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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2012

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

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

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

A For the 2012 calendar year, or tax year beginning , 2012, and ending , 20

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

PORSCHE CLUB OF AMERICA CENTRAL PENNSYLVANIA REGION

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

120 N VERNON STREET

City or town, state or country, and ZIP + 4

YORK

PA

17402-2343

D Employer identification number

23-2335776

E Telephone number

717.515.1438

F Group Exemption
Number >G Accounting Method: ☒ Cash ☐ Accrual Other (specify) >

I Website: > WWW.CPA-PCA.ORG

J Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) () < (insert no.) ☐ 4947(a)(1) or ☐ 527H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

K Check ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ > \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I ☒

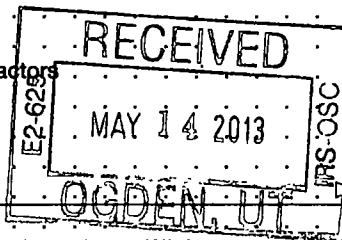
Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	67,358
	3	Membership dues and assessments	3	6,197
	4	Investment income	4	96
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	6b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
6c	Less: direct expenses from gaming and fundraising events	6c		
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a	6,675	
7b	Less: cost of goods sold	7b	2,643	
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	4,032	
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 >	9	77,683	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	12,611
	11	Benefits paid to or for members	11	0
	12	Salaries, other compensation, and employee benefits	12	0
	13	Professional fees and other payments to independent contractors	13	0
	14	Occupancy, rent, utilities, and maintenance	14	14,854
	15	Printing, publications, postage, and shipping	15	12,367
	16	Other expenses (describe in Schedule O)	16	24,241
	17	Total expenses. Add lines 10 through 16	17	64,073
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	13,610
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	91,414
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 >	21	105,034

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form 990-EZ (2012)

SCANNED MAY 30 2013



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Part II Balance Sheets (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II ☐

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	22	104,985
23 Land and buildings	23	
24 Other assets (describe in Schedule O)	24	49
25 Total assets	25	105,034
26 Total liabilities (describe in Schedule O)	26	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	27	105,034

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III ☐

What is the organization's primary exempt purpose? _____

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)
28 AUTOCROSS DRIVER EDUCATION AND PRACTICE - TO IMPROVE ACCIDENT AVOIDANCE AND DRIVER PERFORMANCE SKILLS. CLUB MEMBERS PARTICIPATE IN THIS PROGRAM	
(Grants \$ _____) o) If this amount includes foreign grants, check here ☐	28a 6,934
29 SOCIAL EVENTS - THE ACTIVITY SERVES THE 385 MEMBERS BY PROVIDING OPPORTUNITIES TO GATHER AND EXCHANGE IDEAS THAT WILL FURTHER THE CLUB'S INVOLVEMENT IN THE COMMUNITY AND SUPPORT FOR COMMUNITY ORGANIZATIONS	
(Grants \$ _____) o) If this amount includes foreign grants, check here ☐	29a 9,450
30 CHARITABLE CONTRIBUTIONS - DONATIONS MADE FOLLOWING MEMBER RECOMMENDATIONS, AFTER CONTACT WITH AND INVESTIGATION OF POTENTIAL DONEE TO ENSURE THAT THE CLUB'S MONETARY DONATION WOULD MAKE A DIFFERENCE TO THE COMMUNITY.	
(Grants \$ _____) o) If this amount includes foreign grants, check here ☐	30a PART1 - LINE10
31 Other program services (describe in Schedule O)	
(Grants \$ _____) o) If this amount includes foreign grants, check here ☐	31a
32 Total program service expenses (add lines 28a through 31a)	32

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
ALAN POZNER, PRESIDENT				
784 S CEDAR ST, LITITZ, PA 17543	5.0	0	0	0
IAN TAGGART, VICE PRESIDENT				
661 DIANE DRIVE, ETTERS, PA 17319	5.0	0	0	0
DON HOLLWAY, SECRETARY				
345 S DUKE STREET, DALLASTOWN, PA 17313	10.0	0	0	0
RICHARD GORDON, TREASURER				
120 N VERNON ST, YORK, PA 17402	5.0	0	0	0
STEVE LIMBERT, DIRECTOR				
1560 OLD MOUNTAIN ROAD, WELLSVILLE, PA 17365	5.0	0	0	0
AL PEINHARDT, DIRECTOR				
3300 WILLOW STREET PIKE, WILLOW STREET, PA 17584	5.0	0	0	0
MIKE MCNULTY, DIRECTOR				
6407 QUENTIN ROAD, HARRISBURG, PA 17111	5.0	0	0	0
PAUL HESS, DIRECTOR				
1760 MT. ZION ROAD, MYERSTOWN, PA 17067	7.5	0	0	0

Part V

Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		✓
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		✓
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		✓
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		✓
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		✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions > 37a 0		
b Did the organization file Form 1120-POL for this year?		
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?		✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a 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 > 0 ; section 4912 > 0 ; section 4955 > 0		
b 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		
c 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 >		
e 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		
41 List the states with which a copy of this return is filed > PENNSYLVANIA		
42a The organization's books are in care of > RICHARD GORDON Telephone no. > 717.515.1438		
Located at > 120 N VERNON ST, YORK PA ZIP + 4 > 17402		
b 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)?		✓
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 the U.S.?		✓
If "Yes," enter the name of the foreign country: >		
43 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 > 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
c Did the organization receive any payments for indoor tanning services during the year?		✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		✓
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		✓

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		☒

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		☒

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		☒
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		☒
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b If "Yes," was the related organization a section 527 organization?

49b		
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 **NONE**

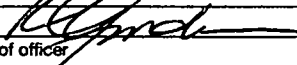
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 **NONE**

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ☐ Yes ☒ No

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 **5/10/2013**
RICHARD GORDON, TREASURER
 Type or print name and title

Paid Preparer Use Only Print/Type preparer's name Preparer's signature Date Check ☐ if self-employed PTIN
 Firm's name ▶ Firm's EIN ▶
 Firm's address ▶ Phone no ▶

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

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

2012

Open to Public
Inspection

Name of the organization

PORSCHE CLUB OF AMERICA CENTRAL PENNSYLVANIA REGION

Employer identification number

23-2335776

FORM 990EZ PART I, LINE 4 INVESTMENT INCOME - EARNINGS FROM SAVINGS ACCOUNTS INTEREST - \$96

FORM 990EZ PART I, LINE 10 GRANTS AND SIMILAR AMOUNTS PAID

DONATION - CENTRAL PA FOOD BANK \$4,000.

DONATION - LEBANON VALLEY VA MEDICAL CENTER \$3,000.

DONATION - CELEBRATION OF LIFE \$3,000.

DONATION - RONALD MCDONALD HOUSE \$1,211.

DONATION - MULTIPLE SCLEROSIS SOCIETY \$1,400.

TOTAL \$12,611.

FORM 990EZ PART I, LINE 16 - OTHER EXPENSES

AUTOCROSS/DRIVER EDUCATION \$6,934.

SOCIAL EVENTS FOR MEMBERS \$13,453.

SWAP MEET EXPENSES \$2,645.

OFFICE EXPENSES, INCLUDING BANK SERVICE CHARGES \$398.

DISHONOSTY BOND INSURANCE \$257.

CLUB CONCOURS \$340.

WOUNDED WARRIORS PROJECT EXPENSES \$214.

TOTAL TO FORM 990-EZ, LINE 16 \$24,241.

FORM 990-EZ, PART II, LINE 24 - ACCOUNT RECEIVABLE FROM MEMBER \$49.

FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - MEMBERSHIP MEETINGS, EDUCATION AND OTHER ACTIVITIES WHERE MEMBERS
CAN SHARE INFORMATION REGARDING THE OWNERSHIP AND OPERATION OF A PORSCHE.

Name of the organization

Employer identification number

PORSCHE CLUB OF AMERICA CENTRAL PENNSYLVANIA REGION

23-2335776

Area with horizontal dashed lines for supplemental information.