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# Form **990**

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public

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<u>-</u>			ndar year, or tax year begin			nd endin	9	0.5	, 20		
В		applicable:	C Name of organization The Vi	ntage Chevrolet Club of A	America, Inc.			D Employ	er identification n	umber	
님	Address	- 1	Doing Business As					<u> </u>	23-7280262		
닏	Name ch			x if mail is not delivered to stre	et address)	Room/su	te	E Telephone number			
$\Box$	initial ret	turn	P.O. Box 609			L			708-455-8222		
Ц	Terminat	ted	City, town or post office, state								
	Amende	d return	Lemont, IL 60439-0609	G Gross re	eceipts \$	340984					
	Applicati	on pending	F Name and address of principal	officer David T. Miner			H(a) Is this	a group return	for affillates? Tyes	✓ No	
			4806 Darlington Avenue NV	N, Canton, OH 44718			1	all affiliates in		s □ No	
ı	Tax-exer	mpt status:	☐ 501(c)(3) ☐ 50	01(c) ( 7 ) ◀ (insert no.)	4947(a)(1) or	527			a list. (see instruction	ons)	
J	Website	: ► ww	v.vcca.org				H(c) Grou	p exemption	n number ▶		
K	Form of a			ssociation Other >	L Yea	r of format		<del></del>	of legal domicile:	CA	
P	art I	Summ	ary	<del>"</del>	·					<u> </u>	
	1		escribe the organization's	mission or most signific	ant activities:	<del></del>		·	· ~		
	'		to the preservation and re-		ant activities.						
Activities & Governance		Dedicated	to the preservation and re	Storation of Chevrolets.	••••						
ă					• • • • • • • • • • • • • • • • • • • •						
ě	2	Chook th	a hay b [] if the average	tion discountinged the en-			£ Al	- OF0/f	'h		
Ģ	2		s box ▶☐ if the organiza			sposea c	or more tha		its net assets.		
•ত	3		of voting members of the					. 3		12	
<u>ë</u>	4		of independent voting mer					. 4		12	
Ξ	5		nber of individuals employ		2 (Part V, line	2a) .		. 5		0	
Ş.	6		nber of volunteers (estima					. 6		500	
	7a		elated business revenue fr			<u>.</u>		. 7a			
·	b	Net unrel	ated business taxable inco	ome from Form 990-T	ne 34)	<u>. </u>		. 7b			
				(m)			Prior Y	ear	Current Y	ear	
	8	Contribut	tions and grants (Part VIII,	line 1h) 💥 🐧 Dr. o. o.	2013	₿≬ . Γ		369498		310596	
Ĕ	9	Program	service revenue (Part VIII,	line 2g) SAPR 2 9	2013 16	[] . [		16979		30388	
Revenue	10	Investme	nt income (Part VIII, colum	nn (A), lines 3, 4, and 7d	)	∄ . F					
Œ	11		enue (Part VIII, column (A)								
	12		enue-add lines 8 through			ie 12)		386477		340984	
	13		nd similar amounts paid (P					300477		340304	
	14		paid to or for members (Pa	• • •	•	· · · Ի					
m	15		other compensation, emplo	• • •		<u>:</u> 10;					
Expenses	16a		nal fundraising fees (Part	·····							
ē	Ь		draising expenses (Part IX								
ਕੁ	17					·	· ·		<del>-</del>	<u> </u>	
			penses (Part IX, column (A			∵ . ⊦					
	18		enses. Add lines 13–17 (m				······································	372844		324838	
	19	Hevenue	less expenses. Subtract li	ne 18 from line 12	<u> </u>			13633		16146	
Net Assets or Fund Balances						<u>[*</u>	Beginning of C	urrent Year	End of Ye	ear	
Seet	20		ets (Part X, line 16)	· · · · · · · · ·		· · L		117835		133981	
A E	21		ılıties (Part X, line 26)			· · L		0		0	
			ts or fund balances. Subtra	act line 21 from line 20	<u> </u>	<u> l</u>		117835		133981	
_	art II		ure Block								
Ur	nder penal	ities of perju	ry, declare that I have examined	this return, including accompa	anying schedules	and stater	nents, and to	the best of r	my knowledge and	belief, it is	
tn.	e, correct	t, and comp	ete. Declaration of preparer (other	rthan officer) is based on all in	formation of whic	h preparer	has any know	tedge.			
			maso	Mnas	~			4/2	4/201	3	
Sig	gn	Signa	ature of officer		•		D	ate (	<del></del>		
He	re		Treasu	rev							
		Туре	or print name and title		····				·····		
<u> </u>	.:	Print/Ty	pe preparer's name	Preparer's signature		Da	te	Ta	PTIN		
Pa		_ [				- 1		Check [ self-emp	rf		
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US	e Onl							n's EIN ▶			
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_					instructions)	• • •	• • •	• • •		No No	
101	raperw	vork Kedu	ction Act Notice, see the se	parate instructions.		Cat N	o. 11282Y		Form \$	<b>990</b> (2012)	

Form **990** (2012)

Part	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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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		1
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		<u> </u>
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		1
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		<b>/</b>
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
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		1
	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		1
	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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>✓</b>
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		1
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		1
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		1
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		1
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		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<b>✓</b>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>

Part	Checklist of Required Schedules (continued)			<u> </u>
		,	Yes	No
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		<b>✓</b>
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		1
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		<b>✓</b>
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		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 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		<b>√</b>
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		<b>√</b>
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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	ı	<b>√</b>
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		<b>√</b>
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>√</b>
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	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,			
38	Part VI	37	1	✓
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Form 99				Page 5
Part	The state of the s			
-	Check if Schedule O contains a response to any question in this Part V	<del>· · ·</del>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   3			<del>                                     </del>
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		[	1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		İ	
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	ļ	1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			ļ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
_	account)?	<u>4a</u>		<b>_</b>
b	If "Yes," enter the name of the foreign country: ►			ļ
	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		1
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		<b>-</b>
с 6а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	- SC		<del>                                     </del>
- Ou	organization solicit any contributions that were not tax deductible as chantable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<del></del>		╁
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		<u> </u>	†
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		İ	l
	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			ļ
е	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	<u> </u>	ļ
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	ļ	<b>├</b>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u> </u>	ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			Ì
	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.	۴	1	$\vdash$
a	Did the organization make any taxable distributions under section 4966?	 9a	1	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<b> </b>	$\vdash$
10	Section 501(c)(7) organizations. Enter:		<u> </u>	<del>                                     </del>
a	Initiation fees and capital contributions included on Part VIII, line 12	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 0	1		1
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	]		
b	Gross income from other sources (Do not net amounts due or paid to other sources			1
	against amounts due or received from them.)	1		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<u> </u>
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10	<u> </u>	<del> </del>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	1
	Note. See the instructions for additional information the organization must report on Schedule O.	1	1	I

**b** Enter the amount of reserves the organization is required to maintain by the states in which

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

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

the organization is licensed to issue qualified health plans

14a

14b

13b

13c

Part \				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
Cootie	Check if Schedule O contains a response to any question in this Part VI	<u>···</u>	<u> </u>	V
Secu	on 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   14	. 🗔		
	If there are material differences in voting rights among members of the governing body, or	1		1
	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 1	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			, '
3	any other officer, director, trustee, or key employee?	2		-
3	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6	1	
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	1	
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		<b>✓</b>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
a	The governing body?	8a 8b	1	
ь 9	Each committee with authority to act on behalf of the governing body?  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		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve	nue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	<b>✓</b>	<u> </u>
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?	105		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	10b 11a		<del> </del>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	110	<b>-</b>	-
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<b>✓</b>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by			1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1	1	ا ـ ا
a	The organization's CEO, Executive Director, or top management official	15a	ł	<b>/</b>
b	Other officers or key employees of the organization	15b	<del> </del>	+
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		_	
L	with a taxable entity during the year?	16a	-	<del>                                     </del>
D	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			,
<u></u>	organization's exempt status with respect to such arrangements?	16b	<u>.                                    </u>	<u>i</u>
	ion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ CA			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	on 501	(c)(3)s	only)
10	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict	of inte	reet :	ooliev
19	and financial statements available to the public during the tax year.			Joney,
20	State the name, physical address, and telephone number of the person who possesses the books and record	s of the	е	
	organization: ► Jim Amos, 3006 S Osceola St., Denver, CO 80236 303-881-9072			

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Form **990** (2012)

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

Check if Schedule O contain	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, and 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 no	r any relate	d orga	anız		n co	ompei	nsa	ted any curren	t oπicer, director	, or trustee.
				•	ution					
(A)	(B)	(do n				than o	ne	(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for	office	rand	dad	lirect	is both or/trust	ee)	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) David Miner - President										
4806 Darlington Ave NW, Canton, OH 44718	<u> </u>	<b>✓</b>		✓	<u> </u>	ļ	<u> </u>	0	0	0
(2) Jim Karras - Vice President	ļ									
829 E Van Bibber Av, Orange, CA 92866		✓		1	<u> </u>			0	0	
(3) Mary James - Secretary										
1620 60th St NE, Buffalo, MN 55313		✓		1	L			0	0	
(4) Jim Amos · Treasurer			1	ĺ	ŀ					
3006 S Osceola St, Denver, CO 80236		✓		1	L	ļ		0	0	(
(5) Dan O'Day - Board Member				ļ	ļ					
23960 Alamitos Rd, San Jose, CA 95120		1			<u> </u>	ļ		0	0	(
(6) Jim Gebhardt - Board Member	ļ									
925 Cold Harbor Dr, Roswell, GA 30075	ļ	<b>/</b>	↓_		╙	<u> </u>	ļ	0	0	
(7) Russell Heim - Board Member										
64 Blacksmith Road, Levittown, NY 11756		1	ļ	<u> </u>	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$		ļ	0	0	
(8) Kenneth Scott - Board Member										
15721 48th Ave E, Tacoma, WA 98446		1	<u> </u>	L.	_	ļ		0	0	(
(9) Clay Perrine - Board Member										
4001 Springhollow St, Colleyville, TX 76034		✓	ļ	_	<u> </u>	ļ	<u> </u>	0	0	
(10) Jim Boyk - Board Member		.[								
4608 Winchester Ave., Lisle, IL 60532	ļ	1	<u> </u>		L		L	0	0	
(11) Jim Martoza - Board Member										
43 Appletree Dr. Matawan, NJ 07747		✓				↓		0	0	
(12) Ken Farley - Board Member						}		1		
71 Donovans Lane, Staunton, VA 24401		1				ļ	<u> </u>	c	0	
(13) Dave Cavagnaro - Board Member		_								
11 Heller Hill Road, Blairstown, NJ 07825		<b>/</b>			丄			0	0	(
(14) Don Williams - Board Member								1		
160 Koons Ave, Medina, OH 44256		1				1	1	<u> </u>	0	Farm <b>990</b> (2015

	(A) Name and title	(B) Average hours per week (list any	box, office	unles er and	Pos eck s pe d a d	more rson irect	than o	an ee)	(D)  Reportable compensation from	(E) Reportable compensation from related	_	(F) stimated mount of other	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	f org ar	npensati rom the ganization d relate anization	n d
(15)										· · · · · · · · · · · · · · · · · · ·			
(16)													
(17)													
(18)													
(19)													
(20)						<u> </u>							
(21)													
(22)													
(23)												·	
(24)				ļ	<u> </u>	<u> </u>			<u> </u>				
(25)					ļ. <u> </u>							<del></del>	<del></del>
1b c	Sub-total	VII, Sectio						<b>&gt; &gt; &gt;</b>	0	0			
2	Total number of individuals (including but reportable compensation from the organi	t not limited						e) w		<u> </u>			
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc						emp	ployee, or high	est compensat	ed	_	No √
4	For any individual listed on line 1a, is the organization and related organizations individual												
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or individu	ıal 5	-	
	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear.												tax
	(A) Name and business add	iress							(B) Description of s	ervices		C) ensation	
	Total number of independent and	ma (include				· · · ·			non lista de la	212) 11:52		•	
2	Total number of independent contractor received more than \$100,000 of compensations.							) tr	nose listed ab	ove) wno			
											F	orm <b>99</b>	0 (20

Form **990** (2012)

Part	VIII	Statement of Revenue					_
		Check if Schedule O contains a response	onse to any quest				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
2 2	1a	Federated campaigns 1a			-		
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues 1b	300433				
اعٌ يَّ	c	Fundraising events 1c	000,400	1		ļ	
E E	ď	Related organizations 1d				ļ	
Ű삍	e	Government grants (contributions) 1e					
Sir	f	All other contributions, gifts, grants,		1			
효합	•	and similar amounts not included above	10163				
등등	~	Noncash contributions included in lines 1a-11. \$	10103	ì			
E E	g	Total. Add lines 1a-1f		310596			
		Total. Add lines 1a-11	Business Code	310350			
ᇎ	2a	Newsletter Advertising	541850	30388			
Me	b		341630	30300			<del> </del>
· 8	-						+
Ž	C					-	<del> </del>
Š	đ					<b></b>	<del>                                     </del>
檀	e	All other program service revenue.					<del>                                     </del>
Program Service Revenue	f	Total. Add lines 2a–2f		340984		L	<u> </u>
-	<u>g</u> 3	Investment income (including divid		340964		T	<u> </u>
		and other similar amounts)					İ
	4	Income from investment of tax-exempt b				-	
	5	Royalties			<del></del>	-	<del>-  </del>
	•	(i) Real	(ii) Personal				
	6a	Gross rents	<del> </del>				
	b	Less: rental expenses					
		Rental income or (loss)					
	d		•				
	7a	Gross amount from sales of (i) Securities	(ii) Other			1	
	7.0	assets other than inventory	(,,				
	ь	Less: cost or other basis					
		and sales expenses .					
	С	Gain or (loss)	<del></del>				
	d	Net gain or (loss)					
60							
enne,	8a	Gross income from fundraising events (not including \$					
Other Reve		of contributions reported on line 1c).		}			
-		See Part IV, line 18	,				
ŧ	ь	Less: direct expenses	,				
0		Net income or (loss) from fundraising	events . >				
	9a	Gross income from gaming activities.					
		See Part IV, line 19	a				
	b	Less: direct expenses	<b>5</b>	1			
	С	Net income or (loss) from gaming ac	tivities ►	1		1	
	10a	Gross sales of inventory, less					
		returns and allowances	3				
	ь	Less: cost of goods sold	o				
	c	Net income or (loss) from sales of inv	ventory ▶	1		1	
	ا ا	Miscellaneous Revenue	Business Code				
	11a		<u> </u>	1		1	
	ь					1	
	C						
	ď	All other revenue					
		Total. Add lines 11a-11d					
	12	Total revenue. See instructions		340984		1	1

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se to any question i	in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9	Other employee benefits			·	
10	Payroll taxes				
11	Fees for services (non-employees):				
a b	Management	23891			
C	Accounting			· · · · · · · · · · · · · · · · · · ·	
ď	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.)	50845			
12	Advertising and promotion	10996			
13	Office expenses				
14	Information technology	1635			
15	Royalties		<del> </del>		
16	Occupancy				
17	Travel		· · · · · · · · · · · · · · · · · · ·	ļ	<u> </u>
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	-	· · · · · · · · · · · · · · · · · · ·	
19	Conferences, conventions, and meetings .	12020			
20	Interest				
21 22	Payments to affiliates	····			
23	Insurance	6497			
24	Other expenses. Itemize expenses not covered	6487			
27	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.)				
а	Newsletter Printing and Mailing Expenses	179534			
b	Board of Directors Expenses	5295			
C	Membership Services	18252			
d	Committee Expenses	15869			
е	All other expenses	14			
25	Total functional expenses. Add lines 1 through 24e	324838			
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)				

**Balance Sheet** Part X Check if Schedule O contains a response to any question in this Part X . . . . . . . . (A) (B) Beginning of year End of year Cash -- non-interest-bearing 117835 133981 2 2 Savings and temporary cash investments . . . . 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. 5 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 ß Assets 7 7 8 8 9 9 Prepaid expenses and deferred charges Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 10b 10c Less: accumulated depreciation . . . . 11 11 Investments—publicly traded securities 12 Investments - other securities. See Part IV, line 11 . 12 13 13 Investments—program-related, See Part IV, line 11. 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 117835 16 133981 17 Accounts payable and accrued expenses . . . . . . 17 18 18 19 Deferred revenue . . . . . . . . . 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . . 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 Total liabilities. Add lines 17 through 25 0 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets . . . . . . 117835 133981 28 28 29 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 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds. 33 33 117835 133981 34 34 117835 133981 Form 990 (2012)

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Page		2
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	- V - 7			
Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		34	40984
2	Total expenses (must equal Part IX, column (A), line 25)		32	24838
3	Revenue less expenses. Subtract line 2 from line 1			16146
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		1	17835
5	Net unrealized gains (losses) on investments			0
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain in Schedule O)			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		1:	<u>33981</u>
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII	<u></u>		ᆜ
			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.			اـــ ـ ا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<b>✓</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			۱ ۱
	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		<b>.</b> ✓_,
	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:	ļ		
	_·		1	3
_	Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			<sup>1</sup>
С	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	0-		
	If the organization changed either its oversight process or selection process during the tax year, explain in	2c		<del></del>
	Schedule O.	-		ļ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
Jä	the Single Audit Act and OMB Circular A-133?	3a		
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	Ja		<b>-</b>
U	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	1	
			- 000	(2012)

#### **SCHEDULE 0** (Form 990 or 990-EZ)

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

OMB No. 1545-0047

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization 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.

Vintage Chevrolet Club of America, Inc.	23-7280262
Part VI, Section B, line 11a	
All financial records and tax forms are available to any club member from a club officer upon request.	
Part VI, Section B, line 11b	
Form 990 and Schedule O were emailed as attachments to all Officers and Directors prior to the April 2	2013 Board of Directors Meeting.
Part VI, Section B, line 12c	
Policy 1.1.4 and Bylaws Article IV, Section 3 both prohibit any person from being an officer or a director	or if they provide direct or implied
contract or vendor services, either individually or through a business. This is monitored by the board	through out the year as part of the
annual review of vendor contracts.	
Part VI, Section C, line 19	
Club bylaws which contain all governing documents and policies are available to members on the club	o's website www.vcca.org and from
any National, Area or Region Director all of whom are listed in the club's monthly newsletter.	
Refer to line 11a, above, for access to financial and tax records, and also Part VI Section C line 20.	
Part IX, Statement of Functional Expenses, line 11g,	
Other \$50,845: This is composed of the following contracted work. Newsletter Design \$20,350, Newslette	tter Editor \$26,000, WebMaster \$4,495

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization	Employer Identification number
	- <del> </del>
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