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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2012**Open to Public Inspection**Department of the Treasury
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities,
and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).
All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000
at the end of the year may use this form.

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

A For the 2012 calendar year, or tax year beginning , 2012, and ending , 20**B** Check if applicable:

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

C Name of organization

BMW Motorcycle Owners of Florida Inc.

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

P.O. Box 61674

Room/suite

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

Jacksonville, FL 32236-1674

D Employer identification number

55-0810208

E Telephone number

904-230-1174

F Group Exemption
Number

N/A

G Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶**I** Website: ▶ BMWNEF.ORG**H** Check ☒ if the organization is not
required to attach Schedule B
(Form 990, 990-EZ, or 990-PF).**J** Tax-exempt status (check only one) - ☐ 501(c)(3) ☒ 501(c)(4) (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally
not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if
the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II,
line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ

\$ 43,858

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☐

SCANNED MAR 21 2013	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	5,750
	4	Investment income	4	214
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O) (See attached sheet)	8	37,894	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	43,858	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	400
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	120
	14	Occupancy, rent, utilities, and maintenance	14	578
	15	Printing, publications, postage, and shipping	15	690
	16	Other expenses (describe in Schedule O) (See attached sheet)	16	45,194
17	Total expenses. Add lines 10 through 16	17	46,982	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(3,124)
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	61,622
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	0
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	58,498

For Paperwork Reduction Act Notice, see the separate instructions.

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Form **990-EZ** (2012)

10 P

Part II Balance Sheets (see the instructions for Part II)

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

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	61,622	58,498
23	Land and buildings	—	—
24	Other assets (describe in Schedule O)	—	—
25	Total assets	61,622	58,498
26	Total liabilities (describe in Schedule O)	—	—
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	61,622	58,498

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

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

What is the organization's primary exempt purpose? motorcycle education + charity fundrais

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

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others)

28	motorcycle safety & education courses were held to instruct on skills & safety maneuvers. These club events are offered to club members & guests (Grants \$ <u>0</u>) If this amount includes foreign grants, check here ☐	28a	5,159
29	Winter Rally was held in January. The rally offers motorcycle riders the opportunity to gather, practice riding skills, attend seminars & help raise money for charities (Grants \$ <u>0</u>) If this amount includes foreign grants, check here ☐	29a	28,855
30	Riding Into History was held in May. This event shows vintage motorcycles. The funds raised are donated to The Wounded Warriors Project. No expenses. All volunteers (Grants \$ <u>0</u>) If this amount includes foreign grants, check here ☐	30a	
31	Other program services (describe in Schedule O) (Grants \$ <u>0</u>) If this amount includes foreign grants, check here ☐	31a	
32	Total program service expenses (add lines 28a through 31a) ☐	32	34,014

Part IV **List of Officers, Directors, Trustees, and Key Employees** List each one even if not compensated (see the instructions for Part IV)

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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Wayne Givens 9938 Orchards Hills Rd Jacksonville, FL 32256	President 10 HRS	0	0	0
Chip Kenyon 10442 Hunters Creek Ct. Jacksonville, FL 32256	Vice-pres. 5 HRS	0	0	0
Vicki Decker 1754 Fiddlers Ridge Dr Orange Park, FL 32003	Secretary 2 HRS	0	0	0
David Palm 501 Chipley Place East St Johns, FL 32259	Treasurer 2 HRS	0	0	0

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

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	☒
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	☒
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	☒
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	☒
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a		
b Did the organization file Form 1120-POL for this year?	37b	☒
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	☒
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b <i>N/A</i>	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a <i>N/A</i>	
b Gross receipts, included on line 9, for public use of club facilities	39b <i>N/A</i>	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	☒
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	☒
41 List the states with which a copy of this return is filed ▶		
42a The organization's books are in care of ▶ <i>Wayne Givens</i> Telephone no. ▶		
Located at ▶ <i>9938 Orchard Hills RD Jacksonville, FL</i> ZIP + 4 ▶ <i>32256</i>		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	☒
If "Yes," enter the name of the foreign country: ▶		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
c At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	☒
If "Yes," enter the name of the foreign country: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ ☐	43	
and enter the amount of tax-exempt interest received or accrued during the tax year ▶		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	☒
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	☒
c Did the organization receive any payments for indoor tanning services during the year?	44c	☒
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	☒
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	☒
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	☒

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

	Yes	No
46		☒

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

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

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

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

	Yes	No
47		☒

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

	Yes	No
48		☒

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

	Yes	No
49a		☒

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

	Yes	No
49b		☒

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

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NO payroll				

f Total number of other employees paid over \$100,000

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NO independent contractors		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

☐ Yes ☒ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer *Wayne Owens*

Date *3/1/2013*

Type or print name and title *Wayne Owens, Treasurer*

Paid Preparer Use Only

Print/Type preparer's name <i>Sheryl S Potter</i>	Preparer's signature <i>[Signature]</i>	Date <i>3/1/13</i>	Check ☐ if self-employed	PTIN <i>001568517</i>
Firm's name <i>Potter Inc.</i>	Firm's EIN <i>59-3487049</i>	Phone no. <i>904-992-7102</i>		
Firm's address <i>4143 Richmond Park Dr E, Jax, FL 32224</i>				

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

BMW MOTORCYCLE OWNERS OF NORTHEAST FLORIDA, INC.
FORM 990EZ, 2012
TAX ID # 55-0810208

DETAIL LINE #8 OTHER REVENUE

Winter Rally Income	\$36,429
Meeting Income	1,465
TOTAL	\$ 37,894

DETAIL LINE# 16 OTHER EXPENSES

Charitable Contributions	\$ 6,612
Club Events	5,159
Insurance	1,627
Miscellaneous	416
Winter Rally	28,855
Club Merchandise	2,525
TOTAL	\$ 45,194