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)

OMB No. 1545-0047

2010

Open to Public  
Inspection

► The organization may have to use a copy of this return to satisfy state reporting requirements.

## A For the 2010 calendar year, or tax year beginning and ending

B Check if applicable

Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

C Name of organization  
ATLANTA GOLDEN RETRIEVER CLUB, INC.

Doing Business As

Number and street (or P O box if mail is not delivered to street address)  
1393 BERNINGER DRIVE

Room/suite

City or town, state or country, and ZIP + 4  
HOSCHTON, GA 30548F Name and address of principal officer. LYNNE FLATER  
1216 GRAND VIEW DRIVE SE, MABLETON, GA 3012I Tax-exempt status:  501(c)(3)  501(c)(4) (insert no.)  4947(a)(1) or  527

J Website: ► ATLANTAGOLDENS.ORG

K Form of organization  Corporation  Trust  Association  Other ►

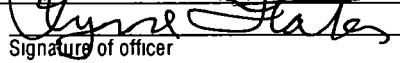
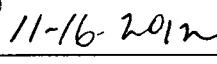
L Year of formation 2012 M State of legal domicile GA

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE ATLANTA GOLDEN RETRIEVER CLUB, INC. IS ESTABLISHED TO ENCOURAGE AND PROMOTE THE RESPONSIBLE		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	60
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	1,566.	1,612.
	9 Program service revenue (Part VIII, line 2g)	12,478.	23,415.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,044.	25,027.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ► 0.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	14,383.	21,000.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	14,383.	21,000.
	19 Revenue less expenses. Subtract line 18 from line 12	-339.	4,027.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	7,265.	11,292.
	22 Net assets or fund balances Subtract line 21 from line 20	0.	0.
		7,265.	11,292.

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	►  Signature of officer	Date	 11-16-2011
	► LYNNE FLATER, TREASURER Type or print name and title		
Paid Preparer	Print/Type preparer's name GEORGE C POPE	Preparer's signature	Date 11/16/11
Use Only	Firm's name ► FRAZIER & DEETER, L.L.C.		Firm's EIN ►
	Firm's address ► 600 PEACHTREE STREET, SUITE 1900 ATLANTA, GA 30308		Phone no (404) 253-7500

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

032001 02-22-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2010)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

13/98

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III 

1 Briefly describe the organization's mission:

THE ATLANTA GOLDEN RETRIEVER CLUB, INC. IS ESTABLISHED TO ENCOURAGE AND PROMOTE THE RESPONSIBLE OWNERSHIP OF GOLDEN RETRIEVERS; TO ENCOURAGE AND PROMOTE THE QUALITY BREEDING OF PURE-BRED GOLDEN RETRIEVERS AND TO DO ALL POSSIBLE TO BRING THEIR NATURAL QUALITIES TO

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

 Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

 Yes  No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 3,194. including grants of \$ ) (Revenue \$ 3,770.)  
**EYE AND HEART CLINIC - IN AN EFFORT TO PROMOTE AND ENCOURAGE PROPER PREVENTIVE AND MEDICAL CARE, THE ORGANIZATION HOSTS AN EYE AND HEART CLINIC ANNUALLY. VETERINARIANS ARE ON LOCATION TO EXAMINE THE DOGS IN ATTENDANCE FOR EYE AND HEART HEALTH. THIS CLINIC IS OPEN TO DOGS OF ALL BREEDS.**

4b (Code: ) (Expenses \$ 14,316. including grants of \$ ) (Revenue \$ 17,725.)  
**NATIONAL SPECIALTY EVENTS - IN 2011, THE ORGANIZATION HOSTED THE NATIONAL SPECIALTY EVENT FOR THE GOLDEN RETRIEVER CLUB OF AMERICA. PREPARATIONS FOR THIS EVENT BEGAN IN 2010 WITH REVENUES AND EXPENDITURES BEING INCURRED. THE NATIONAL SPECIALTY EVENT IS AN EVENT OF GREAT PROPORTION COMPARED TO ROUTINE ANNUAL EVENTS. ALL OF THE PROGRAM SERVICES OF THE ORGANIZATION ARE ALSO HOSTED AT THE NATIONAL SPECIALTY EVENT INCLUDING EYE AND HEART CLINIC, WC/WCX HUNT TEST, CONFORMATION SPECIALTY AND CCA TEST, AGILITY TRIALS, AND OBEDIENCE/RALLY TRIALS. HOWEVER, SINCE THE REVENUE AND EXPENSES FOR THE NATIONAL SPECIALTY EVENT ARE SO MUCH HIGHER THAN OUR ROUTINE PROGRAM SERVICE REVENUE AND EXPENSES, THE VARIOUS SPECIALTY EVENTS SPONSORED AT THIS NATIONAL SPECIALTY EVENT ARE COMBINED UNDER THIS**

4c (Code: ) (Expenses \$ 2,311. including grants of \$ ) (Revenue \$ 1,596.)  
**CONFORMATION SPECIALTY AND CERTIFICATE OF CONFORMATION ASSESSMENT TESTS (CCA) - THE ORGANIZATION HOSTS CONFORMATION SPECIALTY SHOWS FOR AKC REGISTERED GOLDEN RETRIEVERS IN WHICH CERTIFIED AKC JUDGES DETERMINE HOW A PARTICULAR DOG PERFORMS CERTAIN DUTIES AS COMPARED TO CONFORMING TO THE STANDARDS FOR THE BREED. THE AKC CERTIFIED JUDGES AWARD A CERTIFICATE OF CONFORMATION ASSESSMENT (CCA) AS THE RESULT OF THE INDIVIDUAL DOG'S PERFORMANCE AGAINST THESE STANDARDS. AKC CERTIFIED JUDGES ARE COMPENSATED AT MARKET RATES FOR THEIR SERVICES IN AWARDING THESE CERTIFICATES. ORGANIZATION MEMBERS AND MEMBERS OF THE COMMUNITY ARE UTILIZED AS VOLUNTEERS FOR THESE EVENTS.**

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 1,055. including grants of \$ ) (Revenue \$ 324.)

4e Total program service expenses ► 20,876.

**Part IV Checklist of Required Schedules**

	<b>Yes</b>	<b>No</b>
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	X
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2	X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
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? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. <ul style="list-style-type: none"> <li>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i></li> <li>b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i></li> <li>c 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? <i>If "Yes," complete Schedule D, Part VIII</i></li> <li>d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i></li> <li>e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i></li> <li>f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i></li> </ul>	11a	X
11b	11b	X
11c	11c	X
11d	11d	X
11e	11e	X
11f	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a	X
12b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States? <ul style="list-style-type: none"> <li>b 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? <i>If "Yes," complete Schedule F, Parts I and IV</i></li> </ul>	14a	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	15	X
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? <i>If "Yes," complete Schedule G, Part I</i>	16	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	17	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	18	X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	19	X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20a	X
	20b	

## Part IV Checklist of Required Schedules (continued)

		Yes	No
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	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a	X
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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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	X
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	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
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	X
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	X
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	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
36	<b>Section 501(c)(3) organizations.</b> 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	X
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	X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V 

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a | 2  
 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? 1c |

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a | 0

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. (see instructions)

3a Did the organization have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

b If "Yes," enter the name of the foreign country: ►

See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?

6a 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?

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

**7 Organizations that may receive deductible contributions under section 170(c).**

a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?

b If "Yes," did the organization notify the donor of the value of the goods or services provided?

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

d If "Yes," indicate the number of Forms 8282 filed during the year 7d |

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?

8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

**9 Sponsoring organizations maintaining donor advised funds.**

a Did the organization make any taxable distributions under section 4966?

b Did the organization make a distribution to a donor, donor advisor, or related person?

**10 Section 501(c)(7) organizations. Enter:**

a 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 10b |

**11 Section 501(c)(12) organizations. Enter:**

a Gross income from members or shareholders 11a |

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b |

**12a Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b |

**13 Section 501(c)(29) qualified nonprofit health insurance issuers.**

a Is the organization licensed to issue qualified health plans in more than one state?

**Note.** See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b |

c Enter the amount of reserves on hand 13c |

**14a Did the organization receive any payments for indoor tanning services during the tax year?**

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b |

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

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

### Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year 

1a	7
1b	7

b Enter the number of voting members included in line 1a, above, who are independent

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?

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?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

6 Does the organization have members or stockholders?

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?

b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body?

b Each committee with authority to act on behalf of the governing body?

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

	Yes	No
1a	7	
1b	7	
2	X	
3	X	
4	X	
5	X	
6	X	
7a	X	
7b	X	
8a	X	
8b	X	
9		X

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Does the organization have local chapters, branches, or affiliates?

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?

11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

12a Does the organization have a written conflict of interest policy? If "No," go to line 13

b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

13 Does the organization have a written whistleblower policy?

14 Does the organization have a written document retention and destruction policy?

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?

a The organization's CEO, Executive Director, or top management official

b Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

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?

	Yes	No
10a	X	
10b		
11a	X	
12a		X
12b		
12c		
13	X	
14	X	
15a		X
15b		X
16a		X
16b		

### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ►GA

18 Section 6104 requires an organization to make its Forms 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.

Own website  Another's website  Upon request

19 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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► LYNNE F. FLATER, TREASURER - 678-472-1603  
1216 GRAND VIEW DRIVE SE, MABLETON, GA 30126



**Part VII** **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

**2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►**

0

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

## Part VIII Statement 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	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b	1,612.			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f \$					
	<b>h Total. Add lines 1a-1f</b>	<b>1,612.</b>				
Program Service Revenue	2 a NATIONAL SPECIALTY EVE	Business Code 900099	17,725.	17,725.		
	b EYE AND HEART CLINIC	900099	3,770.	3,770.		
	c CONFORMATION SPECIALTY	900099	1,596.	1,596.		
	d OTHER PROGRAM SERVICE	900099	224.	224.		
	e AGILITY TRIALS	900099	100.	100.		
	f All other program service revenue					
	g Total. Add lines 2a-2f		<b>23,415.</b>			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)					
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real	(ii) Personal			
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
b Less: direct expenses	b					
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code					
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		<b>25,027.</b>	<b>23,415.</b>	<b>0.</b>	<b>0.</b>	
12 Total revenue. See instructions						

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	124.		124.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a NATIONAL SPECIALTY EVEN	14,316.	14,316.		
b EYE AND HEART CLINIC	3,194.	3,194.		
c CONFORMATION SPECIALTY	2,311.	2,311.		
d OTHER PROGRAM SERVICE E	1,000.	1,000.		
e WC/WCX HUNT TEST	55.	55.		
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	21,000.	20,876.	124.	0.
26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

## Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	7,265.	1	11,292.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	7,265.	16	11,292.
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	0.	26	0.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	0.	30	0.
	31 Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
	32 Retained earnings, endowment, accumulated income, or other funds	7,265.	32	11,292.
	33 Total net assets or fund balances	7,265.	33	11,292.
	34 Total liabilities and net assets/fund balances	7,265.	34	11,292.

**Part XI: Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI 

1 Total revenue (must equal Part VIII, column (A), line 12)	1	25,027.
2 Total expenses (must equal Part IX, column (A), line 25)	2	21,000.
3 Revenue less expenses. Subtract line 2 from line 1	3	4,027.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,265.
5 Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	11,292.

**Part XII: Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII 

1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?  
 b Were the organization's financial statements audited by an independent accountant?  
 c If "Yes" to line 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

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 separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and 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?  
 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.

	Yes	No
2a	X	
2b	X	
2c		
3a		X
3b		

Form 990 (2010)

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

ATLANTA GOLDEN RETRIEVER CLUB, INC.

Employer identification number  
45-4228943

**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**

OWNERSHIP OF GOLDEN RETRIEVERS; TO ENCOURAGE AND PROMOTE THE QUALITY  
BREEDING OF PURE-BRED GOLDEN RETRIEVERS AND TO DO ALL POSSIBLE TO BRING  
THEIR NATURAL QUALITIES TO PERFECTION; TO PROTECT AND ADVANCE THE  
INTERESTS OF THE BREED BY ENCOURAGING SPORTSMANSLIKE COMPETITION AT DOE  
SHOWS, OBEDIENCE TRIALS, AND FIELD TRIALS; TO CONDUCT SANCTIONED AND  
LICENSED SPECIALTY SHOWS, OBEDIENCE TRIALS, FIELD TRIALS, AND AGILITY  
TRIALS UNDER THE RULES AND REGULATIONS OF THE AMERICAN KENNEL CLUB.

**FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**

PERFECTION; TO PROTECT AND ADVANCE THE INTERESTS OF THE BREED BY  
ENCOURAGING SPORTSMANSLIKE COMPETITION AT DOE SHOWS, OBEDIENCE TRIALS,  
AND FIELD TRIALS; TO CONDUCT SANCTIONED AND LICENSED SPECIALTY SHOWS,  
OBEDIENCE TRIALS, FIELD TRIALS, AND AGILITY TRIALS UNDER THE RULES AND  
REGULATIONS OF THE AMERICAN KENNEL CLUB.

**FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:**

NATIONAL SPECIALTY EVENT RATHER THAN LISTED IN OUR ROUTINELY SPONSORED  
PROGRAM SERVICES.

**FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:**

AGILITY TRIALS AND OBEDIENCE/RALLY TRIALS - AGILITY TRIALS ARE HOSTED  
BY THE ORGANIZATION AND ARE OPEN TO ALL AKC REGISTERED BREEDS.

OBEDIENCE/RALLY TRIALS ARE OPEN TO AKC REGISTERED GOLDEN RETRIEVERS.

IN THESE EVENTS, AKC LICENSED JUDGES ARE UTILIZED TO OBSERVE THE DOG'S  
BEHAVIOR, RESPONSE TO COMMANDS, AND AGILITY AND AWARDED AN APPROPRIATE

Name of the organization

ATLANTA GOLDEN RETRIEVER CLUB, INC.

Employer identification number  
45-4228943

CERTIFICATE. THE LICENSED JUDGES ARE COMPENSATED FOR THEIR SERVICES AT THESE EVENTS AT MARKET RATES. VOLUNTEERS FROM THE ORGANIZATION AS WELL AS THE COMMUNITY ARE UTILIZED FOR THESE EVENTS.

EXPENSES \$ 1,055. INCLUDING GRANTS OF \$ 0. REVENUE \$ 324.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS.

THERE ARE THREE TYPES OF MEMBERSHIP WITHIN THE ORGANIZATION: INDIVIDUAL MEMBERSHIP - INDIVIDUAL 18 YEARS OR OLDER MUST BE A MEMBER IN GOOD STANDING WITH THE AMERICAN KENNEL CLUB; FAMILY MEMBERSHIP - THIS TYPE OF MEMBERSHIP CONSISTS OF TWO (2) INDIVIDUALS 18 YEARS OR OLDER, RESIDING IN THE SAME HOME, AND BOTH MUST BE MEMBERS IN GOOD STANDING WITH THE AMERICAN KENNEL CLUB; NON-VOTING JUNIOR MEMBERSHIP - THIS TYPE OF MEMBERSHIP IS AVAILABLE TO INDIVIDUALS 17 YEARS OR YOUNGER AND MUST BE A MEMBER IN GOOD STANDING WITH THE AMERICAN KENNEL CLUB. NON-VOTING JUNIOR MEMBER MAY NOT BE ELECTED TO HOLD OFFICE WITHIN THE ORGANIZATION.

APPLICATION FOR MEMBERSHIP MAY BE OBTAINED FROM THE ORGANIZATION'S WEBSITE AND COMPLETED BY THE INDIVIDUAL WISHING TO JOIN THE ORGANIZATION. THE APPLICATION SHALL BE COMPLETED TO STATE THE NAME, ADDRESS, AND OCCUPATION OF THE APPLICANT, MUST CONTAIN A STATEMENT THAT THE APPLICANT IS A MEMBER IN GOOD STANDING WITH THE AMERICAN KENNEL CLUB, AND MUST CONTAIN THE ENDORSEMENT OF TWO CURRENT MEMBERS OF THE ORGANIZATION ALONG WITH THE MEMBERSHIP DUES. ONCE THE COMPLETED APPLICATION AND MEMBERSHIP DUES IS RECEIVED BY THE ORGANIZATION'S SECRETARY, AT THE NEXT ORGANIZATION MEETING, THE MEMBERS IN ATTENDANCE WILL BE ASKED TO VOTE ON ACCEPTANCE OF NEW MEMBER. AND WITH AFFIRMATIVE VOTES OF TWO-THIRDS OF THE MEMBERS PRESENT, THE NEW MEMBER IS ADMITTED TO THE ORGANIZATION.

Name of the organization

ATLANTA GOLDEN RETRIEVER CLUB, INC.

Employer identification number  
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FORM 990, PART VI, SECTION A, LINE 7A: THE OFFICERS AND THREE DIRECTORS SHALL BE ELECTED AT THE ANNUAL MEETING HELD IN JANUARY OF EACH YEAR. THE ELECTIONS ARE BY SECRET, WRITTEN BALLOT. THE OFFICERS (PRESIDENT, VICE PRESIDENT, SECRETARY, AND TREASURER) SHALL BE ELECTED BASED ON THE INDIVIDUAL RECEIVING THE HIGHEST NUMBER OF VOTES FOR HIS OR HER PARTICULAR OFFICE. THE THREE (3) MEMBERS OF THE BOARD OF DIRECTORS SHALL BE DETERMINED BY THE THREE (3) HIGHEST VOTES RECEIVED FOR ALL OF THE NOMINATED INDIVIDUALS FOR THE BOARD OF DIRECTORS.

IN SEPTEMBER OF EACH YEAR, THE GOVERNING BOARD SHALL SELECT A NOMINATION COMMITTEE CONSISTING OF THREE (3) MEMBERS PLUS TWO (2) ALTERNATES. NO PERSON SHALL BE APPOINTED TO THE NOMINATING COMMITTEE WHO MAY BE NOMINATED TO SERVE IN ANY CAPACITY FOR THE IMMEDIATELY SUCCEEDING TERM. THE GOVERNING BOARD SHALL SELECT A CHAIRMAN FOR THE NOMINATING COMMITTEE AND IT SHALL BE THE DUTY OF THE CHAIRMAN OF THE NOMINATING COMMITTEE TO CALL A MEETING OF THE NOMINATING COMMITTEE BY OCTOBER 1.

THE NONIMATING COMMITTEE SHALL NOMINATE ONE (1) CANDIDATE FOR EACH OFFICE AND THREE (1) CANDIDATE FOR EACH OF THE THREE MEMBERS OF THE BOARD POSITIONS. UPON RECEIPT OF THE NOMINATING COMMITTEE'S REPORT AND NOMNATIONS, THE SECRETARY SHALL NOTIFY EACH CLUB MEMBER IN WRITING OF THE CANDIDATES SO NOMINATED. THIS NOTIFICATION SHALL BE AT LEAST TWO (2) WEEKS PRIOR TO THE OCTOBER MEMBER MEETING.

ADDITIONAL NOMINATONS MAY BE MADE AT THE OCTOBER MEETING BY ANY MEMBER IN GOOD STANDING AND WHO IS IN ATTENDANCE AT THE OCTOBER MEETING.

NO INDIVIDUAL MAY BE NOMINATED TO MORE THAN ONE (1) POSITION IN ANY GIVEN

Name of the organization

ATLANTA GOLDEN RETRIEVER CLUB, INC.

Employer identification number  
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YEAR. ADDITIONAL NOMINATIONS MAY NOT BE MADE AT THE ANNUAL MEETING IN JANUARY AS THE OFFICERS AND DIRECTORS ARE VOTED UPON.

FORM 990, PART VI, SECTION A, LINE 7B: ALL MEMBERS IN GOOD STANDING SHALL BE ENTITLED TO ONE (1) VOTE AT ANY MEETING OF THE ORGANIZATION. A QUORUM FOR ANY SUCH MEETING SHALL BE TWENTY PERCENT (20%) OF THE MEMBERS IN GOOD STANDING. DATES, TIMES, AND PLACES OF THE MEETINGS SHALL BE ANNOUNCED TO THE MEMBERSHIP AT LEAST TEN (10) DAYS PRIOR TO ANY MEETING. MEMBERS ARE ALLOWED TO VOTE ON ANY ACTIVITY PRESENTED BY THE GOVERNING BOARD.

FORM 990, PART VI, SECTION B, LINE 11: EACH MEMBER OF THE GOVERNING BODY OF THE ORGANIZATION IS PROVIDED A COPY OF THE FORM 990 AND/OR 990-T FOR REVIEW PRIOR TO THE FILING OF SAID RETURN WITH THE APPROPRIATE TAX AUTHORITIES. THE GOVERNING BOARD SHALL REVIEW AND BE ABLE TO ASK QUESTIONS REGARDING THE FORM 990 AND/OR 990-T AT A MEETING OR CONFERENCE CALL PRIOR TO THE FILING OF SAID RETURN WITH THE APPROPRIATE TAX AUTHORITIES.

THE BOARD MEMBERS WHO HAVE REVIEWED THIS RETURN ARE NOT TAX PROFESSIONALS AND DO NOT HAVE THE EXPERTISE, KNOWLEDGE, OR EXPERIENCE TO PERSONALLY DETERMINE IF SPECIFIC INFORMATION REPORTED IN THE RETURN IS DERIVED AND PRESENTED CORRECTLY PURSUANT TO RELEVANT TAX LAWS AND REGULATIONS.

FORM 990, PART VI, SECTION C, LINE 18: FORM 1024 AND FORM 990 AND 990-T, IF APPLICABLE, IS MADE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENT ARE MADE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST. PRESENTLY, THERE IS NO CONFLICT OF INTEREST POLICY IN

Name of the organization

## ATLANTA GOLDEN RETRIEVER CLUB, INC.

**Employer identification number**  
**45-4228943**

PLACE; BUT A CODE OF ETHICS HAS BEEN ADOPTED BY THE ORGANIZATION AND IS  
POSTED ON ITS WEBSITE. THE ORGANIZATION HAS NO EMPLOYEES AND OFFICERS AND  
DIRECTORS ARE NOT COMPENSATED AS THE ORGANIZATION RELIES ON VOLUNTEERS FOR  
ALL ACTIVITIES.

ATLANTA GOLDEN RETRIEVER CLUB, INC.  
45-4228943  
LIST OF OFFICERS AND BOARD OF DIRECTOR MEMBERS

**2009**

**Penny Lites, President**  
**Kathy Smith, Vice President**  
**Julie McDaniel-Bell, Treasurer**  
**Mari Magmer, Secretary**  
**Jayne Cassella, Director**  
**Mary McElroy, Director**  
**Terri Everline, Director**

**2010**

**Penny Lites, President**  
**Kathy Smith, Vice President**  
**Julie McDaniel-Bell, Treasurer**  
**Mari Magmer, Secretary**  
**Jayne Cassella, Director**  
**Mary McElroy, Director**  
**Collette Jaynes, Director**

**2011**

**Penny Lites, President**  
**Kathy Smith, Vice President**  
**Julie McDaniel-Bell, Treasurer**  
**Beth Hart, Secretary**  
**Jayne Cassella, Director**  
**Mary McElroy, Director**  
**Collette Jaynes, Director**

The officers and directors for each of the above listed years, were not shown on the respective returns because the returns are being filed late. The officers and directors for 2012 are shown on the 2009, 2010, and 2011 returns. None of the officers or directors received any compensation as all officers and directors serve on a strictly volunteer basis.