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efile GRAPHIC print - DO NOT PROCESS

A For the 2010 calendar year, or tax year beginning 01-01-2010

C Name of organization

3411 N 5TH AVE

PORSCHE CLUB OF AMERICA ARIZONA REGION

As Filed Data -

Number and street (or P O box, if mail is not delivered to street address) Room/suite

DLN: 93492255006131

D Employer identification number

(602) 265-4500

86-0877550

E Telephone number

OMB No 1545-1150

Short Form Return of Organization Exempt From Income Tax

Form 990-EZ

Department of the Treasury Internal Revenue Service

Check if applicable

Address change

Name change

Initial return

(except black lung benefit trust or private foundation) Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)
All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

Open to Public Inspection

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

and ending 12-31-2010

Te	eminat	ted					(602) 26	55-4500	
_		d return on pending	City or town, state or country, and ZIP + 4 PHOENIX, AZ 85013			Group E Numbei	xemptio	n	
ΙWe	ebsit e	http://az.pca.or	only one) — 501(c)(3) 501(c)(7) ◄(insert no) 4947(a)(1) or	 527	re	equired	d to atta	ach Scl	ganızatıon ıs not nedule B
		_							or 990-PF)
\$5	0,000	A Form 990	inization is not a section 509(a)(3) supporting organization and -EZ or Form 990 return is not required though Form 990-N (e-p to file a return, be sure to file a complete return						
more,	, file	Form 990 instead					- \$		80,115
Pa	rt I		e, Expenses, and Changes in Net Assets or Fund B e organization used Schedule O to respond to any question in th			the ir	nstructı • •	ons for	Part I)
	1	Contribution	s, gifts, grants, and similar amounts received					1	
	2	Program serv	vice revenue including government fees and contracts					2	46,601
	3	Membership	dues and assessments					3	21,644
	4	Investment	ncome					4	
	5a	Gross amour	nt from sale of assets other than inventory	5a					
<u>a</u>	ь	Less cost o	rother basis and sales expenses	5b			0	1	
Revenue	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from	line 5a)) .			5c	
ő Œ	6	Gaming and	fundraising events						
	а	Gross income fr	om gaming (attach Schedule G if greater than \$15,000)	6a					
	b		e from fundraising events (not including \$ <u>0</u> of contributions fron ine 1) (attach Schedule G if the sum of such gross income and c		_				
	С	Less direct	expenses from gaming and fundraising events	6с			0		
	d	Net income o	or (loss) from gaming and fundraising events (Add lines 6a and 6	b and s	ubtract	lıne 6	c)	6d	0
	7a	Gross sales	of inventory, less returns and allowances	7a		1	1,870		
	b	Less cost of	fgoods sold	7b		2	26,622		
	С	Gross profit	or (loss) from sales of inventory (Subtract line 7b from line 7a)					7c	-14,752
	8	Other revenu	ue (describe in Schedule O)					8	
	9	Total revenu	e. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8					9	53,493
	10	Grants and s	ımılar amounts paıd (lıst ın Schedule O)					10	800
	11	Benefits paid	l to or for members					11	
	12	Salaries, oth	er compensation, and employee benefits		•			12	
o O	13	Professional	fees and other payments to independent contractors				•	13	
Expenses	14	Occupancy,	rent, utilities, and maintenance		-		•	14	
EX	15	Printing, pub	lications, postage, and shipping		•			15	
	16	Other expens	ses (describe in Schedule O)					16	66,609
	17	Total expens	ses. Add lines 10 through 16			•		17	67,409
2	18	Excess or (d	eficit) for the year (Subtract line 17 from line 9)					18	-13,916
ው ያ	19	Net assets o	r fund balances at beginning of year (from line 27, column (A)) (i	must ag	ree witl	h			
Net.Assets		end-of-year	figure reported on prior year's return)				•	19	64,752
ž	20	Other change	es ın net assets or fund balances (explaın ın Schedule O) .					20	
	21	Net assets o	r fund balances at end of year Combine lines 18 through 20			. •	•	21	50,836

Part II Balance Sheets						
Check if the organization used	Schedule O to respond to	any question in t	this Part I		-	<u>I* </u>
(See the instruct	ions for Part II)		(A) Be	ginning of year		(B) End of year
22 Cash, savings, and investments .				54,615	22	42,538
23 Land and buildings					23	
24 Other assets (describe in Schedule O)			10,137	24	12,942
25 Total assets				64,752	25	55,480
26 Total liabilities (describe in Schedule (0)			•	26	4,644
27 Net assets or fund balances (line 27 of	[:] column (B) must aaree wit	th line 21)		64,752	27	50,836
Part III Statement of Program				,	Т	Expenses
Check if the organization used	=		this Part 1	ш . Г	1 '	quired for section 501
What is the organization's primary exempt TO PROMOTE THE HIGHEST STANDARD SHARE GOODWILL AND FELLOWSHIP EN HIGHEST STANDARDS OF OPERATING FRELATIONSHIPS WITH THE FACTORY, Describe what was achieved in carrying out describe the services provided, the number program title	S OF COURTESY AND SA IGENDERED BY OWNING PERFORMANCE OF THE M PEALERS, SERVICE PROV the organization's exempt	A PORSCHE TO MARQUE TO EST MIDERS, AND OT t purposes In a o	D MAINTA TABLISH THER CLU clear and	AIN THE JBS concise manner,	org 494	(3) and 501(c)(4) anizations and section 47(a)(1) trusts, ional for others)
28 (3) PROVIDED ELEVEN PUBLICATION ARTICLES ABOUT VEHICLE REPAIR, SA MEMBERS		ECTS AND NEWS	S SENT T	O +/-500	30-	
· · · · · · · · · · · · · · · · · · ·		·		· · · · · · · · · · · · · · · · · · ·	28a	
	HE AMERICAN CANCER S N TO PUBLIC FOR EDUC ON AND FELLOWSHIP TH S AND PUBLIC s amount includes foreign (SOCIETY THE E ATION THE EV HE PROGRAM A grants, check he	VENT PRENT PROLSO INCL	ROVIDED VIDED THE LUDED AN	29a	
30 (1) DRIVERS EDUCATION - HELD EVENTER PROVIDED TO TEACH CAR CONTINTERMEDIATE AND ADVANCED LEVELEVENT (Grants \$) If this	ROL AND ADVANCE DRI\	/ING SKILLS TO ELY 30-40 DRIV	STUDEN VERS AT	NT, BEGINNER, TENDED EACH	30a	
31 O ther program services (describe in Scl (Grants \$) If this	nedule O) s amount includes foreign (grants, check he	 re	· • r	31a	
32 Total program service expenses (add line	es 28a through 31a) .				32	
Part IV List of Officers, Directors, True	stees, and Key Employees.	List each one even	ıf not compe	ensated (See the ins	truction	ns for Part IV)
Check if the organization used		any question in t	this Part I			<u>,</u>
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensa (If not paid enter -0)	d, en	(d) Contributions mployee benefit p leferred compens	lans &	(e) Expense account and other allowances
See Additional Data Table						

				rage
Pa	Other Information (Note the statement requirements in the instructions for Part V.)			
	Check if the organization used Schedule O to respond to any question in this Part V			1
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed cop	,		No
	of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income of Form 990-T	n		
а	Did the organization have unrelated business gross income of $$1,000$ or more or was it a section $501(c)(4)$, $502(c)(5)$, or $501(c)(6)$ organization subject to section $6033(e)$ notice, reporting, and proxy tax requirements?	35a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? (see instructions)	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 🕨 📗 37a			
b	Did the organization file Form 1120-POL for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on line 9	0		
b	Gross receipts, included on line 9, for public use of club facilities 39b	0		
40a	Section $501(c)(3)$ organizations. Enter amount of tax imposed on the organization during the year under			
	section 4911 , section 4912 , section 4912 , section 4955			
ь	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	_		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No
	List the states with which a copy of this return is filed 🕨			
42a	The organization's books are in care of Richard Avellone Telephone no	<u>(60</u>	2) 265	-4500
	3411 N 5TH AVE 500 Located at PHOENIX, AZ ZIP + 4	▶ 8	5013	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		No
	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.			
c	At any time during the calendar year, did the organization maintain an office outside of the U S ?	42c		No
	If "Yes," enter the name of the foreign country		•	•
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year			▶ □
44>	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of		Yes	No
	Form 990-EZ.	44-		N -
h	Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed	44a		No
D	instead of Form990-EZ	44b		l No
•	Did the organization receive any payments for indoor tanning services during the year?			""
•		44c		l No
d	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation			···•
	ın Schedule O			l

Form 990-EZ (2010)							Page
						Yes	No
Is any related organization a controll 'Yes,' Form 990 and Schedule R must be	· · · · · · · · · · · · · · · · · · ·	_	fsection 51	2(b)(13)? <i>If</i>	45		Νο
45a Did the organization receive any pays meaning of section 512(b)(13)? <i>If</i> 'Y					45a		Νο
Did the organization engage, directly candidates for public office? If "Yes,"			ehalf of or ir	opposition to	46		No
Part VI Section 501(c)(3) orga	nizations and sectio	n 4947(a)(1) non	exempt c	haritable tru	usts o	only.	
All section 501(c)(3) orga 47-49b and 52.			•	le trusts must	answ	er que	stions
Check if the organization use	d Schedule O to respond to	o any question in this F	Part VI .		· ·	Yes	No
17 Did the organization engage in lobbyi	ng activitios2 If "Vas " cor	mnlata Schadula C. Da	rt II		47		
8 Is the organization a school describe					48		
9a Did the organization make any transf					49a		
b If "Yes," was the related organization					49b		
O Complete this table for the organizati			than officers	s, directors, trus	stees a	nd key	
employees) who each received more	than \$100,000 of compen (b) Title and average	sation from the organiz		re is none, enter		e " e) Expei	
(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position	(c) Compensation	employee	benefit plans & compensation	ac	count a rallowa	and
ONE							
50(f) Total number of other employees pa	aid over \$100.000						
50(f) Total number of other employees pa	aid over \$100,000				• <u> </u>		
	ion's five highest compens		ractors who	• each received m	►nore th	an \$10	0,00,0
i1 Complete this table for the organizati	on's five highest compens n Ifthere is none, enter "N	None "	1	each received m		an \$10	
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Complete this table for the organization of compensation from the organization (a) Name and address of each independent (a) Total number of other independent (a)	contractors each receiving	over \$100,000 .	(b) Type	e of service	(c) C	ompen	sation
1 Complete this table for the organization from the organization (a) Name and address of each independent of the organization of the organization of the organization complete Schemust attach a completed Schedule order penalties of perjury, I declare that I have owledge and belief, it is true, correct, and continued to the organization of the or	contractors each receiving edule A? NOTE: All Section A	over \$100,000	(b) Type	of service (a)(1) nonexen	npt cha	aritable	trusts
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Software ID: 10000105

Software Version: 2010v3.2

EIN: 86-0877550

Name: PORSCHE CLUB OF AMERICA ARIZONA REGION

INC

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
DWANE STEWART-PORSCHE CLUB AZ 3411 N 5TH AVE 500 PHOENIX,AZ 85013	Director 0	0		
MARK DREHER 3933 S MCCLINTOCK DR STE 500 TEMPE,AZ 85282	Vice President 0	0		
MIKE EISELE-PORSCHE CLUB AZ 3411 5TH AVE 500 PHOENIX,AZ 85013	President & CEO 0	0		
JOHN CREEKMUR-PORSCHE CLUB AZ 3411 5TH AVE 500 PHOENIX,AZ 85013	Director 0	0		
DICK PETTICREW-PORSCHE CLUB AZ 3411 5TH AVE 500 PHOENIX,AZ 85013	Director 0	0		
SUSAN BOOKSPAN-PORSCHE CLUB AZ 3411 N 5TH AVE 500 PHOENIX,AZ 85013	Director 0	0		
BOB SHELKER-PORSCHE CLUB AZ 3411 N 5TH AVE 500 PHOENIX,AZ 85013	Secretary 0	0		
RICHARD AVELLONE-PORSCHE CLUB 3411 N 5TH AVE 500 PHOENIX,AZ 85013	Treasurer O	0		
STEVE SAPARETO-PORSCHE CLUB AZ 3411 N 5TH AVE 500 PHOENIX,AZ 85013	Past President O	0		

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As Filed Data -

DLN: 93492255006131

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE 0 (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 to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization PORSCHE CLUB OF AMERICA ARIZONA REGION INC

Employer identification number

86-0877550

ldentifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 26 1001	Total Liabilities 1001	Accounts Payable and Accrued Expenses - Beginning \$0 Accounts Payable and Accrued Expenses - Ending \$4644

ldentifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1	Other Assets 1	PREPAID EXPENSES - Beginning \$0 PREPAID EXPENSES - Ending \$4929

ldentifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1004	Other Assets 1004	Miscellaneous - Beginning \$706 Miscellaneous - Ending \$540

ldentifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1003	Other Assets 1003	Machinery and Equipment - Beginning \$9431 Machinery and Equipment - Ending \$7473

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 14	Other Expenses 14	BANK CHARGES \$102

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 13	Other Expenses 13	BADGE EXPENSE \$104

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 12	Other Expenses 12	GOODIE STORE EXP \$138

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 11	Other Expenses 11	POSTA GE \$239

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 10	Other Expenses 10	ZONE 8 CHARGE \$262

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 9	Other Expenses 9	TRAVEL \$372

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 8	Other Expenses 8	OTHER \$620

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 7	Other Expenses 7	SOFTWARE COST \$960

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 6	Other Expenses 6	AWARDS \$1238

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 5	Other Expenses 5	INSURANCE \$1350

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 4	Other Expenses 4	MEETINGS \$3820

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 3	Other Expenses 3	SUPPLIES \$4947

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 2	Other Expenses 2	SOCIAL EVENT \$21980

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1	Other Expenses 1	FACILITIES \$28353

ldentifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1009	Other Expenses 1009	Depreciation \$2124