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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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
PINTO HORSE ASSOCIATION OF AMERICA INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) 7330 NW 23RD STREET

Room/suite

City or town, state or country, and ZIP + 4
BETHANY, OK 73008

D Employer identification number
23-7047066

E Telephone number
(405) 491-0111

G Gross receipts $ 2,139,886

F Name and address of principal officer
DARRELL L BILKE
7330 NW 23RD STREET
BETHANY, OK 73008

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (5) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW PINTO ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1956

M State of legal domicile OK

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO IMPROVE, PROMOTE AND ENHANCE THE PINTO HORSE, PONY, AND MINIATURE TO COLLECT, RECORD AND PRESERVE PINTO PEDIGREES AND PINTO COMPETITION RECORDS TO REPRESENT THE MULTIFACETED WORLD OF PINTO OWNERSHIP, BREEDING, COMPETITION AND PLEASURE TO PROVIDE BENEFICIAL SERVICES THAT SUPPORT AND ENCOURAGE PINTO OWNERSHIP AND PARTICIPATION TO EDUCATE BY PROVIDING MATERIALS, PROGRAMS AND SERVICES THAT ALLOW PINTO TO BE A RESOURCE ORGANIZATION IN THE EQUINE INDUSTRY TO PROMOTE THE CONTINUED GROWTH OF THE PINTO HORSE ASSOCIATION OF AMERICA THROUGH GOOD HORSEMANSHIP AND GOOD SPORTSMANSHIP

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

Activities & Governance

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	51
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	51
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	**5**	17
6	Total number of volunteers (estimate if necessary)	**6**	500
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	2,816
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	-23,467

		Prior Year	Current Year
Revenue	**8** Contributions and grants (Part VIII, line 1h)	291,020	323,989
	9 Program service revenue (Part VIII, line 2g)	1,731,109	1,788,402
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,898	13,014
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,247	14,481
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,036,274	2,139,886
Expenses	**13** Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,408	2,644
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	439,146	444,110
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,591,761	1,704,028
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,037,315	2,150,782
	19 Revenue less expenses Subtract line 18 from line 12	-1,041	-10,896

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20** Total assets (Part X, line 16)	1,899,659	1,888,757
	21 Total liabilities (Part X, line 26)	2,489	2,483
	22 Net assets or fund balances Subtract line 21 from line 20	1,897,170	1,886,274

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 — 2013-11-04 — Date

DARRELL L BILKE VP/COO — Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
SUZANNE M CREWS		2013-11-04		

Firm's name ▶ SUZANNE M CREWS PC — Firm's EIN ▶

Firm's address ▶ 7300 NW 23RD ST STE 400, BETHANY, OK 73008 — Phone no (405) 491-0800

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

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

TO IMPROVE, PROMOTE AND ENHANCE THE PINTO HORSE, PONY, AND MINIATURE TO COLLECT, RECORD AND PRESERVE PINTO PEDIGREES AND PINTO COMPETITION RECORDS TO REPRESENT THE MULTIFACETED WORLD OF PINTO OWNERSHIP, BREEDING, COMPETITION AND PLEASURE TO PROVIDE BENEFICIAL SERVICES THAT SUPPORT AND ENCOURAGE PINTO OWNERSHIP AND PARTICIPATION TO EDUCATE BY PROVIDING MATERIALS, PROGRAMS AND SERVICES THAT ALLOW PINTO TO BE A RESOURCE ORGANIZATION IN THE EQUINE INDUSTRY TO PROMOTE THE CONTINUED GROWTH OF THE PINTO HORSE ASSOCIATION OF AMERICA THROUGH GOOD HORSEMANSHIP AND GOOD SPORTSMANSHIP

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 organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 $ 879,037 including grants of $) (Revenue $ 1,175,961)

WORLD SHOW PROVIDING A SHOWPLACE FOR EXHIBITION AND PROMOTION OF THE BREED FOR MEMBER HORSES CLASS ENTRIES 6,804 EXHIBITORS 2,077

4b (Code) (Expenses $ 228,494 including grants of $) (Revenue $ 200,381)

COLOR BREED CONGRESS TO EXHIBIT AND PROMOTE THE PINTO HORSE AND OTHER COLOR BREEDS FOR MEMBER HORSES OF PARTICIPATING ASSOCIATIONS CLASS ENTRIES 2,500 EXHIBITORS 600 34 STATES REPRESENTED AND 2 COUNTRIES

4c (Code) (Expenses $ 138,902 including grants of $) (Revenue $ 225,329)

REGISTRATIONS AND TRANSFERS REGISTRY PROVIDES BREEDING AND OWNERSHIP RECORDS FOR MEMBER HORSES HELPS PROMOTE QUALITY OF THE BREED MEMBERS SERVED 7,737 PLUS 1,630 YOUTH MEMBERS REGISTRATIONS 144,343 PLUS 1,660 TRANSFERS

(Code) (Expenses $ 68,986 including grants of $) (Revenue $ 7,000)

PINTO HORSE MAGAZINE/NEWSLETTER PRINTING AND CIRCULATION OF MAGAZINE TO PROMOTE ALL PINTO HORSES PROVIDES NEWS OF EVENTS AND SHOW RESULTS, EDUCATIONAL MATERIAL, ELECTION RESULTS AND INFORMATION ON PROGRAMS OFFERED CNVERTED FROM BIMONTHLY SUBSCRIPTION MAGAZINE TO QUARTERLY NEWSLETTERS DISTRIBUTED TO ALL MEMBERS WITHOUT SUBSCRIPTION OR ADDED COST ONE ISSUE OF MAGAZINE IS PRINTED FOLLOWING THE WORLD SHOW TO PROVIDE RESULTS OF THE SHOW AND PHOTOS THIS IS DISTRIBUTED TO EXHIBITORS AND PARTICIPANTS IN THE SHOW AN ONLINE MAGAZINE HAS BEEN IMPLEMENTED ISSUED 3 TIMES PER YEAR PINTO PAYS PROGRAM A PROGRAM TO PROMOTE INTEREST IN SHOWING PINTO HORSES AND IMPROVING THE BREED FEES ARE REPAID TO MEMBERS WITH THE HIGHEST POINTS RECEIVED FOR SHOWING DETERMINED BY NUMBER OF SHOWS ATTENDED AND STANDING OF THE HORSES SHOWN THIS PROGRAM IS STILL IN TEST PERIOD

4d Other program services (Describe in Schedule O)

(Expenses $ 68,986 including grants of $) (Revenue $ 7,000)

4e **Total program service expenses** ▶ 1,315,419

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		No
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		No
4	**Section 501(c)(3) organizations.** 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*	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? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		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	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
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? *If "Yes," complete Schedule D, Part VII*	11b		No
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? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		No
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 (see instructions)*	17		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**		No
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**		No
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**		No
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**		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, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	**27**		No
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**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
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**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
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, Part II, III, or IV, and Part V, line 1*	**34**	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35b**		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		
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 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	97		
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	17		
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)	2b		Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	3a		Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b		Yes	
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)?	4a			No
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? . .	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
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?	7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			
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?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	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			
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?	12a			
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	13a			
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?	14a			No
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 lines 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

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year **1a** 51			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent **1b** 51			
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**		No
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**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	**5**		No
6	Did the organization have members or stockholders?	**6**	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	**7a**	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	**7b**	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	**8a**		No
b	Each committee with authority to act on behalf of the governing body?	**8b**		No
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**	Yes	

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**		No
14	Did 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?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	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?	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ OK

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 made these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶ PINTO HORSE ASSOC OF AMERICA INC 7330 NW 23RD STREET BETHANY, OK (405) 491-0111

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b **Sub-Total** ▶										
c **Total from continuation sheets to Part VII, Section A** ▶										
d **Total (add lines 1b and 1c)** ▶								106,240		3,184

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 1

			Yes	No
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*	**3**		No
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*	**4**		No
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*	**5**		No

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 Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII . . . . . ☐

				(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	1a	Federated campaigns . .	1a				
	b	Membership dues	1b	291,489			
	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	32,500			
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . . ▶		323,989			
Program Service Revenue			Business Code				
	2a	WORLD SHOW	713990	1,175,961	1,175,961		
	b	REGISTRATIONS & TRANSFERS	900099	225,329	225,329		
	c	COLOR BREED CONGRESS	713990	200,381	200,381		
	d	SHOW APPROVAL & FEES	713990	141,629	141,629		
	e	ROYALTIES	900099	16,192	16,192		
	f	All other program service revenue		28,910	26,094	2,816	
	g	**Total.** Add lines 2a–2f . . . . . ▶		1,788,402			
	3	Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		13,014	13,014		
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . . ▶					
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . . ▶					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss) . . . . . ▶					
Other Revenue	8a	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 . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . ▶					
	10a	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				
	11a	FORM 8741 REFUND		7,314	7,314		
	b	PREMISES COST SHARING		6,000	6,000		
	c	REIMBURSED FAX,POSTAGE,NSF		1,167	1,167		
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . . ▶		14,481			
	12	**Total revenue.** See Instructions . . . . . ▶		2,139,886	1,813,081	2,816	

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)

Check if Schedule O contains a response to any question in this Part IX . . . . . ☐

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 United States See Part IV, line 21	2,644			
2 Grants and other assistance to individuals in the United States See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	106,240			
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	295,516			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	10,007			
9 Other employee benefits				
10 Payroll taxes	32,347			
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	10,705			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	42,524			
13 Office expenses	59,542			
14 Information technology	45,588			
15 Royalties . .				
16 Occupancy	44,789			
17 Travel	70,128			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,214,284			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	38,243			
23 Insurance	58,516			
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a POSTAGE & EXPRESS	34,788			
b BSC & CREDIT CARD FEES	33,821			
c REPAIRS & MAINTENANCE	14,505			
d DUES & PUBLICATIONS	13,579			
e All other expenses	23,016			
25 **Total functional expenses.** Add lines 1 through 24e	2,150,782	0	0	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X . . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		66,442	1	63,707
	2	Savings and temporary cash investments		1,132,868	2	1,137,236
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other 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) Complete Part II of Schedule L			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 1,067,038			
	b	Less accumulated depreciation	10b 394,224	685,349	10c	672,814
	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		15,000	15	15,000
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		1,899,659	16	1,888,757
Liabilities	17	Accounts payable and accrued expenses		2,489	17	2,483
	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	Loans and other 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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		2,489	26	2,483
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,897,170	27	1,886,274
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,897,170	33	1,886,274
	34	Total liabilities and net assets/fund balances		1,899,659	34	1,888,757

Part XI Reconcilliation 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	2,139,886
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,150,782
3	Revenue less expenses Subtract line 2 from line 1	3	-10,896
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,897,170
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,886,274

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			Yes	No
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?	2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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		

Additional Data

Software ID:
Software Version:
EIN: 23-7047066
Name: PINTO HORSE ASSOCIATION OF AMERICA INC

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DARRELL L BILKE EXEC VP/COO	40 00 0 00	X		X				106,240	0	3,184
NANCY BREDEMEIER PRESIDENT	4 00 0 00	X		X				0	0	0
BARBARA HULSEY PRESIDENT-EL	4 00 0 00	X		X				0	0	0
CARL COUSINS IMMEDIATE PA	4 00 0 00	X		X				0	0	0
GARY STREATOR EXECUTIVE CO	2 00 0 00	X						0	0	0
WENDY DAVIDSON EXECUTIVE CO	2 00	X						0	0	0
SUE ELLEN PARKER EXECUTIVE CO	2 00 0 00	X						0	0	0
LAURA FOWLER DIRECTOR CAL	1 00 0 00	X						0	0	0
VICKI HALSEY DIRECTOR CAL	1 00 0 00	X						0	0	0
FRANCINE ACORD-BROWN DIRECTOR COL	1 00 0 00	X						0	0	0
ANN CUMMINGS DIRECTOR CON	1 00 0 00	X						0	0	0
JENNIFER LAGRANGE DIRECTOR FLO	1 00 0 00	X						0	0	0
CORKY FAIRCHILD DIRECTOR GEO	1 00 0 00	X						0	0	0
DALE TIMMERMAN DIRECTOR ILL	1 00 0 00	X						0	0	0
ANNETTE PITCHER DIRECTOR IND	1 00 0 00	X						0	0	0
WILLIS LONGER DIRECTOR IOW	1 00 0 00	X						0	0	0
WOODY MARSHALL DIRECTOR KEN	1 00 0 00	X						0	0	0
PAULA LAUGHLIN DIRECTOR MAS	1 00 0 00	X						0	0	0
ROGER ALTMAN DIRECTOR MIC	1 00 0 00	X						0	0	0
MARY OSBORN DIRECTOR MIC	1 00 0 00	X						0	0	0
ABBY DUNCANSON DIRECTOR MIN	1 00 0 00	X						0	0	0
JEANE GRACE DIRECTOR MIS	1 00 0 00	X						0	0	0
GLENDA MASTELLAR DIRECTOR NEB	1 00 0 00	X						0	0	0
KATHLEEN GALLAGHER DIRECTOR N H	1 00 0 00	X						0	0	0
MARY KENSLER DIRECTOR N J	1 00 0 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CINDY COOK DIRECTOR N M	1 00 0 00	X						0	0	0
KATHY MCCULLOUGH DIRECTOR NEW	1 00 0 00	X						0	0	0
TERESA VISSER DIRECTOR N D	1 00 0 00	X						0	0	0
JOHN KILE DIRECTOR OHI	1 00 0 00	X						0	0	0
PAT WALLISER DIRECTOR OKL	1 00 0 00	X						0	0	0
TERRY HEIMERMAN DIRECTOR OKL	1 00 0 00	X						0	0	0
TERRI BRANHAM DIRECTOR ORE	1 00 0 00	X						0	0	0
TINA BELL DIRECTOR ORE	1 00 0 00	X						0	0	0
NANCY MIERNICKI DIRECTR PENN	1 00 0 00	X						0	0	0
PHILLIP MORRIS DIRECTOR TEN	1 00 0 00	X						0	0	0
TARA ARRINGTON DIRECTOR TEX	1 00 0 00	X						0	0	0
EILEEN DAUGIRDA DIRECTOR TEX	1 00 0 00	X						0	0	0
MARTI GRIMES DIRECTOR TEX	1 00 0 00	X						0	0	0
RENNYA WEBER DIRECTOR WAS	1 00 0 00	X						0	0	0
DALE SMITH DIRECTOR WAS	1 00 0 00	X						0	0	0
AMY MAYER DIRECTOR WIS	1 00 0 00	X						0	0	0
CAROLYN WASHBURN DIRECTOR ONT	1 00 0 00	X						0	0	0
JEAN ANDREWS PAST PRESIDE	2 00 0 00	X						0	0	0
MAHLON BAUMAN PAST PRESIDE	2 00 0 00	X						0	0	0
DON GREENLEE PAST PRESIDE	2 00 0 00	X						0	0	0
JOE GRISSOM PAST PRESIDE	2 00 0 00	X						0	0	0
JOHN HUMPHREY PAST PRESIDE	2 00 0 00	X						0	0	0
JIM ISLEY PAST PRESIDE	2 00 0 00	X						0	0	0
GEORGE MARTIN PAST PRESIDE	2 00 0 00	X						0	0	0
GERALD MILBURN PAST PRESIDE	2 00 0 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHRIS THEILER PAST PRESIDE	2 00 0 00	X						0	0	0

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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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
PINTO HORSE ASSOCIATION OF AMERICA INC

Employer identification number
23-7047066

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ 15,000

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☑ Public exhibition
- b ☐ Scholarly research
- c ☑ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☑ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
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 Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and 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 current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ▶
- b Permanent endowment ▶
- c Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		50,000		50,000
b Buildings		698,520	140,531	557,989
c Leasehold improvements				
d Equipment		318,518	253,693	64,825
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				672,814

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	15,000

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	

Part XIII 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 X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation

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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 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
PINTO HORSE ASSOCIATION OF AMERICA INC

Employer identification number
23-7047066

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	TO IMPROVE, PROMOTE AND ENHANCE THE PINTO HORSE, PONY, AND MINIATURE TO COLLECT, RECORD AND PRESERVE PINTO PEDIGREES AND PINTO COMPETITION RECORDS TO REPRESENT THE MULTIFACETED WORLD OF PINTO OWNERSHIP, BREEDING, COMPETITION AND PLEASURE TO PROVIDE BENEFICIAL SERVICES THAT SUPPORT AND ENCOURAGE PINTO OWNERSHIP AND PARTICIPATION TO EDUCATE BY PROVIDING MATERIALS, PROGRAMS AND SERVICES THAT ALLOW PINTO TO BE A RESOURCE ORGANIZATION IN THE EQUINE INDUSTRY TO PROMOTE THE CONTINUED GROWTH OF THE PINTO HORSE ASSOCIATION OF AMERICA THROUGH GOOD HORSEMANSHIP AND GOOD SPORTSMANSHIP

Identifier	Return Reference	Explanation
ALL OTHER ACCOMPLISHMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	PINTO HORSE MAGAZINE/NEWSLETTER PRINTING AND CIRCULATION OF MAGAZINE TO PROMOTE ALL PINTO HORSES PROVIDES NEWS OF EVENTS AND SHOW RESULTS, EDUCATIONAL MATERIAL, ELECTION RESULTS AND INFORMATION ON PROGRAMS OFFERED CNVERTED FROM BIMONTHLY SUBSCRIPTION MAGAZINE TO QUARTERLY NEWSLETTERS DISTRIBUTED TO ALL MEMBERS WITHOUT SUBSCRIPTION OR ADDED COST ONE ISSUE OF MAGAZINE IS PRINTED FOLLOWING THE WORLD SHOW TO PROVIDE RESULTS OF THE SHOW AND PHOTOS THIS IS DISTRIBUTED TO EXHIBITORS AND PARTICIPANTS IN THE SHOW AN ONLINE MAGAZINE HAS BEEN IMPLEMENTED ISSUED 3 TIMES PER YEAR PINTO PAYS PROGRAM A PROGRAM TO PROMOTE INTEREST IN SHOWING PINTO HORSES AND IMPROVING THE BREED FEES ARE REPAID TO MEMBERS WITH THE HIGHEST POINTS RECEIVED FOR SHOWING DETERMINED BY NUMBER OF SHOWS ATTENDED AND STANDING OF THE HORSES SHOWN THIS PROGRAM IS STILL IN TEST PERIOD

Identifier	Return Reference	Explanation
CLASSES OF MEMBERS OR STOCKHOLDERS	FORM 990, PAGE 6, PART VI, LINE 6	THE ORGANIZATION HAS MEMBERS WHO PAY A MEMBERSHIP FEE TO BELONG MEMBERS RECEIVE THE RIGHT TO SHOW THEIR HORSES AND/OR REGISTER THEIR HORSES AND TO PARTICIPATE IN OTHER PROGRAMS AND SERVICES PROVIDED

Identifier	Return Reference	Explanation
ELECTION OF MEMBERS AND THEIR RIGHTS	FORM 990, PAGE 6, PART VI, LINE 7A	THE MEMBERS ELECT OFFICERS AND DIRECTORS

Identifier	Return Reference	Explanation
DECISIONS SUBJECT TO APPROVAL OF MEMBERS	FORM 990, PAGE 6, PART VI, LINE 7B	MEMBERS VOTE ON ALL KEY ISSUES EXECUTIVE COMMITTEE APPROVES ALL BUT MINOR ADMINISTRATIVE ISSUES SIGNIFICANT ITEMS ARE SUBJECT TO APPROVAL BY THE FULL BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
DOCUMENTATION BY GOVERNING BODY	FORM 990, PAGE 6, PART VI, LINE 8A	ALL MEETINGS OF THE EXECUTIVE COMMITTEE, BOARD OF DIRECTORS, OR ANY OTHER COMMITTEE ARE DOCUMENTED BY MINUTES TAKEN MINUTES ARE READ AND APPROVED AT THE NEXT MEETING

Identifier	Return Reference	Explanation
DOCUMENTATION BY COMMITTEE	FORM 990, PAGE 6, PART VI, LINE 8B	ALL MEETINGS OF THE EXECUTIVE COMMITTEE, BOARD OF DIRECTORS, OR ANY OTHER COMMITTEE ARE DOCUMENTED BY MINUTES TAKEN MINUTES ARE READ AND APPROVED AT THE NEXT MEETING

Identifier	Return Reference	Explanation
OFFICERS WHO CANNOT BE REACHED	FORM 990, PAGE 6, PART VI, LINE 9	NANCY BREDEMEIER 4764 FAIRGROUNDS RD ATWATER, OH 44201-9382 BARBARA HULSEY 1920 DEASON DR EDMOND, OK 73013 CARL COUSINS 10171 MILLIMAN MILLINGTON, MI 48746 GARY STREATOR 2360 TAYLOR-BLAIR RD W JEFFERSON, OH 43162 WENDY DAVIDSON 21404 161ST AVE, SE MONROE, WA 98272 SUE ELLEN PARKER 1 PARKER PLACE BURKBURNETT, TX 76354 LAURA FOWLER 10757 ESTRELLA AVE APPLE VALLEY, CA 92308 VICKI HALSEY 11666 MORENO AVE LAKESIDE, CA 92040 FRANCINE ACORD-BROWN PO BOX 624 PARACHUTE, CO 81635 ANN CUMMINGS 32 WALNUT RD EAST LYME, CT 06333 JENNIFER LAGRANGE 1500 INDEPENDENCE AVE OVIEDO, FL 32765 CORKY FAIRCHILD PO BOX 333 ZEBULON, GA 30295 DALE TIMMERMAN 2114 N CHAPEL HILL RD MCHENRY, IL 60051 ANNETTE PITCHER 9593 SHELBYVILLE RD INDIANAPOLIS, IN 46259 WILLIS LONGER 729 SOUTHHAVEN DR MONTICELLO, IA 52310 WOODY MARSHALL 398 GRAND LOOP DR MT WASHINGTON, KY 40047 PAULA LAUGHLIN PO BOX 1388 WESTBOROUGH, MA 01581 ROGER ALTMAN PO BOX 37 EATON RAPIDS, MI 48827 MARY OSBORN 7289 S MCCLELLAND RD ASHLEY, MI 48806 ABBY DUNCANSON 1068 29TH STREET SE BUFFALO, MN 55313 JEANE GRACE 11900 OWENS SCHOOL RD HALLSVILLE, MO 65255 GLENDA MASTELLAR 315 E LINDEN FREMONT, NE 68025 KATHLEEN GALLAGHER 24 LANE RD DERRY, NH 03038 MARY KENSLER 236 MT PLEASANT RD SEWELL, NJ 08080 CINDY COOK 33 RIVERSIDE RD PERALTA, NM 87042 KATHY MCCULLOUGH 3860 E GENESEE ST RD AUBURN, NY 13021 TERESA VISSER 9459 31ST ST SE SPIRITWOOD, ND 58481 JOHN KILE 400 WEST MAIN ST W JEFFERSON, OH 43162 PAT WALLISER 9801 FOREACRE DR SAPULPA, OK 74066 TERRY HEIMERMAN 9401 S 4110 RD OOLOGAH, OK 74053 TERRI BRANHAM 7704 MONUMENT DR GRANTS PASS, OR 97526 TINA BELL PO BOX 618 MOLALLA, OR 97038 NANCY MIERNICKI PO BOX 214 RINGTOWN, PA 17967 PHILLIP MORRIS 225 MORRIS RD WESTMORELAND, TN 37186 TARA ARRINGTON 900 STEELE RD HIGHLANDS, TX 77562 EILEEN DAUGIRDA 1009 BRIARCREEK DR ARLINGTON, TX 76012 MARTI GRIMES PO BOX 245 PETROLIA, TX 76377 RENNY A WEBER 26432 TRONSON RD ARLINGTON, WA 98223 DALE SMITH 21717 40TH ST EAST BUCKLEY, WA 98321 AMY MAYER W 5595 HWY 21 EAST NECEDAH, WI 54646 CAROLYN WASHBURN RR1, GEORGETOWN ONTARIO, CA L7G 4S4 JEAN ANDREWS 1940 COUNTRY RD Q FREMONT, NE 68025 MAHLON BAUMAN 978 40TH STREET SE BUFFALO, MN 55313 DON GREENLEE 59 W 400 N URBANA, IN 46990 JOE GRISSOM 1056 S CLAY ST FRANKFORT, IN 46041 JOHN HUMPHREY 13624 THREE OAKS DR JONES, OK 73049 JIM ISLEY 105 DRIFTWOOD REIDSVILLE, NC 27320 GEORGE MARTIN 155 BEAR SWAMP RD EAST HAMPTON, CT 06424 GERALD MILBURN 730 NAPOL AVE EDMOND, OK 73034 CHRIS THEILER 11301 OAKLAND AVE NE ALBUQUERQUE, NM 87122

Identifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	ORGANIZATION'S EXECUTIVE VICE PRESIDENT/COO TOGETHER WITH THE CONTROLLER REVIEW THE RETURN WITH PREPARER PRIOR TO SIGNATURE AND FILING

Identifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	POSSIBLE CONFLICT OF INTEREST ISSUES ARE DISCUSSED AT REGULAR EXECUTIVE COMMITTEE MEETINGS ALL OFFICERS, DIRECTORS AND EMPLOYEES ARE COVERED PROS AND CONS ARE DISCUSSED AND VOTED ON THIS IS USUALLY DONE BEFORE POSSIBLE CONFLICT OCCURS IF DETERMINED THAT A CONFLICT MAY OCCUR OR EXIST, THE ACTIVITY IS NOT ALLOWED IN A CONTINUING RELATIONSHIP WITH THE ORGANIZATION

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	COMPENSATION GUIDELINES ARE DETERMINED AT THE EXECUTIVE COMMITTEE LEVEL FOR ALL EMPLOYEES INCLUDING THE EXECUTIVE VP/COO THE PROCESS IS NORMALLY DONE ANNUALLY AT THE TIME THE BUDGET FOR THE NEXT YEAR IS PRESENTED THE EXECUTIVE VP/COO PARTICIPATES IN THE PROCESS FOR ALL PAID STAFF EXCEPT HIMSELF ECONOMIC CONDITIONS TOGETHER WITH SURVEY OF SALARY LEVELS PAID BY SIMILAR ORGANZATIONS ARE CONSIDERED THE EXECUTIVE COMMITTEE VOTES ON THE FINAL DECISION MINUTES ARE TAKEN, AS WITH ALL MEETINGS

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	COMPENSATION GUIDELINES ARE DETERMINED AT THE EXECUTIVE COMMITTEE LEVEL FOR ALL EMPLOYEES INCLUDING THE EXECUTIVE VP/COO THE PROCESS IS NORMALLY DONE ANNUALLY AT THE TIME THE BUDGET FOR THE NEXT YEAR IS PRESENTED THE EXECUTIVE VP/COO PARTICIPATES IN THE PROCESS FOR ALL PAID STAFF EXCEPT HIMSELF ECONOMIC CONDITIONS TOGETHER WITH SURVEY OF SALARY LEVELS PAID BY SIMILAR ORGANZATIONS ARE CONSIDERED THE EXECUTIVE COMMITTEE VOTES ON THE FINAL DECISION MINUTES ARE TAKEN, AS WITH ALL MEETINGS

Identifier	Return Reference	Explanation
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	ALL GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE AT ORGANIZATION'S OFFICES ON REQUEST MOST ARE ALSO AVAILABLE FOR DOWNLOAD ON THE ORGANIZATION'S WEBSITE A PRINTED RULEBOOK IS ALSO AVAILABLE FOR PURCHASE

Identifier	Return Reference	Explanation
GROUP RETURN METHOD	FORM 990, PAGE 7, PART VII	PARENT ORGANIZATION HAS FILED A SEPARATE RETURN

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
PINTO HORSE ASSOCIATION OF AMERICA INC

Employer identification number
23-7047066

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(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 status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
(1) PINTO HERITAGE FOUNDATION INC 7330 NW 23RD STREET BETHANY, OK 73008 20-3968600	SCHOLARSHP	OK	501 C3	9	NA		No

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(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-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

		Yes	No
1	During 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	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	1a	No
b	Gift, grant, or capital contribution to related organization(s)	1b	No
c	Gift, grant, or capital contribution from related organization(s)	1c	No
d	Loans or loan guarantees to or for related organization(s)	1d	No
e	Loans or loan guarantees by related organization(s)	1e	No
f	Dividends from related organization(s)	1f	No
g	Sale of assets to related organization(s)	1g	No
h	Purchase of assets from related organization(s)	1h	No
i	Exchange of assets with related organization(s)	1i	No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	Yes
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o	Sharing of paid employees with related organization(s)	1o	No
p	Reimbursement paid to related organization(s) for expenses	1p	No
q	Reimbursement paid by related organization(s) for expenses	1q	No
r	Other transfer of cash or property to related organization(s)	1r	No
s	Other transfer of cash or property from related organization(s)	1s	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) PINTO HERITAGE FOUNDATION	N	6,000	FACILITIES COST SHARE

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

EIN: 23-7047066

Name: PINTO HORSE ASSOCIATION OF AMERICA INC

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TY 2012 GeneralDependencySmall

Name: PINTO HORSE ASSOCIATION OF AMERICA INC

EIN: 23-7047066

Business Name or Person Name:

Taxpayer Identification Number:

Form, Line or Instruction Reference:

Regulations Reference:

Description: WAIVE NOL CARRYBACK

Attachment Information: YEAR ENDING: DECEMBER 31, 2012 23-7047066 PINTO HORSE ASSOCIATION OF AMERICA INC 7330 NW 23RD STREET BETHANY, OK 73008 NOL CARRYBACK ELECTION UNDER IRC SECTION 172(B)(3), THE TAXPAYER ELECTS TO RELINQUISH THE ENTIRE CARRYBACK PERIOD WITH RESPECT TO ANY REGULAR TAX AND AMT NET OPERATING LOSS INCURRED DURING THE CURRENT TAX YEAR.