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Form 990-PF

## Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

2012

Open to Public  
Inspection

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

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

Name of foundation CANINE ESTATES INC		A Employer identification number 38-3822291			
Number and street (or P O box number if mail is not delivered to street address) 2944 LEPRECHAUN LANE		B Telephone number (see instructions) (727) 785-0066			
City or town, state, and ZIP code PALM HARBOR, FL 34685		C If exemption application is pending, check here <input checked="" type="checkbox"/> <input type="checkbox"/>			
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D</b> 1. Foreign organizations, check here <input checked="" type="checkbox"/> <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input checked="" type="checkbox"/> <input type="checkbox"/>			
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input checked="" type="checkbox"/> <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input checked="" type="checkbox"/> <input type="checkbox"/>			
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 559,884		<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____			
<b>Part I</b> <b>Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	844,301			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments		3		
	4 Dividends and interest from securities. . . . .				
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . . . .		0		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold . . . . .					
c Gross profit or (loss) (attach schedule) . . . . .					
11 Other income (attach schedule) . . . . .	9,092	0			
12 <b>Total.</b> Add lines 1 through 11 . . . . .	853,393	3			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	9,666	0	0	
	b Accounting fees (attach schedule) . . . . .	1,090	0	0	
	c Other professional fees (attach schedule) . . . . .	1,761	0	0	
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions)	186	0	0	
	19 Depreciation (attach schedule) and depletion . . . . .	9,313	0		
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	302,326	0	286,034	
	24 <b>Total operating and administrative expenses.</b>	324,342	0	286,034	
25 Contributions, gifts, grants paid. . . . .	2,448		2,448		
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	326,790	0	288,482		
27 Subtract line 26 from line 12					
a <b>Excess of revenue over expenses and disbursements</b>	526,603				
b <b>Net investment income</b> (if negative, enter -0-) . . . . .		3			
c <b>Adjusted net income</b> (if negative, enter -0-) . . . . .					

	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing . . . . .	4,260	12,623	12,623	
	2 Savings and temporary cash investments . . . . .				
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable . . . . .				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) . . . . .				
	7 Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use . . . . .				
	9 Prepaid expenses and deferred charges . . . . .				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule) . . . . .				
	c Investments—corporate bonds (attach schedule) . . . . .				
	11 Investments—land, buildings, and equipment basis ►				
Less accumulated depreciation (attach schedule) ►					
12 Investments—mortgage loans . . . . .					
13 Investments—other (attach schedule) . . . . .					
14 Land, buildings, and equipment basis ► 556,574					
Less accumulated depreciation (attach schedule) ► 9,313	0	547,261	547,261		
15 Other assets (describe ►) . . . . .					
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) . . . . .	4,260	559,884	559,884		
Liabilities	17 Accounts payable and accrued expenses . . . . .		29,021		
	18 Grants payable . . . . .				
	19 Deferred revenue . . . . .				
	20 Loans from officers, directors, trustees, and other disqualified persons . . . . .				
	21 Mortgages and other notes payable (attach schedule) . . . . .				
	22 Other liabilities (describe ►) . . . . .				
	23 Total liabilities (add lines 17 through 22) . . . . .	0	29,021		
	Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted . . . . .	4,260	530,863		
	25 Temporarily restricted . . . . .				
	26 Permanently restricted . . . . .				
	Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds . . . . .				
	28 Paid-in or capital surplus, or land, bldg , and equipment fund . . . . .				
	29 Retained earnings, accumulated income, endowment, or other funds . . . . .				
	30 Total net assets or fund balances (see page 17 of the instructions) . . . . .	4,260	530,863		
31 Total liabilities and net assets/fund balances (see page 17 of the instructions) . . . . .	4,260	559,884			
Net Assets or Fund Balances					

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	4,260
2	Enter amount from Part I, line 27a . . . . .	2	526,603
3	Other increases not included in line 2 (itemize) ► . . . . .	3	0
4	Add lines 1, 2, and 3 . . . . .	4	530,863
5	Decreases not included in line 2 (itemize) ► . . . . .	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	530,863

**Part IV Capital Gains and Losses for Tax on Investment Income**

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2011	167,982	3,740	44,914,973
2010	100	0	0,000,000
2009			
2008			
2007			
<b>2</b>	<b>Total</b> of line 1, column (d).		<b>44,914,973</b>
<b>3</b>	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years		<b>22,457,48</b>
<b>4</b>	Enter the net value of noncharitable-use assets for 2012 from Part X, line 5.		<b>8,17</b>
<b>5</b>	Multiply line 4 by line 3.		<b>183,47</b>
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b).		
<b>7</b>	Add lines 5 and 6.		<b>183,47</b>
<b>8</b>	Enter qualifying distributions from Part XII, line 4.		<b>288,48</b>

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1	(attach copy of letter if necessary—see instructions)	1	0
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	0
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		2	0
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		3	0
3	Add lines 1 and 2.	4	0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	5	0	
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .			
6	<b>Credits/Payments</b>			
a	2012 estimated tax payments and 2011 overpayment credited to 2012	6a		
b	Exempt foreign organizations—tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments Add lines 6a through 6d.	7	0	
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8		
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	0	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10		
11	Enter the amount of line 10 to be <b>Credited to 2013 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	11		

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.	Yes	No
1a			1a	No
1b			1b	No
c	Did the foundation file <b>Form 1120-POL</b> for this year?	1c	No	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <input type="checkbox"/> \$ <u>0</u> <b>(2)</b> On foundation managers <input type="checkbox"/> \$ <u>0</u>			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ <u>0</u>			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2	No	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No	
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	No	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either ● By language in the governing instrument, or ● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	No	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> FL			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No	
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	Yes	

**Part VII-A Statements Regarding Activities (continued)**

11		No
12		No
13	Yes	

Website address ► CAINEESTATES.COM

14	The books are in care of ► JAYNE SIDWELL	Telephone no ► (727) 785-0066
	Located at ► 2944 LEPRECHAUN LANE PALM HARBOR FL	ZIP + 4 ► 34685

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here . . . ►	15
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16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . .	16
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See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country ►

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ► Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ► Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ► Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ► Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ► Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ► Yes <input checked="" type="checkbox"/> No		
1b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . Organizations relying on a current notice regarding disaster assistance check here. ►		
1c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? . . .		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? ► Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions) . . .		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ► Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012). . . .		
3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . .		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012? . . .		No
4b			No

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5a	During the year did the foundation pay or incur any amount to			
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions). . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . .		5b	
c	Organizations relying on a current notice regarding disaster assistance check here. . . . .	<input checked="" type="checkbox"/>		
	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		7b	
	<i>If "Yes" to 6b, file Form 8870.</i>			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .		7b	

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation <b>(If not paid, enter -0-)</b>	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
GREG SIDWELL 2944 LEPRECHAUN LANE PALM HARBOR, FL 34685	DIRECTOR 5 00	0	0	0
JAYNE SIDWELL 2944 LEPRECHAUN LANE PALM HARBOR, FL 34685	DIRECTOR 24 00	0	0	0
THOMAS F AHEARN 190 SE 19TH AVENUE POMPANO BEACH, FL 33060	DIRECTOR 0 00	0	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>				0

**Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE"**

<b>(a)</b> Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	<b>(c)</b> Compensation
NONE		

## **Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

## Expenses

<b>1</b> RESCUE DOGS FROM HIGH KILL SHELTERS AND PROVIDE MEDICAL TREATMENT, REHABILITATION AND CARE TO THOSE THAT HAVE BEEN ABUSED AND/OR NEGLECTED AND PREPARE THEM FOR ADOPTION INTO LOVING HOMES	286,034
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and

### Amount

1	
2	
All other program-related investments See page 24 of the instructions	
3	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	0
b	Average of monthly cash balances. . . . .	1b	8,294
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	8,294
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	8,294
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	124
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,170
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	409

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	409
2a	Tax on investment income for 2012 from Part VI, line 5. . . . .	2a	
b	Income tax for 2012 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	409
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	409
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	409

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	288,482
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	288,482
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	288,482

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
<b>1</b> Distributable amount for 2012 from Part XI, line 7				409
<b>2</b> Undistributed income, if any, as of the end of 2012			0	
<b>a</b> Enter amount for 2011 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2012				
<b>a</b> From 2007. . . . .				
<b>b</b> From 2008. . . . .				
<b>c</b> From 2009. . . . .				
<b>d</b> From 2010. . . . .	100			
<b>e</b> From 2011. . . . .	167,795			
<b>f Total</b> of lines 3a through e. . . . .	167,895			
<b>4</b> Qualifying distributions for 2012 from Part XII, line 4 ► \$ _____ 288,482			0	
<b>a</b> Applied to 2011, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2012 distributable amount. . . . .			409	
<b>e</b> Remaining amount distributed out of corpus	288,073			
<b>5</b> Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> Enter the net total of each column as indicated below:	455,968			
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . . . .	0			
<b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) . . . . .	0			
<b>9</b> Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a . . . . .	455,968			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2008. . . . .				
<b>b</b> Excess from 2009. . . . .				
<b>c</b> Excess from 2010. . . . .	100			
<b>d</b> Excess from 2011. . . . .	167,795			
<b>e</b> Excess from 2012. . . . .	288,073			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling. <input type="text"/>			
b	Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)			
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.			
b	85% of line 2a.			
c	Qualifying distributions from Part XII, line 4 for each year listed.			
d	Amounts included in line 2c not used directly for active conduct of exempt activities.			
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c.			
3	Complete 3a, b, or c for the alternative test relied upon			
a	"Assets" alternative test—enter			
(1)	Value of all assets.			
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i).			
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.			
c	"Support" alternative test—enter			
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).			
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III).			
(3)	Largest amount of support from an exempt organization			
(4)	Gross investment income			

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)****1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

See Additional Data Table

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
VARIOUS CHARITABLE ORGANIZATIONS PINELLAS COUNTY PALM HARBOR, FL 34683	NONE	OTHER PUBLIC CHARITY	DONATIONS TO VARIOUS ORGANIZATIONS FOR PET RESCUE AND SURVIVAL	2,448
<b>Total</b>			► 3a	2,448
<b>b Approved for future payment</b>				
<b>Total</b>			► 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**



**Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).**

GREG SIDWELL

JAYNE SIDWELL

2012

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

**Name of the organization**  
CANINE ESTATES INC**Employer identification number**

38-3822291

**Organization type (check one)****Filers of:****Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization  
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation  
 4947(a)(1) nonexempt charitable trust treated as a private foundation  
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33<sup>1/3</sup>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year . . . . . ► \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

**Name of organization**  
CANINE ESTATES INC

**Employer identification number**

38-3822291

<b>Part I</b> <b>Contributors</b> (see instructions) Use duplicate copies of Part I if additional space is needed			
<b>(a)</b> No.	<b>(b)</b> Name, address, and ZIP + 4	<b>(c)</b> Total contributions	<b>(d)</b> Type of contribution
1	GREG JAYNE SIDWELL 2944 LEPRECHAUN LANE  PALM HARBOR, FL 34685	\$ 642,635	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution)
2	G & J MARKETING COMPANY  292 ALT US HWY 19 N  PALM HARBOR, FL 34685	\$ 178,761	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution)
3	TOM JUDY AHEARN 190 SE 19 AVE  POMPANO BEACH, FL 33060	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution)
4	ANDERSON HOTELS INC  4815 UNIVERSITY DR  HUNTSVILLE, AL 35816	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution)

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**Name of organization**  
CANINE ESTATES INC

**Employer identification number**

38-382229

<b>Part II</b> <b>Noncash Property</b> (see instructions) Use duplicate copies of Part II if additional space is needed			
<b>(a) No. from Part I</b>	<b>(b) Description of noncash property given</b>	<b>(c) FMV (or estimate) (see instructions)</b>	<b>(d) Date received</b>
		\$ _____	
<b>(a) No. from Part I</b>	<b>(b) Description of noncash property given</b>	<b>(c) FMV (or estimate) (see instructions)</b>	<b>(d) Date received</b>
		\$ _____	
<b>(a) No. from Part I</b>	<b>(b) Description of noncash property given</b>	<b>(c) FMV (or estimate) (see instructions)</b>	<b>(d) Date received</b>
		\$ _____	
<b>(a) No. from Part I</b>	<b>(b) Description of noncash property given</b>	<b>(c) FMV (or estimate) (see instructions)</b>	<b>(d) Date received</b>
		\$ _____	
<b>(a) No. from Part I</b>	<b>(b) Description of noncash property given</b>	<b>(c) FMV (or estimate) (see instructions)</b>	<b>(d) Date received</b>
		\$ _____	

Name of organization CANINE ESTATES INC		Employer identification number 38-3822291	
<b>Part III</b> <b>Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year.</b> Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of <i>exclusively religious, charitable, etc., contributions of \$1,000 or less</i> for the year (Enter this information once. See instructions ) ► \$ Use duplicate copies of Part III if additional space is needed			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	—	—	—
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
—	—	—	—
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	—	—	—
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
—	—	—	—
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	—	—	—
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
—	—	—	—
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	—	—	—
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
—	—	—	—

Form 4562

Department of the Treasury  
Internal Revenue Service (99)Depreciation and Amortization  
(Including Information on Listed Property)

OMB No 1545-0172

2012

Attachment  
Sequence No 179

► See separate instructions. ► Attach to your tax return.

Name(s) shown on return  
CANINE ESTATES INCBusiness or activity to which this form relates  
FORM 990-PF PAGE 1

Identifying number

38-3822291

**Part I Election To Expense Certain Property Under Section 179***Note: If you have any listed property, complete Part V before you complete Part I.*

1 Maximum amount (see instructions) . . . . .	1	500,000
2 Total cost of section 179 property placed in service (see instructions) . . . . .	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	3	2,000,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- . . . . .	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions . . . . .	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			
7 Listed property Enter the amount from line 29 . . . . .	7		
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . . . .	8		
9 Tentative deduction Enter the smaller of line 5 or line 8 . . . . .	9		
10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 . . . . .	10		
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . .	11		
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . . . . .	12		
13 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 ► 13	13		

*Note: Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)		
14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . . . . .	14	
15 Property subject to section 168(f)(1) election . . . . .	15	
16 Other depreciation (including ACRS) . . . . .	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)****Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2012 . . . . .	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ►		

**Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System**

20a Class life	See Add'l Data		S/L	
b 12-year		12 yrs	S/L	
c 40-year		40 yrs	MM	S/L

**Part IV Summary (see instructions)**

21 Listed property Enter amount from line 28 . . . . .	21	
22 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions . . . . .	22	9,313
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .	23	

**Part V**

**Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A—Depreciation and Other Information (Caution:** See the instructions for limits for passenger automobiles.)

**24a** Do you have evidence to support the business/investment use claimed?  Yes  No **24b** If "Yes," is the evidence written?  Yes  No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation/deduction	(i) Elected section 179 cost

**25** Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) **25**

	%							
	%							
	%							

	%				S/L -			
	%				S/L -			
	%				S/L -			

**28** Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 **28**

**29** Add amounts in column (i), line 26 Enter here and on line 7, page 1 **29**

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

<b>30</b> Total business/investment miles driven during the year (do not include commuting miles) . . .	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No										
<b>31</b> Total commuting miles driven during the year . . .												
<b>32</b> Total other personal(noncommuting) miles driven . . .												
<b>33</b> Total miles driven during the year Add lines 30 through 32 . . .												
<b>34</b> Was the vehicle available for personal use during off-duty hours? . . .												
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person? . . .												
<b>36</b> Is another vehicle available for personal use? . . .												

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? . . .			<b>Yes</b>	<b>No</b>
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . .				
<b>39</b> Do you treat all use of vehicles by employees as personal use? . . .				
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of vehicles, and retain the information received? . . .				
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) . . .				

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year

**42** Amortization of costs that begins during your 2012 tax year (see instructions)


**43** Amortization of costs that began before your 2012 tax year . . . **43**

**44** Total. Add amounts in column (f) See the instructions for where to report **44**

## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 38-3822291  
**Name:** CANINE ESTATES INC

### Form 4562, Part III, Line 20a - c, Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
20a Class life		10,658	20 0	HY	S/L	200
20a Class life		41,547	20 0	HY	S/L	779
a Class life		2,710	20 0	HY	S/L	17
a Class life		18,258	20 0	HY	S/L	342
a Class life		18,871	20 0	HY	S/L	118
a Class life		1,495	20 0	HY	S/L	9
a Class life		15,335	20 0	HY	S/L	96

**Form 4562, Part III, Line 20a - c, Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System**

<b>(a) Classification of property</b>	<b>(b) Month and year placed in service</b>	<b>(c) Basis for depreciation (business/investment use only—see instructions)</b>	<b>(d) Recovery period</b>	<b>(e) Convention</b>	<b>(f) Method</b>	<b>(g) Depreciation deduction</b>
<b>b</b> 12-year		20,237	12 yrs	HY	S/L	632
<b>b</b> 12-year		880	12 yrs	HY	S/L	27
<b>b</b> 12-year		11,641	12 yrs	HY	S/L	121
<b>b</b> 12-year		11,526	12 yrs	HY	S/L	360
<b>b</b> 12-year		1,475	12 yrs	HY	S/L	46
<b>b</b> 12-year		16,298	12 yrs	HY	S/L	170
<b>b</b> 12-year		7,125	12 yrs	HY	S/L	74
<b>b</b> 12-year		600	12 yrs	HY	S/L	19
<b>b</b> 12-year		1,624	12 yrs	HY	S/L	85
<b>b</b> 12-year		7,853	12 yrs	HY	S/L	409
<b>b</b> 12-year		1,564	12 yrs	HY	S/L	16
<b>b</b> 12-year		8,974	12 yrs	HY	S/L	280
<b>b</b> 12-year		27,625	12 yrs	HY	S/L	288
<b>b</b> 12-year		24,795	12 yrs	HY	S/L	258
<b>b</b> 12-year		6,658	12 yrs	HY	S/L	208
<b>b</b> 12-year		2,160	12 yrs	HY	S/L	68
<b>b</b> 12-year		3,196	12 yrs	HY	S/L	33
<b>b</b> 12-year		2,000	12 yrs	HY	S/L	21
<b>b</b> 12-year		4,142	12 yrs	HY	S/L	43
<b>b</b> 12-year		10,901	12 yrs	HY	S/L	114
<b>b</b> 12-year		2,315	12 yrs	HY	S/L	24
<b>b</b> 12-year		1,200	12 yrs	HY	S/L	63
<b>b</b> 12-year		4,368	12 yrs	HY	S/L	46
<b>b</b> 12-year		2,630	12 yrs	HY	S/L	137

**Form 4562, Part III, Line 20a - c, Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
c 40-year	2012-03	53,183	40 yrs	MM	S/L	
c 40-year	2012-03	212,730	40 yrs	MM	S/L	4,210

## TY 2012 Accounting Fees Schedule

**Name:** CANINE ESTATES INC

**EIN:** 38-3822291

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,090	0		0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2012 Depreciation Schedule

**Name:** CANINE ESTATES INC

**EIN:** 38-3822291

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND	2012-03-28	53,183		L		0	0		
BUILDING	2012-03-28	212,730		ADS	40 000000000000	4,210	0		
ENTRANCE ELECTRONIC ROLLING GATE	2012-08-17	20,237		ADS	12 000000000000	632	0		
HOUSE FRONT ENTRY GATE	2012-08-17	880		ADS	12 000000000000	27	0		
PORCH SCREENING AND FLOORING	2012-12-21	11,641		ADS	12 000000000000	121	0		
INTERIOR WOOD FLOORING	2012-08-17	11,526		ADS	12 000000000000	360	0		
GARAGE SMALL ROOM IMPROVEMENTS	2012-08-17	1,475		ADS	12 000000000000	46	0		
GAS, ELECTRICAL, WATER LINES	2012-11-07	16,298		ADS	12 000000000000	170	0		
RAMP AND STEPS	2012-11-07	7,125		ADS	12 000000000000	74	0		
CLOSET BUILDOUT	2012-09-07	600		ADS	12 000000000000	19	0		
SEPTIC/SEWER GROUND WORK	2012-08-17	10,658		ADS	20 000000000000	200	0		
CHAIN LINK FENCING	2012-08-17	41,547		ADS	20 000000000000	779	0		
42" WIDE GATE	2012-12-21	2,710		ADS	20 000000000000	17	0		
TREES AND IRRIGATION	2012-07-15	18,258		ADS	20 000000000000	342	0		
LANDSCAPING	2012-11-15	18,871		ADS	20 000000000000	118	0		
WELL PUMP	2012-10-31	1,495		ADS	20 000000000000	9	0		
DRIVEWAY ASPHALT PAVING	2012-11-07	15,335		ADS	20 000000000000	96	0		
WASHER/DRYER	2012-04-06	1,624		ADS	12 000000000000	85	0		
FURNITURE	2012-05-20	7,853		ADS	12 000000000000	409	0		
TABLES AND LAMPS	2012-10-08	1,564		ADS	12 000000000000	16	0		
KITCHEN/OFFICE ROOM CABINETS	2012-08-17	8,974		ADS	12 000000000000	280	0		
GENERATOR	2012-12-21	27,625		ADS	12 000000000000	288	0		
ALARM AND SECURITY SYSTEMS	2012-12-21	24,795		ADS	12 000000000000	258	0		
ANIMAL BATH W/RAMP AND BOOSTER	2012-09-07	6,658		ADS	12 000000000000	208	0		
LAUNDRY SINK AND CABINET	2012-09-07	2,160		ADS	12 000000000000	68	0		
INTERIOR RAILINGS AND GATES	2012-12-21	3,196		ADS	12 000000000000	33	0		
4' BLK FENCE PANELS AT DOG COMPOUNDS	2012-11-12	2,000		ADS	12 000000000000	21	0		
ACOUSTIC SCREEN PANELS	2012-11-20	4,142		ADS	12 000000000000	43	0		
DOUBLE FLOOD MOTION DETECTORS	2012-11-20	10,901		ADS	12 000000000000	114	0		
USED FURNITURE	2012-11-20	2,315		ADS	12 000000000000	24	0		

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
DOOR LOCKS	2012-06-02	1,200		ADS	12 000000000000	63	0		
PAINTING-WALLS, BRICK COOK STATION, FIREPLACE MANTEL	2012-11-20	4,368		ADS	12 000000000000	46	0		
WINDOW TREATMENTS	2012-05-20	2,630		ADS	12 000000000000	137	0		

## TY 2012 Land, Etc. Schedule

Name: CANINE ESTATES INC

EIN: 38-3822291

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND	53,183	0	53,183	53,183
BUILDING	212,730	4,210	208,520	208,520
ENTRANCE ELECTRONIC ROLLING GATE	20,237	632	19,605	19,605
HOUSE FRONT ENTRY GATE	880	27	853	853
PORCH SCREENING AND FLOORING	11,641	121	11,520	11,520
INTERIOR WOOD FLOORING	11,526	360	11,166	11,166
GARAGE SMALL ROOM IMPROVEMENTS	1,475	46	1,429	1,429
GAS, ELECTRICAL, WATER LINES	16,298	170	16,128	16,128
RAMP AND STEPS	7,125	74	7,051	7,051
CLOSET BUILDOUT	600	19	581	581
SEPTIC/SEWER GROUND WORK	10,658	200	10,458	10,458
CHAIN LINK FENCING	41,547	779	40,768	40,768
42" WIDE GATE	2,710	17	2,693	2,693
TREES AND IRRIGATION	18,258	342	17,916	17,916
LANDSCAPING	18,871	118	18,753	18,753
WELL PUMP	1,495	9	1,486	1,486
DRIVEWAY ASPHALT PAVING	15,335	96	15,239	15,239
WASHER/DRYER	1,624	85	1,539	1,539
FURNITURE	7,853	409	7,444	7,444
TABLES AND LAMPS	1,564	16	1,548	1,548
KITCHEN/OFFICE ROOM CABINETS	8,974	280	8,694	8,694
GENERATOR	27,625	288	27,337	27,337
ALARM AND SECURITY SYSTEMS	24,795	258	24,537	24,537
ANIMAL BATH W/RAMP AND BOOSTER	6,658	208	6,450	6,450
LAUNDRY SINK AND CABINET	2,160	68	2,092	2,092
INTERIOR RAILINGS AND GATES	3,196	33	3,163	3,163
4' BLK FENCE PANELS AT DOG COMPOUNDS	2,000	21	1,979	1,979
ACOUSTIC SCREEN PANELS	4,142	43	4,099	4,099
DOUBLE FLOOD MOTION DETECTORS	10,901	114	10,787	10,787
USED FURNITURE	2,315	24	2,291	2,291

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
DOOR LOCKS	1,200	63	1,137	1,137
PAINTING-WALLS, BRICK COOK STATION, FIREPLACE MANTEL	4,368	46	4,322	4,322
WINDOW TREATMENTS	2,630	137	2,493	2,493

## TY 2012 Legal Fees Schedule

**Name:** CANINE ESTATES INC

**EIN:** 38-3822291

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	9,666	0		0

## TY 2012 Other Expenses Schedule

**Name:** CANINE ESTATES INC

**EIN:** 38-3822291

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANIMAL HOSPITAL AND VETERINARIAN FEES	119,980	0		119,980
DOG CARE, MEDICINE AND SUPPLIES	42,032	0		42,032
GROOMING SERVICES	23,973	0		23,973
SHELTER EXPENSES	62,616	0		61,205
ADVERTISING	4,226	0		0
ADMINISTRATIVE COSTS	4,000	0		0
CONTRACT SERVICES	37,882	0		37,882
RESCUE EXPENSES	962	0		962
EVENTS AND FUNDRAISING COSTS	6,655	0		0

## TY 2012 Other Income Schedule

**Name:** CANINE ESTATES INC**EIN:** 38-3822291

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ADOPTION FEES	5,220		5,220
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	3,872		3,872

## TY 2012 Other Professional Fees Schedule

**Name:** CANINE ESTATES INC**EIN:** 38-3822291

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WEBSITE DESIGN/MAINTENANCE	1,761	0		0

## TY 2012 Substantial Contributors Schedule

**Name:** CANINE ESTATES INC

**EIN:** 38-3822291

Name	Address
GREG JAYNE SIDWELL	2944 LEPRECHAUN LANE PALM HARBOR, FL 34685
G & J MARKETING COMPANY	292 ALT US HWY 19 N PALM HARBOR, FL 34685
TOM JUDY AHEARN	190 SE 19TH AVE POMPANO BEACH, FL 33060
ANDERSON HOTELS INC	4815 UNIVERSITY DR HUNTSVILLE, AL 35816

## TY 2012 Taxes Schedule

**Name:** CANINE ESTATES INC**EIN:** 38-3822291

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LICENSES AND TAXES	186	0		0