Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2012

Open to Public Inspection

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

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Terminated [ ] Amended return [ ] Application pending

C Name of organization
AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS
Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
4075 IRON WORKS PARKWAY

City, town, or post office, state, and ZIP code
LEXINGTON, KY 40511-8462

F Name and address of principal officer: DAVID L. FOLEY
SAME AS C ABOVE

D Employer identification number
84-6035908

E Telephone number
(859)233-0147

G Gross receipts $ 7,316,661.

H(a) Is this a group return for affiliates? [ ] Yes [X] No
H(b) Are all affiliates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: [ ] 501(c)(3) [X] 501(c) (6) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.AAEP.ORG

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1954 M State of legal domicile: IL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO AID, SPONSOR, PROMOTE AND CONTRIBUTE TO EDUCATION IN FURTHERANCE OF THE TREATMENT, CARE AND

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	20
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	21
6	Total number of volunteers (estimate if necessary)	6	73
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	148,515.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	357,375.	2,528,629.
	9	Program service revenue (Part VIII, line 2g)	5,171,031.	3,042,097.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	143,251.	250,168.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	26,496.	74,499.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,698,153.	5,895,393.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	138,721.	133,760.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,432,999.	1,485,966.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,807,461.	3,963,341.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	5,379,181.	5,583,067.
	19	Revenue less expenses. Subtract line 18 from line 12	318,972.	312,326.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	4,658,553.	5,292,109.
	21	Total liabilities (Part X, line 26)	1,174,113.	1,505,699.
	22	Net assets or fund balances. Subtract line 21 from line 20	3,484,440.	3,786,410.

RECEIVED
AUG 16 2013
OGDEN, UT
IRS-OSC

Part II Signature Block

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

Sign Here
▶ Signature of officer — Date 8/8/13
▶ DAVID L. FOLEY, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
HARVEY D. THOMPSON	Harvey D. Thompson CPA	8/3/13		P00408684

Firm's name ▶ BARR, ANDERSON & ROBERTS, P.S.C. — Firm's EIN ▶ 61-1147905
Firm's address ▶ 2335 STERLINGTON ROAD, SUITE 100
LEXINGTON, KY 40517 — Phone no. (859)268-1040

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

TO IMPROVE THE HEALTH AND WELFARE OF THE HORSE, TO FURTHER THE PROFESSIONAL DEVELOPMENT OF ITS MEMBERS, AND TO PROVIDE RESOURCES AND LEADERSHIP FOR THE BENEFIT OF THE EQUINE INDUSTRY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes X No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes X No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code ______) (Expenses $ ______ including grants of $ ______) (Revenue $ ______)

AN ANNUAL CONVENTION FOR THE ORGANIZATION WHICH PROMOTES THE KNOWLEDGE OF EQUINE DISEASES THROUGH SCIENTIFIC PROGRAMS. OVER 5,700 INDIVIDUALS INCLUDING 2,660 VETERINARIANS/MEMBERS ATTENDED THE CONVENTION.

4b (Code ______) (Expenses $ ______ including grants of $ ______) (Revenue $ ______)

ANNUAL SEMINARS, WHICH ARE SIMILAR TO THE CONVENTION, THAT FOCUS ON SPECIFIC VETERINARY TOPICS AND VETERINEARY PRACTICE MANAGEMENT. 537 INDIVIDUALS ATTENDED THE SEMINARS.

4c (Code ______) (Expenses $ ______ including grants of $ ______) (Revenue $ ______)

THE ORGANIZATION PROVIDES PUBLICATIONS, SUCH AS THE ANNUAL CONVENTION PROCEEDINGS BOOK AND MONTHLY VETERINARY SCIENTIFIC JOURNALS, TO MEMBERS TO FURTHER THE KNOWLEDGE OF VETERINARY PRACTICE.

4d Other program services (Describe in Schedule O.)

(Expenses $ ______ including grants of $ ______) (Revenue $ ______)

4e **Total program service expenses ▶**

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		X
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
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		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5	X	
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
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		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
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		X
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		X
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*	17		X
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		X
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		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			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	X	
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		X
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	X	
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
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		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
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		X
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		X
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
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		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	35			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	
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	21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	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	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country ▶					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year — 1a: 20. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent — 1b: 20				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6		X	
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		X	
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		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b			X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[ ] Own website [ ] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

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

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

DAVID L. FOLEY, EXECUTIVE DIRECTOR - (859) 233-0147

4075 IRON WORKS PARKWAY, LEXINGTON, KY 40511

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
CAROLYN M. WEINBERG, DVM DIRECTOR	2.00	X						0.	0.	0.
STEVEN S. TROSTLE, DVM, MS, DACVS DIRECTOR	2.00	X						0.	0.	0.
MARGO L. MACPHERSON, DVM, MS, DACT DIRECTOR	2.00	X						0.	0.	0.
JAY D. ADDISON, DVM DIRECTOR	2.00	X						0.	0.	0.
JOHN A. STICK, DVM DIRECTOR	2.00	X						0.	0.	0.
JOSIE L. TRAUB-DARGATZ, DVM, MS DIRECTOR	2.00	X						0.	0.	0.
BENJAMIN M.K. ESPY, DVM, DACT DIRECTOR	2.00	X						0.	0.	0.
BRAD JACKMAN, DVM, MS, DACVS DIRECTOR	2.00	X						0.	0.	0.
ELIZABETH S. METCALF, DVM, MS DIRECTOR	2.00	X						0.	0.	0.
EMMA KATE READ, DVM, MVSC, DACVS DIRECTOR	2.00	X						0.	0.	0.
BILL BREWER DIRECTOR	2.00	X						0.	0.	0.
DESMOND P LEADON, MA, MVB, MSC, FRCV DIRECTOR	2.00	X						0.	0.	0.
ROGER E. REES, DVMR DIRECTOR AT LARGE	2.00	X						0.	0.	0.
ERIC S. PETERSON, DVM DIRECTOR AT LARGE	2.00	X						0.	0.	0.
KAREN A. NYROP, DVM, MS DIRECTOR AT LARGE	2.00	X						0.	0.	0.
DAVID L. FOLEY EXECUTIVE DIRECTOR	35.00			X				232,050.	0.	28,026.
BRAD MITCHELL DIRECTOR OF FINANCE AND OP	40.00			X				130,581.	0.	22,991.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JOHN S. MITCHELL, DVM PRESIDENT	5.00			X				0.	0.	0.
ANN E. DWYER, DVM PRESIDENT-ELECT	5.00			X				0.	0.	0.
JEFF A. BLEA, DVM VICE PRESIDENT	5.00			X				1,000.	0.	0.
WILLIAM A. MOYER, DVM IMMEDIATE PAST PRESIDENT	5.00			X				0.	0.	0.
JAMES P. MOREHEAD, DVM TREASURER	5.00			X				0.	0.	0.

	(D)	(E)	(F)
1b Sub-total ▶	363,631.	0.	51,017.
c Total from continuation sheets to Part VII, Section A ▶	0.	0.	0.
d Total (add lines 1b and 1c) ▶	363,631.	0.	51,017.

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

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address NONE	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	2,066,129.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	462,500.				
	g Noncash contributions included in lines 1a-1f $						
	h **Total.** Add lines 1a-1f ▶			2,528,629.			
Program Service Revenue			Business Code				
	2 a ANNUAL CONVENTION		900099	2,404,773.			2,404,773.
	b ANNUAL SEMINAR		900099	460,097.			460,097.
	c PERIODICAL ADVERTISING		541800	148,515.		148,515.	
	d PUBLICATIONS		900099	28,712.	28,712.		
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f ▶			3,042,097.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			86,510.			86,510.
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶			2,631.			2,631.
		(i) Real	(ii) Personal				
	6 a Gross rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶						
	7 a Gross amount from sales of assets other than inventory	(i) Securities 1,584,926.	(ii) Other				
	b Less: cost or other basis and sales expenses	1,421,268.					
	c Gain or (loss)	163,658.					
	d Net gain or (loss) ▶			163,658.			163,658.
	8 a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events ▶						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory ▶						
	Miscellaneous Revenue		Business Code				
	11 a CONV. SOFT GOODS SALES		900099	47,211.	47,211.		
	b JOB LISTINGS		900099	21,227.	21,227.		
	c CLIENT EDUCATION BROCHURES		900099	3,430.	3,430.		
	d All other revenue						
	e **Total.** Add lines 11a-11d ▶			71,868.			
	12 **Total revenue.** See instructions. ▶			5,895,393.	100,580.	148,515.	3,117,669.

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Form **990** (2012)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response to any question in this Part IX [X]

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	133,760.			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	413,648.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	831,071.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	28,554.			
9 Other employee benefits	128,615.			
10 Payroll taxes	84,078.			
11 Fees for services (non-employees):				
a Management				
b Legal	2,736.			
c Accounting	8,975.			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	10,485.			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	145,101.			
12 Advertising and promotion				
13 Office expenses	124,595.			
14 Information technology				
15 Royalties				
16 Occupancy	26,270.			
17 Travel	250,351.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,921,981.			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	39,381.			
23 Insurance	12,653.			
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRINTING AND PUBLICATIO	628,613.			
b SEMINAR EXPENSES	358,024.			
c COMMITTEES AND TASK FOR	113,078.			
d CREDIT CARD FEES	78,188.			
e All other expenses SEE SCH O	242,910.			
25 **Total functional expenses.** Add lines 1 through 24e	5,583,067.			
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ [ ] if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	140,114.	1	122,121.
	2	Savings and temporary cash investments	2,234,179.	2	2,691,073.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
	7	Notes and loans receivable, net	102,698.	7	130,676.
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	34,467.	9	53,309.
	10a	Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D — 10a 1,129,332.			
	b	Less accumulated depreciation — 10b 582,167.	539,309.	10c	547,165.
	11	Investments - publicly traded securities	1,561,336.	11	1,741,765.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	46,450.	15	6,000.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	4,658,553.	16	5,292,109.
Liabilities	17	Accounts payable and accrued expenses	52,721.	17	444,236.
	18	Grants payable		18	
	19	Deferred revenue	1,121,392.	19	1,060,009.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	1,454.
	26	**Total liabilities.** Add lines 17 through 25	1,174,113.	26	1,505,699.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	3,484,440.	27	3,786,410.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	3,484,440.	33	3,786,410.
	34	Total liabilities and net assets/fund balances	4,658,553.	34	5,292,109.

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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)	1	5,895,393.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,583,067.
3	Revenue less expenses. Subtract line 2 from line 1	3	312,326.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,484,440.
5	Net unrealized gains (losses) on investments	5	-10,356.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,786,410.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other ________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form 990 (2012)

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SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions.

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If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III

Name of organization	Employer identification number
AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS	84-6035908

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ $

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		X
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2	X	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		X

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."**

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

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Name of the organization AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS

Employer identification number 84-6035908

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

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

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ ______%

b Permanent endowment ▶ ______%

c Temporarily restricted endowment ▶ ______%

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

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		778,542.	297,495.	481,047.
c Leasehold improvements				
d Equipment		221,867.	169,235.	52,632.
e Other		128,923.	115,437.	13,486.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				547,165.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CAFETERIA PLAN WITHHELD	1,454.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	1,454.

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

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

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

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

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

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

PART X, LINE 2: MANAGEMENT OF AAEP AND THE FOUNDATION HAS EVALUATED THE TAX POSITIONS TAKEN ON ALL INCOME TAX RETURNS THAT REMAIN OPEN TO EXAMINATION BY THE RESPECTIVE TAXING AUTHORITIES (2009 AND FORWARD). MANAGEMENT DOES NOT BELIEVE THAT THERE ARE ANY UNCERTAIN POSITIONS ON THOSE RETURNS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization: AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS

Employer identification number 84-6035908

Part I **General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HORSE COUNCIL, INC. 1616 H STREET, NW WASHINGTON, DC 20006	52-0889723	501(C)(6)	65,000.	0.			GRANT TO FURTHER EQUINE PROMOTION
THE AAEP FOUNDATION, INC. 4075 IRON WORKS PARKWAY LEXINGTON, KY 40511	61-1259683	501(C)(3)	57,500.	0.			GRANT TO FURTHER EQUINE PROMOTION
RACING MEDICATION AND TESTING CONSORTIUM, INC. - 821 CORPORATE DR LEXINGTON, KY 40503	72-1559413	501(C)(3)	10,000.	0.			GRANT TO FURTHER EQUINE PROMOTION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 2.

3 Enter total number of other organizations listed in the line 1 table ▶ 1.

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

SCHEDULE I, PART I, LINE 2: DIRECT REPORTING FROM THE GRANTEE.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization: AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS

Employer identification number: 84-6035908

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☒ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☒ Health or social club dues or initiation fees ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization.			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		X
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		
b	Any related organization? If "Yes" to line 5a or 5b, describe in Part III	5b		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		
b	Any related organization? If "Yes" to line 6a or 6b, describe in Part III	6b		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
DAVID L. FOLEY	(i)	232,050.	0.	0.	0.	28,026.	260,076.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
BRAD MITCHELL	(i)	130,581.	0.	0.	0.	22,991.	153,572.	0.
DIRECTOR OF FINANCE AND OP	(ii)	0.	0.	0.	0.	0.	0.	0.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

PART I, LINE 1A: A $5,000 ALLOWANCE FOR THE PRESIDENT'S SPOUSE AND A $3,000 ALLOWANCE FOR THE EXECUTIVE DIRECTOR'S SPOUSE IS PROVIDED FOR IN THE COMPANY POLICY MANUAL UNDER AN ACCOUNTABLE PLAN. ACTUAL EXPENDITURES FOR THE PRESIDENT'S SPOUSE WERE $3,659 AND FOR THE EXECUTIVE DIRECTOR'S SPOUSE WERE $538 FOR 2012.

HEALTH CLUB DUES PAID ON BEHALF OF THE EXECUTIVE DIRECTOR WAS $600.

THOROUGHBRED CLUB OF AMERICA DUES ON BEHALF OF THE EXECUTIVE DIRECTOR WAS $350.

SPINDLETOP MEMBERSHIP DUES ON BEHALF OF THE EXECUTIVE DIRECTOR WAS $990.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization	Employer identification number
AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS	84-6035908

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
WELFARE OF THE HORSE.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS COMPOSED OF INDIVIDUALS FROM THE EQUINE INDUSTRY.

FORM 990, PART VI, SECTION A, LINE 7A: ALL INDIVIDUAL MEMBERS HAVE EQUAL VOICE IN ELECTING GOVERNING REPRESENTATIVES.

FORM 990, PART VI, SECTION A, LINE 7B: ALL INDIVIDUAL MEMBERS HAVE THE RIGHT TO VOTE ON BYLAW CHANGES AT THE ANNUAL MEETING HELD DURING THE CONVENTION.

FORM 990, PART VI, SECTION A, LINE 8B: MINUTES OF COMMITTEE MEETINGS WERE NOTED WITHIN THE GOVERNING BODY MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND DIRECTOR OF FINANCE AND OPERATIONS PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICIES ARE REVIEWED ANNUALLY WITH BOARD MEMBERS AND DIRECTORS DURING THE DECEMBER BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED BY THE EXECUTIVE DIRECTOR REVIEW COMMITTEE WHICH

Name of the organization AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS

Employer identification number 84-6035908

USES AN EXECUTIVE COMMITTEE STUDY. THIS COMMITTEE MAKES A RECOMMENDATION TO THE EXECUTIVE COMMITTEE WHO THEN SENDS A DECISION TO THE PRESIDENT FOR APPROVAL.

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS ARE PUBLISHED IN THE MEMBERSHIP DIRECTORY WHILE THE CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

APPAREL AND SOFT GOODS:

TOTAL EXPENSES 64,243.

PUBLIC RELATIONS:

TOTAL EXPENSES 44,839.

STUDENT PROGRAMS:

TOTAL EXPENSES 32,834.

ONLINE SERVICES:

TOTAL EXPENSES 25,831.

MEMBERSHIP EXPENSES:

TOTAL EXPENSES 21,010.

ON-CALL PROGRAM:

TOTAL EXPENSES 13,972.

VEHICLE RENTAL:

Name of the organization	Employer identification number
AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS	84-6035908

TOTAL EXPENSES 10,751.

STAFF CONTINUING EDUCATION:

TOTAL EXPENSES 8,197.

DUES & SUBSCRIPTIONS:

TOTAL EXPENSES 7,178.

PRESIDENT'S FUND:

TOTAL EXPENSES 5,297.

OWNER EDUCATION:

TOTAL EXPENSES 4,871.

MISCELLANEOUS:

TOTAL EXPENSES 1,500.

TAXES AND LICENSES:

TOTAL EXPENSES 1,142.

MAINTENANCE CONTRACTS:

TOTAL EXPENSES 1,140.

LOSS ON FOREIGN EXCHANGE:

TOTAL EXPENSES 105.

TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A 242,910.

FORM 990, PART IX, LINE 11G, OTHER FEES:

Name of the organization AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS

Employer identification number 84-6035908

CONTRACT LABOR:

TOTAL EXPENSES 43,836.

STRATEGIC PLANNING:

TOTAL EXPENSES 93,294.

RETIREMENT PLAN ADMINISTRATION FEES:

TOTAL EXPENSES 4,355.

PAYROLL PROCESSING FEES:

TOTAL EXPENSES 3,616.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 145,101.

FORM 990, PART XII, LINE 2C

THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR THE REVIEW OF THE FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

SCHEDULE R
(Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization: AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS

Employer identification number: 84-6035908

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
THE AAEP FOUNDATION, INC. - 61-1259683 4075 IRON WORKS PARKWAY LEXINGTON, KY 40511-8462	TO AID & CONTRIBUTE TO EDUCATION IN FURTHERANCE OF THE WELFARE OF THE	KENTUCKY	501(C)(3)	9	AMERICAN ASSOCIATION OF EQUINE		X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART VII FOR CONTINUATIONS

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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

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

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

			Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b	X	
c	Gift, grant, or capital contribution from related organization(s)	1c		X
d	Loans or loan guarantees to or for related organization(s)	1d		X
e	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l		X
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
o	Sharing of paid employees with related organization(s)	1o	X	
p	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q		X
r	Other transfer of cash or property to related organization(s)	1r	X	
s	Other transfer of cash or property from related organization(s)	1s	X	

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE AAEP FOUNDATION, INC.	B	57,500.	BOOK VALUE
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners sec 501(c)(3) orgs? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor-tionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part VII Supplemental Information

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

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

THE AAEP FOUNDATION, INC.

PRIMARY ACTIVITY: TO AID & CONTRIBUTE TO EDUCATION IN FURTHERANCE OF THE WELFARE OF THE HORSE

DIRECT CONTROLLING ENTITY: AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS

Form **8868** (Rev January 2013) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ ☑
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (*e-file*). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information *Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format* (see instructions) For more details on the electronic filing of this form, visit *www irs.gov/efile* and click on *e-file for Charities & Nonprofits*

Part I Automatic 3-Month Extension of Time. *Only submit original (no copies needed)*

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ▶ ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions American Association of Equine Practitioners	Employer identification number (EIN) or 84-6035908
	Number, street, and room or suite no If a P O box, see instructions 4075 Iron Works Parkway	Social security number (SSN)
	City, town or post office, state, and ZIP code For a foreign address, see instructions Lexington, KY 40511-8462	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ David L Foley 4075 Iron Works Pkwy Lexington, KY 40511-8462

Telephone No ▶ 859-233-0147 FAX No ▶ 859-233-1968

- If the organization does not have an office or place of business in the United States, check this box ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ____ If this is for the whole group, check this box ▶ ☐. If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 20 13, to file the exempt organization return for the organization named above The extension is for the organization's return for

▶ ☑ calendar year 20 12 or

▶ ☐ tax year beginning ____, 20 ___, and ending ____, 20 ___.

2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	$ 0
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	$ 0
c	**Balance due.** Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	3c	$ 0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS
DEPRECIATION SCHEDULE
JANUARY 1, 2012 THROUGH DECEMBER 31, 2012

ACCT	DESCRIPTION	DATE ACQ	COST	LIFE	CURRENT DEPR	PREVIOUS DEPR	ENDING DEPR	ENDING BOOK VALUE
*150	BUILDING							
1	OFFICE BUILDING	12/01/91	$ 344,520.12	40	$8,613.00	$172,977.73	$181,590.73	$162,929.39
2	SPECTRUM CONTRACTING FIT UP (PONY CLUB)	02/02/93	$ 40,678.00	40	$1,016.95	$19,237.31	$20,254.26	$20,423.74
3	DRYWALL REPAIR	08/01/94	$ 1,223.47	40	$30.59	$532.76	$563.35	$660.12
4	FRONT OFFICE CLOSET	02/01/95	$ 2,126.37	40	$53.16	$899.29	$952.45	$1,173.92
5	REPAIRS; CARPET STRETCH	12/01/95	$ 3,865.00	40	$96.63	$1,554.12	$1,650.75	$2,214.26
6	EXTERIOR PAINTING	11/1/98	$ 12,190.72	40	$304.77	$4,012.80	$4,317.57	$7,873.15
7	HAWKINS REMODELING	4/1/01	$ 207,581.92	40	$5,189.55	$55,787.66	$60,977.21	$146,604.71
8	BUILDING ADDITION - 3 OFFICES	5/1/05	$ 157,245.59	40	$3,931.14	$26,207.60	$30,138.74	$127,106.85
9	SEWAGE GRINDER PUMP	3/1/07	$ 4,136.08	40	$103.40	$499.77	$603.17	$3,532.91
10	CABINETS IN BACK ADDITION	9/1/07	$ 4,975.00	40	$124.38	$538.98	$663.36	$4,311.65
	ACCUM DEPR TO ACTUAL PER 2009 AUDIT					($4,216.42)	($4,216.42)	$4,216.42
TOTAL FOR ACCOUNT NUMBER		*150	$ 778,542.27		$19,463.56	$278,031.60	$297,495.16	$481,047.11
*160	FURNITURE & FIXTURES							
1	FIRE KING 4-DRAWER SAFE	02/28/90	$ 787.50	7	$0.00	$787.50	$787.50	$0.00
2	4 8X36 FOLDING TABLES	03/23/92	$ 3,392.00	10	$0.00	$3,392.00	$3,392.00	$0.00
3	16 SLED BASE CONF CHAIRS	03/23/92	$ 6,105.60	10	$0.00	$6,105.60	$6,105.60	$0.00
4	8 STACKING CHAIRS	03/23/92	$ 898.88	10	$0.00	$898.88	$898.88	$0.00
5	2 3-DRAWER LETTER FILES	03/23/92	$ 890.40	10	$0.00	$890.40	$890.40	$0.00
6	3 SEAT SOFA	03/23/92	$ 1,515.80	10	$0.00	$1,515.80	$1,515.80	$0.00
7	2 LOUNGE CHAIRS	03/23/92	$ 1,060.00	10	$0.00	$1,060.00	$1,060.00	$0.00
8	SINGLE PEDESTAL DESK	03/23/92	$ 3,333.70	10	$0.00	$3,333.70	$3,333.70	$0.00
9	EXECUTIVE SWIVEL CHAIR	03/23/92	$ 643.42	10	$0.00	$643.42	$643.42	$0.00
10	PED. DESK W/BRIDGE & CREDENZA	03/23/92	$ 3,398.36	10	$0.00	$3,398.36	$3,398.36	$0.00
11	36" CONFERENCE TABLE	03/23/92	$ 893.58	10	$0.00	$893.58	$893.58	$0.00

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ACCT	DESCRIPTION	DATE ACQ	COST	LIFE	CURRENT DEPR	PREVIOUS DEPR	ENDING DEPR	ENDING BOOK VALUE
12	SINGLE PEDESTAL DESK	03/23/92	$ 3,457.72	10	$0.00	$3,457.72	$3,457.72	$0.00
13	2 DRAWER 30" LATERAL FILE	03/23/92	$ 615.86	10	$0.00	$615.86	$615.86	$0.00
14	2 GUEST CHAIRS	03/23/92	$ 483.36	10	$0.00	$483.36	$483.36	$0.00
15	1 TASK CHAIR	03/23/92	$ 652.96	10	$0.00	$652.96	$652.96	$0.00
16	EDITORS OFFICE DESK	03/23/92	$ 3,457.72	10	$0.00	$3,457.72	$3,457.72	$0.00
17	2 GUEST CHAIRS	03/23/92	$ 483.36	10	$0.00	$483.36	$483.36	$0.00
18	4 SHELF BOOKCASE	03/23/92	$ 561.80	10	$0.00	$561.80	$561.80	$0.00
19	1 TASK CHAIR	03/23/92	$ 652.96	10	$0.00	$652.96	$652.96	$0.00
20	TV/VCR STAND	03/23/92	$ 434.60	10	$0.00	$434.60	$434.60	$0.00
21	2 36X36 LUNCH ROOM TABLES	03/23/92	$ 396.44	10	$0.00	$396.44	$396.44	$0.00
22	STEEL SHELVING UNITS	03/23/92	$ 328.60	10	$0.00	$328.60	$328.60	$0.00
23	END TABLE	03/23/92	$ 201.40	10	$0.00	$201.40	$201.40	$0.00
24	END TABLE	03/23/92	$ 178.08	10	$0.00	$178.08	$178.08	$0.00
25	PHONE TABLE	03/23/92	$ 236.38	10	$0.00	$236.38	$236.38	$0.00
26	EXECUTIVE SWIVEL CHAIR	03/23/92	$ 675.22	10	$0.00	$675.22	$675.22	$0.00
27	GUEST CHAIRS	03/23/92	$ 1,543.36	10	$0.00	$1,543.36	$1,543.36	$0.00
28	PRINTS SUGAR. OFF/SEPT OUTING	03/26/92	$ 240.00	10	$0.00	$240.00	$240.00	$0.00
29	PRINT-LATE YEAR/NC WYETH/MDW.	03/26/92	$ 206.17	10	$0.00	$206.17	$206.17	$0.00
30	JACQUARD PRINT LAMP	04/10/92	$ 296.80	10	$0.00	$296.80	$296.80	$0.00
31	EQUESTRIAN PILLOWS	04/10/92	$ 95.40	10	$0.00	$95.40	$95.40	$0.00
32	BELLINGRATH GARDENS PRINT	04/15/92	$ 468.14	10	$0.00	$468.14	$468.14	$0.00
33	BUGLE PHOTO/WAYNE KESTER	04/20/92	$ 689.00	10	$0.00	$689.00	$689.00	$0.00
34	WOOD BLINDS, CHALKBOARD, RUG	05/07/92	$ 2,562.72	10	$0.00	$2,562.72	$2,562.72	$0.00
35	PRINT BLODGETT	05/28/92	$ 98.32	10	$0.00	$98.32	$98.32	$0.00
36	PRINT MOORHOUSE	05/28/92	$ 44.88	10	$0.00	$44.88	$44.88	$0.00
37	PRINT	07/23/92	$ 85.00	10	$0.00	$85.00	$85.00	$0.00
38	PRINTS-CROSS GATE GALLERY	08/10/92	$ 333.37	10	$0.00	$333.37	$333.37	$0.00
39	PRINT-CROSS GATE GALLERY	09/30/92	$ 314.82	10	$0.00	$314.82	$314.82	$0.00
40	DESK & BOOKCASES - ACTION	11/13/92	$ 2,624.20	10	$0.00	$2,624.20	$2,624.20	$0.00
41	BLINDS - INTERSPACE LTD	01/27/93	$ 299.36	10	$0.00	$299.36	$299.36	$0.00
42	1 SET CHROMOLITHOGRAPHS	06/11/93	$ 1,000.00	10	$0.00	$1,000.00	$1,000.00	$0.00

AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS
DEPRECIATION SCHEDULE
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ACCT	DESCRIPTION	DATE ACQ		COST	LIFE	CURRENT DEPR	PREVIOUS DEPR	ENDING DEPR	ENDING BOOK VALUE
43	WEISS - WINDOW TREATMENT DEPOSIT	05/01/96	$	200.00	10	$0.00	$200.00	$200.00	$0.00
44	WEISS - MERIDIAN DESK	06/01/96	$	3,061.38	10	$0.00	$3,061.38	$3,061.38	$0.00
45	WEISS - FILE CABINET	06/01/96	$	429.30	10	$0.00	$429.30	$429.30	$0.00
46	WEISS - CHAIR	06/01/96	$	551.20	10	$0.00	$551.20	$551.20	$0.00
47	WEISS - LIGHT FIXTURE & WALLPAPER	06/01/96	$	1,354.19	10	$0.00	$1,354.19	$1,354.19	$0.00
48	PAINTING - FOX HUNT	07/01/96	$	184.97	10	$0.00	$184.97	$184.97	$0.00
49	WEISS - WINDOW TREATMENTS	08/01/96	$	729.12	10	$0.00	$729.12	$729.12	$0.00
50	WEISS - CHAIR, DESK, FILES	06/19/97	$	3,744.02	5	$0.00	$3,744.02	$3,744.02	$0.00
51	WEISS-LOBBY PANELS	08/01/97	$	940.30	5	$0.00	$940.30	$940.30	$0.00
52	DESK CHAIR	03/04/98	$	143.09	5	$0.00	$143.09	$143.09	$0.00
53	FRONT OFFICE DESK, FILES	06/24/98	$	3,875.47	5	$0.00	$3,875.47	$3,875.47	$0.00
54	WINDOW BLINDS	07/27/98	$	212.00	5	$0.00	$212.00	$212.00	$0.00
55	PANELS; DESK FILES; LATERAL FILE	06/01/99	$	4,272.18	5	$0.00	$4,272.18	$4,272.18	$0.00
56	DESK CHAIR	08/25/99	$	1,121.76	5	$0.00	$1,121.76	$1,121.76	$0.00
57	WINDOW BLINDS	07/01/00	$	1,192.40	5	$0.00	$1,192.40	$1,192.40	$0.00
58	INTERSPACE-WOOD DESK/RETURN	10/1/00	$	3,260.00	5	$0.00	$3,260.00	$3,260.00	$0.00
59	CARDINAL-3 DESKS/RETURNS/CHAIRS	12/1/00	$	4,874.94	5	$0.00	$4,874.94	$4,874.94	$0.00
60	CARDINAL-1 DESK/7 CHAIRS/5 FILES	7/1/01	$	3,514.96	5	$0.00	$3,514.96	$3,514.96	$0.00
61	2 CONFERENCE ROOM TABLES	7/1/03	$	2,127.06	10	$212.71	$1,808.01	$2,020.72	$106.34
62	6 CONFERENCE ROOM CHAIRS	7/1/03	$	1,246.54	10	$124.65	$1,059.53	$1,184.18	$62.36
63	CABINETS IN CONFERENCE ROOM	11/1/03	$	12,746.30	10	$1,274.63	$10,409.48	$11,684.11	$1,062.19
64	REFRIGERATOR	1/1/04	$	540.99	10	$54.10	$432.80	$486.90	$54.09
65	DESK & FILE CABINETS	11/1/04	$	1,582.51	10	$158.25	$1,134.13	$1,292.38	$290.13

AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS
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JANUARY 1, 2012 THROUGH DECEMBER 31, 2012

ACCT	DESCRIPTION	DATE ACQ	COST	LIFE	CURRENT DEPR	PREVIOUS DEPR	ENDING DEPR	ENDING BOOK VALUE
66	FILE CABINETS & BOOKCASES	5/1/05	$ 1,819.09	10	$181.91	$1,212.73	$1,394.64	$424.45
67	CARDINAL - DESK, CHAIRS, FILES	6/1/05	$ 3,262.03	10	$326.20	$2,147.49	$2,473.69	$788.34
68	CONFERENCE TABLE & CHAIRS	7/1/05	$ 5,153.12	10	$515.31	$3,349.52	$3,864.83	$1,288.29
69	DESK CHAIR	7/1/05	$ 243.09	10	$24.31	$158.01	$182.32	$60.77
70	WINDOW BLINDS	8/1/05	$ 2,463.02	10	$246.30	$1,580.43	$1,826.73	$636.29
71	2 DESKS/CHAIRS FOR LOBBY	2/1/07	$ 5,034.68	10	$503.47	$2,475.39	$2,978.86	$2,055.82
72	BOOKCASES	4/1/07	$ 896.76	10	$89.68	$425.98	$515.66	$381.10
73	FILE CABINET	4/1/07	$ 323.09	10	$32.31	$153.47	$185.78	$137.31
74	DESK CHAIR	4/1/07	$ 303.34	10	$30.33	$144.07	$174.40	$128.94
75	DISHWASHER	4/1/07	$ 601.45	10	$60.15	$285.71	$345.86	$255.60
76	4 KEYBOARD TRAYS	5/1/07	$ 360.36	10	$36.04	$168.18	$204.22	$156.14
77	HOT WATER HEATER	8/1/07	$ 678.73	10	$67.87	$299.76	$367.63	$311.10
78	FILE CABINET	9/1/07	$ 529.58	10	$52.96	$229.49	$282.45	$247.13
79	KITCHEN STOVE	11/1/07	$ 561.95	10	$56.20	$234.17	$290.37	$271.59
80	DESK & CABINETS (AB)	1/1/08	$ 1,636.47	10	$163.65	$654.60	$818.25	$818.22
81	DESK CHAIR	7/1/08	$ 381.53	10	$38.15	$133.53	$171.68	$209.85
82	FRAMED PRESIDENTIAL PICTURES	8/1/08	$ 2,070.18	10	$207.02	$707.32	$914.34	$1,155.84
83	CONFERENCE ROOM DECORATIONS/PHOTOS	10/1/08	$ 2,946.48	10	$294.65	$957.61	$1,252.26	$1,694.22
84	CHAIR (ET)	2/1/09	$ 180.20	10	$18.02	$52.56	$70.58	$109.62
85	2 CHAIRS (JB, KK)	10/1/09	$ 637.06	10	$63.71	$143.35	$207.06	$430.00
86	DESK CHAIR (JB)	8/1/11	$ 149.99	10	$15.00	$85.87	$100.87	$49.12
87	DESK CHAIR (CR)	6/1/12	$ 148.39	10	$8.66	$85.87	$94.53	$53.86
TOTAL FOR ACCOUNT NUMBER		*160	$ 128,922.51		$4,856.22	$110,827.58	$115,683.80	$13,238.71

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DEPRECIATION SCHEDULE
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ACCT	DESCRIPTION	DATE ACQ	COST	LIFE	CURRENT DEPR	PREVIOUS DEPR	ENDING DEPR	ENDING BOOK VALUE
*161	EQUIPMENT							
1	IMIS SOFTWARE	07/05/00	$ 40,103.21	5	$0.00	$40,103.21	$40,103.21	$0.00
2	NEW TELEPHONE SYSTEM	12/1/00	$ 15,181.00	5	$0.00	$15,181.00	$15,181.00	$0.00
3	RICOH COPIER	8/1/01	$ 12,324.00	5	$0.00	$12,324.00	$12,324.00	$0.00
4	LCD PROJECTOR	8/1/02	$ 2,715.00	5	$0.00	$2,715.00	$2,715.00	$0.00
5	LCD PROJECTOR	8/1/02	$ 2,715.00	5	$0.00	$2,715.00	$2,715.00	$0.00
6	PAPER SHREDDER	05/01/03	$ 333.89	5	$0.00	$333.89	$333.89	$0.00
7	PANASONIC FAX - UF-790	3/1/04	$ 1,224.00	5	$0.00	$1,224.00	$1,224.00	$0.00
8	DELL LCD PROJECTOR	7/1/04	$ 1,906.94	5	$0.00	$1,906.94	$1,906.94	$0.00
9	SANYO 27" TELEVISION	8/1/04	$ 261.82	5	$0.00	$261.82	$261.82	$0.00
10	SANYO DVD/VCR	8/1/04	$ 116.45	5	$0.00	$116.45	$116.45	$0.00
11	FUJITSU LAPTOP	6/1/05	$ 2,065.94	5	$0.00	$2,065.94	$2,065.94	$0.00
12	IMIS SOFTWARE & TRAINING	7/1/05	$ 20,000.00	5	$0.00	$20,000.00	$20,000.00	$0.00
13	DELL LAPTOP	11/1/05	$ 1,296.38	5	$0.00	$1,296.38	$1,296.38	$0.00
14	DELL COMPUTER/MONITOR (PS)	4/1/06	$ 729.28	5	$0.00	$729.28	$729.28	$0.00
15	DELL COMPUTER/MONITOR/PRINTER *****	5/1/06	$ 982.62	5	$0.00	$982.62	$982.62	$0.00
16	DELL PRINTERS (2)	8/1/06	$ 178.08	5	$0.00	$178.08	$178.08	$0.00
17	DELL LAPTOP	8/1/06	$ 803.48	5	$0.00	$803.48	$803.48	$0.00
18	3 DELL COMPUTERS/MONITORS (**/KN/**)	10/01/06	$ 2,251.44	5	$0.00	$2,251.44	$2,251.44	$0.00
19	DELL COMPUTER/MONITOR (CR)	2/01/07	$ 973.08	5	$32.44	$940.64	$973.08	$0.00
20	DELL PRINTER (AB)	2/01/07	$ 168.54	5	$5.61	$162.93	$168.54	$0.00

AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS
DEPRECIATION SCHEDULE
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21	2 DELL COMPUTER/MONITOR (SB/AB)	3/01/07	$	1,534.89	5	$102.31	$1,432.58	$1,534.89	$0.00
22	2 DELL PRINTERS (**/TTK)	3/01/07	$	337.08	5	$22.46	$314.62	$337.08	$0.00
23	LEXMARK COLOR PRINTER (CR)	3/01/07	$	793.10	5	$52.88	$740.22	$793.10	$0.00
24	NIKON DIGITAL CAMERA	4/01/07	$	236.31	5	$23.63	$212.68	$236.31	$0.00
25	LYRIS SOFTWARE	4/01/07	$	13,675.00	5	$1,367.50	$12,307.50	$13,675.00	$0.00
26	BLACK BAUD SOFTWARE	5/1/07	$	15,514.10	5	$2,068.54	$13,445.56	$15,514.10	$0.00
27	EXPOCAD SOFTWARE	7/1/07	$	1,997.50	5	$399.50	$1,598.00	$1,997.50	$0.00
28	UPDATES FOR BOOTH	8/01/07	$	1,350.00	5	$270.00	$1,035.00	$1,305.00	$45.00
29	AUDIENCE PARTICIPATION DEVICES	8/1/07	$	6,173.52	5	$1,234.70	$4,733.02	$5,967.72	$205.80
30	PRINTER & CALCULATOR	9/1/07	$	443.07	5	$88.61	$324.91	$413.52	$29.55
31	2 DELL PRINTERS	11/1/07	$	421.88	5	$84.38	$281.26	$365.64	$56.24
32	DELL COMPUTER (DK)	2/1/08	$	963.53	5	$192.71	$754.78	$947.49	$16.04
33	FUJITSU LAPTOP (DF)	2/1/08	$	2,044.74	5	$408.95	$1,601.72	$2,010.67	$34.07
34	DELL COMPUTER (MR)	4/1/08	$	781.22	5	$156.24	$585.90	$742.14	$39.08
35	DELL COMPUTER (DF)	7/1/08	$	1,137.39	5	$227.48	$796.18	$1,023.66	$113.73
36	6 DELL COMPUTERS (CW/CH/SS/KK/RH/NA)	7/1/08	$	6,171.27	5	$1,234.25	$4,319.88	$5,554.13	$617.14
37	DELL LAPTOP (CR)	5/1/09	$	748.60	5	$149.72	$399.25	$548.97	$199.63
38	DELL COMPUTER (BM)	8/1/09	$	619.05	5	$123.81	$299.21	$423.02	$196.03
39	2 - DELL PRINTERS (DM/BM)	3/1/10	$	358.28	5	$71.66	$131.37	$203.03	$155.25
40	DIGITAL VIDEO CAMERA	4/1/10	$	380.46	5	$76.09	$133.16	$209.25	$171.21
41	PANASONIC FAX - UF-6200	6/1/10	$	1,237.00	5	$247.40	$391.72	$639.12	$597.88
42	MAC LAPTOP (DF)	9/1/10	$	1,702.83	5	$340.57	$454.09	$794.66	$908.17
43	DELL COLOR PRINTER (DF)	10/1/10	$	360.39	5	$72.08	$90.10	$162.18	$198.21
44	DELL VOSTRO LAPTOP (SB)	11/1/10	$	584.07	5	$116.81	$136.28	$253.09	$330.98
45	DELL COLOR PRINTER (ET)	11/1/10	$	369.79	5	$73.96	$86.29	$160.25	$209.54
46	2 DELL VOSTRO COMPUTERS (DM/JW)	11/1/10	$	1,513.67	5	$302.73	$353.19	$655.92	$857.75
47	APPLE DESKTOP (DF)	3/1/11	$	1,374.82	5	$274.96	$229.14	$504.10	$870.72

AMERICAN ASSOCIATION OF EQUINE PRACTITIONERS
DEPRECIATION SCHEDULE
JANUARY 1, 2012 THROUGH DECEMBER 31, 2012

ACCT	DESCRIPTION	DATE ACQ	COST	LIFE	CURRENT DEPR	PREVIOUS DEPR	ENDING DEPR	ENDING BOOK VALUE
48	MOBILE WEBSITE DEVELOPMENT	5/1/11	$ 3,250.00	5	$650.00	$433.33	$1,083.33	$2,166.67
49	DELL PRINTERS (STOCK)	5/1/11	$ 445.18	5	$89.04	$59.36	$148.40	$296.78
50	DELL LAPTOP (KK)	8/1/11	$ 677.35	5	$135.47	$56.45	$191.92	$485.43
51	3 DELL PRINTERS (STOCK)	9/1/11	$ 635.97	5	$127.19	$42.40	$169.59	$466.38
52	DELL LAPTOP (BM)	11/1/11	$ 615.60	5	$123.12	$20.50	$143.62	$471.98
53	2 DELL SERVERS	2/1/12	$ 10,838.43	5	$1,987.05	$20.50	$2,007.55	$8,830.88
54	2 DELL OPTIPLEX COMPUTERS (SB/AB)	2/1/12	$ 2,022.13	5	$370.72	$20.50	$391.22	$1,630.91
55	SPEAKERPHONE	2/1/12	$ 340.01	5	$62.34	$20.50	$82.84	$257.17
56	IMIS SOFTWARE VERSION UPGRADE	10/1/12	$ 33,888.92	5	$1,694.45	$20.50	$1,714.95	$32,173.97
TOTAL FOR ACCOUNT NUMBER		*161	$ 221,867.30		$15,061.36	$154,173.75	$169,235.11	$52,632.19
GRAND TOTALS			$1,129,332.08		$ 39,381.13	$ 543,032.93	$ 582,414.06	$ 546,918.02