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Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions

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

Form **990** (2012)

<u>A</u> _		calendar year, or tax year beg	inning U6/U1/12, and endin	ig 05/31/1	_3	D Employ	er identification number
В	Check if applicable	C Name of organization	MING DEEDIEVED OLUD INC	•		2	
	Address change	·	TING RETRIEVER CLUB INC			E 0	1750001
1 :	Name change	Doing Business As			December 1		1750231 one number
	Initial return	Number and street (or P O box if ma			Room/suite		
<u> </u>		11555 BELLMAN RD				517	-522-4862
l l	Terminated	City, town or post office, state, and Z	IP code				
- 1	Amended return	GRASS LAKE	MI 49240		,	G Gross recei	pts \$ 201,696
	Application pendin	F Name and address of principal office	r		H(a) Is this a a	roug roturn for at	ffiliates? Yes X No
-	, ippilodite in parities	DIANA PEACOCK			H(a) Is this a g	roup return for a	
		11555 BELLMAN	RD		H(b) Are all af	filiates included	yes No
		GRASS LAKE	MI 49240		If "No	' attach a list	(see instructions)
i	Tax-exempt state	is X 501(c)(3) 501(c)	() ◀ (insert no) , 4947(a)(1) or	527	1		
<u> </u>	Website >	N/A			H(c) Group ex	emption numbe	er
ў к	Form of organizati	in the second	Association Other ►	1 v	1	004	M State of legal domicile TX
		Summary	Association	1 2	cur or formation 2		W Oldie of logal definition 111
!	···						
		describe the organization's mission	-				
بو	AN:	MAL RESEARCH AND ED	UCATION				
Suc							
Governance							
Š	2 Chack	this how I if the organization	discontinued its operations or disposed	of more than 25%	of its net assets		
ق	2 Number	er of voting members of the govern		01 11010 111011 2070	0. 110 1.701 000011	3	143
Z U ZU14	3 Numbe	· ·				4	143
2014 Titles &	4 Numbe	,	of the governing body (Part VI, line 1b)			-	
	5 Total n	umber of individuals employed in o	calendar year 2012 (Part V, line 2a)			5	0
7	6 Total n	umber of volunteers (estimate if ne	ecessary)			6	0
•	7a Total u	nrelated business revenue from Pa	art VIII, column (C), line 12			7a	0
Т —	b Net un	related business taxable income fr	om Form 990-T, line 34			7b	0
エー					Prior Yea		Current Year
	8 Contrib	outions and grants (Part VIII, line 1	h)	L	6	0,645	60,918
SCANNED	9 Progra	m service revenue (Part VIII, line 2			12	5,036	140,778
NNNET Revenue	10 Investr	nent income (Part VIII, column (A)		Γ		0	0
A 8	11 Other	evenue (Part VIII, column (A), line		Ī		0	0
Q	1		must equal Part VIII, column (A), line 12)	<u> </u>	1 8	5,681	201,696
Ø						0	201,000
	1	and similar amounts paid (Part IX		-			
	1	s paid to or for members (Part IX,		-		0	0
y.	15 Salarıe	s, other compensation, employee	benefits (Part IX, column (A), lines 5-10))		0	0
sesued	16a Profes	sional fundraising fees (Part IX, co	lumn (A), line 11e)	L		0	0
Ü	b Total fi	undraising expenses (Part IX, colui	mn (D), line 25) ▶	0 [
щ	17 Other	expenses (Part IX, column (A), line	rs-11a-11d, 11f-24e)		16	6,845	157,224
	18 Total e	xpenses Add lines 13-17 (must e	qual Part IX. column (A), line 25)	Ī	16	6,845	157,224
		ue less expenses Subtractiline 18				8,836	44,472
	S REST		[(2)]	• •	Beginning of Cur		End of Year
Net Assets or	티 20 Total a	ssets (Part X, line 16)	.당 0 3 2014 [후]	F	18	2,573	227,045
4ss	21 Total le	abilities (Part X, line 26)	- S	-		0	0
et (21 101411			<u> -</u>	1 Ω	2,573	227,045
		sets or fund balances Subtraction	s & I trom line of		10	2,2/3	227,043
_	raitii	Signature block ————				 -	
	Under penalties (of perjury, I declare that I have examine	ed this return, including accompanying schedu	ules and statements,	and to the best o	f my knowled	ge and belief, it is
	rue, correct, and	complete Declaration of preparer (oth	ner than officer) is based on all information of	wnich preparer has a	ny knowleage		
		Diana 2 Pea	ral			1-21	1- M
Si	gn 🖊	Signature of officer	· · · · · · · · · · · · · · · · · · ·			Date	
	ere	Diana L P	eacoch				
		Type or print name and title					
	Prior	ype preparer's name	Preparer's signature		Date	Charl	PTIN
Pa					12/19	Check	L-J"
	DANI	EL L MALOY, CPA	DANIEL L MALOY, CPA			<u> </u>	
			MALOY, P.C.		F	irm s EIN	38-2437892
Us	e Only	P.O. BOX					
	Fırm s	address > ADRIAN, N	MI 49221		F	hone no	517-263-0348
Ma	v the IRS disc	uss this return with the preparer sh	nown above? (see instructions)				X Yes No

58-1750231

_ P 6	artiv, Checklist of Required Schedules		T	Γ
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		X	
•	complete Schedule A	1 2	<u> </u>	Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3		X
4	candidates for public office? If "Yes," complete Schedule C, Part I	-		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4		Х
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	1	-	-1
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
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		Х
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b				
	of its total assets reported in Part X, line 169 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	l		37
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Χ
d				v
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e		11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	115		Х
42-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Χ
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	120		21
Ü	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Χ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	and the second s	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		Χ
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		Χ
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		Χ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		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		Х
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		

Pa	art 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 12 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		Χ
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		Х
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		Χ
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	- 12		
C	to defease any tax-exempt bonds?	24c		
-1		24d		
d 25-	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
25a		25.		v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
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?	ا ۔ . ا		3.7
	If "Yes," complete Schedule L, Part I	25b		X
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)			
а	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		İ	
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Χ
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		Χ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	- 1	Χ
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		Χ
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, Parts 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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	000		
50	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Χ
	· · · · · · · · · · · · · · · · · · ·			- 41
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		ł	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	,		v
	Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	,	İ	v
	19? Note All Form 990 filers are required to complete Schedule O	38	000	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

	Check it Schedule O contains a response to any question in this rait v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	[163	110
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		Χ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		-	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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		Χ
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		<u>X</u>
С	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		1	
	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).			
а	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		
С	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		İ	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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.			
а	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			
а	Initiation fees and capital contributions included on Part VIII, line 12			
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		İ	
а	Gross income from members or shareholders 11a	_		
þ	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
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.			
а	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			
С.	Enter the amount of reserves on hand			
	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		

Form 990 (2012) HUNTING RETRIEVER CLUB INC 58-1750231 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 Section A. Governing Body and Management Yes No 143 Enter the number of voting members of the governing body at the end of the tax year 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 143 b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6

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	Χ	
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	Χ	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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		Χ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode)		
			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	X	
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		Χ
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
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?			
а	The organization's CEO, Executive Director, or top management official	15a		_X_
b	Other officers or key employees of the organization	15b		Χ
	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		
Sec	tion 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 ▶ DIANA PEACOCK 11555			
GF	RASS LAKE MI 49240 5	17-2 <u>6</u>	<u>4 - 1</u>	<u> 383</u>

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

1X1 Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo	x, unl ficer a	Pos check ess pe and a c	erson	is both or/trus	n an lee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-WISC)	organization and related organizations
(1) MICHAEL WITT		1			_		-			
	1.00	1								
PRESIDENT	0.00	<u> </u>		X				0	0	0
(2) KEVIN BEARDEN										
	1.00					ŀ				
VICE PRESIDENT	0.00	<u> </u>		X				0	0	0
(3) PATTY MUNSON										
	1.00									
SECRETARY	0.00			X				0	0	0
(4) DIANA PEACOCK										
	1.00	l	ĺ							
TREASURER	0.00			X				0	0	0
(5)										
(6)		<u> </u>								
(7)		-					-			
(8)										
(9)							ļ			
(3)										
(10)										
(11)										
				<u> </u>						

Pai	(A) Name and title	(B) Average hours per week (list any	Pos check ess pe	C) sition more erson	than o	one i an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	cor	of			
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	or	from the ganizat nd relati ganizatii	on ed
(12)			_					_					
(13)													
(14)				_									
(15)													
(16)													
(17)													
(18)						_							
(19)				_								 .	
1b c d	Sub-total Total from continuation she Total (add lines 1b and 1c)	ets to Part VII, \$	Sect	ion /	4	<u>[</u>	!	> > >					
2	Total number of individuals (increportable compensation from	cluding but not lin the organization	nited	to th	ose	liste	abo	ve)	who received more than \$1	00,000 in			es No
3 4	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line	complete Schedu 1a, is the sum o	ile J f rep	for s ortat	uch i de co	ndıv mpe	idual ensat	ion a	and other compensation from			3	X
5	organization and related organi individual Did any person listed on line 1a for services rendered to the organi	a receive or accru	ie co	mpe	ensat	ion f	rom a	any i	unrelated organization or inc	dividual		5	X
Sect 1	on B Independent Contracto	ors e highest compei	nsate	ed in	depe	nder	nt cor	ntrac	ctors that received more that	n \$100,000 of			
	compensation from the organiz	(A) business address	nper	nsatio	on fo	r the	cale	ndaı		he organization's tax year (B) tion of services		Comp	(C) Densation
											-		·
-													
	Total number of independent co	ontractors (includ	lıng l	out n	ot lin	nited	to th	ose	listed above) who				
DAA	received more than \$100,000 c								-	0		Form	990 (2012)

Part VIII Statement of Revenue

		Check	If Schedule C	o contain:	s a response to	any question in the	nis 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
s s	12	Federated can	222222	1a			Tevenue		312 313, 01 314
Contributions, Gifts, Grants and Other Similar Amounts	la L		· -	 	60,918				
တြဲနို	, b	Membership d		1b	00,910				
ξĘ	C	Fundraising ev		1c					
ڇَّقَ	a	Related organ		1d					
S,E	е	Government grants		1e					
햜	f	All other contribution							
듗		and similar amounts	not included above	1f					
ăğ	g	Noncash contributio	ns included in lines 1a-	1f \$					
	h	Total Add line	es 1a–1f		>	60,918			
ne					Busn Code				
ver	2a	HUNT TES	ST FEES			140,778	140,778		
æ	b								
JCe	С								
Sen	d								
Ē,	е								
Program Service Revenue	f	All other progra	am service rever	nue					
P.	q	Total Add line				140,778			······································
	3		ome (including d	ıvıdends, ın	terest.	·			
		and other simil	·	,	· •				
	4		vestment of tax-	exempt bon	nd proceeds	' '			
	5	Royalties			>			· · ·	
		. to junio	(ı) Real		(II) Personal			~	
	62	Gross rents			()				
							ļ		
	b	*							
	C	Rental inc or (loss)							
	d 7a	Net rental inco Gross amount from			() () ()			·····	
		sales of assets	(i) Securities		(ii) Other	;			
		other than inventory							
	b	Less cost or other							
		basis & sales exps							
	С	Gain or (loss)							
	d	Net gain or (lo	ss)		<u> </u>				
e)	8a		om fundraising ever	nts					
nue		(not including \$							
ě		of contributions r	reported on line 1c)						
Other Revenu		See Part IV, line	18	a		-			
the	b	Less direct ex	penses	b					
0	С	Net income or	(loss) from fundr	aising <u>even</u>	ts 🕨				
	9a	Gross income fro	om gaming activities	3					
		See Part IV, line	19	a					
	b	Less direct ex	penses	b		į			
	С	Net income or	(loss) from gamı	ng activities	•				
		Gross sales of	_						
		returns and all		a					
	h	Less cost of g		b					
		=	(loss) from sales		v •	†			
	<u> </u>		cellaneous Revenue	3,¥GIIIOI	Busn Code				
ļ	11a	IVII3				Ī			
l									
	b								
	c C	All other same							
	d	All other reven Total Add line							
				•		201,696	140,778		0 0
	12	TOTAL revenue	e. See instruction	১	P	∠∪⊥, ७७७	140,//8	(ol o

Page 10

00011	on 501(c)(3) and 501(c)(4) organizations must cor Check if Schedule O contains a respo				: _[
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	· · · · · · · · · · · · · · · · · · ·		САРСИЗОВ	ganoralanpanada	
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
2	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				······································
3	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees				
6	Compensation not included above, to disqualified				
·	persons (as defined under section 4958(f)(1)) and		;		
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	6,853		6,853	
b	Legal	6,726	6,726		
С	Accounting	50	50		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	13,706	13,706		····
13	Office expenses	10,280	10,280		
14	Information technology	5,387	5,387		
15	Royalties				
16	Occupancy	1,800	1,800		
17	Travel	40,081	40,081		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	F2 760	F2 7C0		
19	Conferences, conventions, and meetings	52,769	52,769		
20	Interest				
21	Payments to affiliates	521	521		
22	Depreciation, depletion, and amortization	4,556	4,556		
23	Insurance	4,330			
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)				
_	JACKETS	8,038	8,038		
a b	AWARDS	4,266	4,266		
	TELEPHONE	1,027	1,027		
c d	MISCELLANEOUS	652	652		
u e	All other expenses	512	512		
25	Total functional expenses Add lines 1 through 24e	157,224	150,371	6,853	0
26	Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► if following SOP 98-2 (ASC 958-720)	10.,001	200/012	3,000	<u> </u>

P	art X	Balance Sheet					
		Check if Schedule O contains a response to any qu	estion in this Part X				
	·				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			147,651	1	192,595
	2	Savings and temporary cash investments			26,265	2	26,314
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			500	4	500
	5	Loans and other receivables from current and former office	ers, directors,				
	1	trustees, key employees, and highest compensated employees	oyees				
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified person	ns (as defined unde	section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), ar	nd contributing empl	oyers and			
		sponsoring organizations of section 501(c)(9) voluntary en	mployees' beneficiar	y			
ß		organizations (see instructions) Complete Part II of School	dule L			6	
Assets	7	Notes and loans receivable, net				7	
Ř	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	····
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	12,686			
	b	Less accumulated depreciation	10b	5,050	8,157	10c	7,636
	11	investments—publicly traded securities		Ĺ		11	
	12	Investments—other securities See Part IV, line 11				12	· · · · · · · · · · · · · · · · · · ·
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15_	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			182,573	16	227,045
	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		Ļ		20	
	21	Escrow or custodial account liability Complete Part IV of S	Schedule D	L		21	
S	22	Loans and other payables to current and former officers, of	directors,				
Liabilities	l	trustees, key employees, highest compensated employees	s, and				
iab		disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third p	parties	_		23	
	24	Unsecured notes and loans payable to unrelated third part		-		24	***
	25	Other liabilities (including federal income tax, payables to					
	ł	parties, and other liabilities not included on lines 17-24). C	omplete Part X				
		of Schedule D		-		25	
	26	Total liabilities. Add lines 17 through 25			0	26	0
"		Organizations that follow SFAS 117 (ASC 958), chec	k here ≯ ∑ an	d			
Ses		complete lines 27 through 29, and lines 33 and 34.			100 570		227 045
jar	27	Unrestricted net assets		-	182,573		227,045
ä	28	Temporarily restricted net assets		-		28	
nuc	29	Permanently restricted net assets		,		29	
Ē		Organizations that do not follow SFAS 117 (ASC 958	s), check here→	and			
Assets or Fund Balances		complete lines 30 through 34.				20	
se	30	Capital stock or trust principal, or current funds		}		30	
t As	31	Paid-in or capital surplus, or land, building, or equipment fi		}		31 32	
Net	32	Retained earnings, endowment, accumulated income, or o	omer tunas	}	182,573		227 045
	33	Total net assets or fund balances		}	182,573	33	227,045 227,045
	34	Total liabilities and net assets/fund balances		i i	102,373	ı 34 l	227,040

orm	990 (2012) HUNTING RETRIEVER CLUB INC 58-1750231				Pag	ge 12
Pa	rt 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		20	1,6	596
2	Total expenses (must equal Part IX, column (A), line 25)	2		15	7,2	224
3	Revenue less expenses Subtract line 2 from line 1	3_		4	4,4	472
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		18	2,5	573
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9	·			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		22	7,0	045
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any guestion in this Part XII				_	
				Y	'es	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			İ		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			-	İ	
	Schedule O			İ		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	а		Χ
	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				- 1	
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2	ь		Χ
	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				1	
	Separate basis Consolidated basis Both consolidated and separate basis			-		
С	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?		2	c		
	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?		3	a		
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		3	ь		

SCHEDULE'A. (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions

Reason for Public Charity Status (All organizations must complete this part) See instructions

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

HUNTING RETRIEVER CLUB INC

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
A school described in section 170(b)(1)(A)(ii) (Attach Schedule E)

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

Employer identification number 58-1750231

3	1 .	A hospital or a	a cooperative hospital servi	ce organization described in sec	tion 170(b)(1)(A)(III)					
4		A medical res	earch organization operate	d in conjunction with a hospital de	escribed in	section '	170(b)(1)(A)(III).	Enter th	ne hospil	tal's name,	
		city, and state	;									
5		An organization	on operated for the benefit	of a college or university owned o	r operated	by a gove	ernmenta	al unit de	scribed	ın		
		section 170(b)(1)(A)(iv) (Complete Par	til)								
6	,	A federal, stat	te, or local government or g	jovernmental unit described in se	ction 170	(b)(1)(A)(√).					
7				substantial part of its support from				n the ger	neral pu	blic		
		-	section 170(b)(1)(A)(vi).(0		_							
8	7.7			170(b)(1)(A)(vi).(Complete Part	II)							
9	X	•		1) more than 33 1/3% of its support		ntributions	. membe	ership fe	es. and	aross		
•	(-		npt functions—subject to certain								
				nd unrelated business taxable inc								
			-	30, 1975 See section 509(a)(2).					.00000			
10			-	exclusively to test for public safe			a\(4)					
	⊱-i	-		exclusively for the benefit of, to p				carn/ ou	t the			
11	•	•	-	ted organizations described in se						tion		
				the type of supporting organization								
			(1			- 6 atra	andly integrated	
	$\overline{}$	a Type	··	c Type III–Function			d				onally integrated	
е	٤. ا			ganization is not controlled directly								
				er than one or more publicly supp	orted orga	nizations (jeschbe	a in seci	เดก ฮบฮ	(a)(1)		
		or section 509	` ' '			!! 7						
f		J		ermination from the IRS that it is a	i Type i, Ty	pe II, or I	ype III s	upportin	9			;
		-	check this box									
g		Since August	17, 2006, has the organiza	ition accepted any gift or contribu	lion from a	ny of the						
		following per										
		(i) A person	who directly or indirectly c	ontrols, either alone or together w	ith person	s describe	ed in (ii) a	and			Yes	No
		(III) belov	v, the governing body of the	e supported organization?							11g(ı)	<u> </u>
		(II) A family	member of a person descri	bed in (i) above?							11g(II)	
		(III) A 35% c	ontrolled entity of a person	described in (i) or (ii) above?							11g(m)	<u> </u>
<u>h</u>		Provide the f	ollowing information about	the supported organization(s)	1		· · · · · · · · · · · · · · · · · · ·					
(ı) Nam	e of supported	(n) EIN	(III) Type of organization	1 ' '	organization		ou notify		s the	(vii) Amount of mone	tary
	org	janization		(described on lines 1–9		sted in your		nization in of your	organizat	zed in the	support	
				above or IRC section (see instructions)	governing	document?		oort?		3?		
			_	(Yes	No	Yes	No	Yes	No		
(A)												
									l			
— (В)												
(C)											•	
(-,									1			
(D)			 									
(0)										1		
(E)				-								
(-)												
	-				1							
Tota												
	5 I											

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II. (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support							
Caler	ndar year (or fiscal year beginning in)▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 201	2	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support Subtract line 5 from line 4							
Sec	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 201	2	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support Add lines 7 through 10							
12	Gross receipts from related activities, etc. (s						12	
13	First five years If the Form 990 is for the o	organization's first,	second, third, fourt	h, or fifth tax year a	is a section 501(c)((3)		
	organization, check this box and stop here							>
Sec	tion C. Computation of Public Sup							
14	Public support percentage for 2012 (line 6,	column (f) divided l	by line 11, column (f))			14	%
15	Public support percentage from 2011 Scheo						15	%
16a	33 1/3% support test—2012. If the organiz				1/3% or more, che	ck this		
	box and stop here The organization qualifi	es as a publicly su	pported organization	n				>
b	33 1/3% support test—2011. If the organiz				s 33 1/3% or more	,		. —
	check this box and stop here. The organization							▶ [_]
17a	10%-facts-and-circumstances test—201	2 If the organization	on did not check a t	oox on line 13, 16a,	or 16b, and line 14	4 is		
	10% or more, and if the organization meets							
	Part IV how the organization meets the "fac	ts-and-circumstand	ces" test. The organ	nization qualifies as	a publicly support	ed		. [3
	organization							▶ [_]
b	10%-facts-and-circumstances test—201					ne		
	15 is 10% or more, and if the organization n							
	Explain in Part IV how the organization mee	ts the "facts-and-c	ircumstances" test	The organization of	qualifies as a public	ly		, —
	supported organization							P
18	Private foundation If the organization did	not check a box or	ı line 13, 16a, 16b,	17a, or 17b, check	this box and see			, ,
	instructions							► i .

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	55,500	<u>5</u> 8,553	48,655	60,645	60,918	284,271
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	145,350	156,563	155,089	125,036	140,778	722,816
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total Add lines 1 through 5	200,850	215,116	203,744	185,681	201,696	1,007,087
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						·
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						1,007,087
	tion B. Total Support	() 0000	# N 0000	(=) 0040	(4) 2044	(-) 2012	(f) Tatal
	ndar year (or fiscal year beginning in)▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	200,850	215,116	203,744	185,681	201,696	1,007,087
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	424	424	1,926			2,774
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	424	424	1,926			2,774
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11,						
	and 12)	201,274	215,540	205,670	185,681	201,696	1,009,861
14	First five years If the Form 990 is for the		second, third, fourth	n, or fifth tax year as	s a section 501(c)(3)	▶ [*]
500	organization, check this box and stop here		ne .				
	Public support percentage for 2012 (line 8,			n)		15	99 73 %
15 16	Public support percentage from 2011 Sche			·//		16	99 68 %
	tion D. Computation of Investmen						
17	Investment income percentage for 2012 (li			olumn (f))		17	%
18	Investment income percentage from 2011					18	%
19a	33 1/3% support tests—2012.If the orga			4, and line 15 is mo	ore than 33 1/3%, a	and line	
	17 is not more than 33 1/3%, check this bo	x and stop here. T	ne organization qua	lifies as a publicly s	supported organiza	ition	▶ [X
b	33 1/3% support tests—2011.If the orga						, r1
	line 18 is not more than 33 1/3%, check this	s box and stop her	e. The organization	qualifies as a publi	cly supported orga	ınızatıon	▶ i '

20

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part IV Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information (See instructions)

SCHEDULE D. (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

2012

Employer identification number

Open to Public Inspection

58-1750231 HUNTING RETRIEVER CLUB INC Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 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? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II 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 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 2b Total acreage restricted by conservation easements 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 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)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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 S (ii) Assets included in Form 990, Part X 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 \$ Assets included in Form 990, Part X

Pa	rt'll Organizations Maintaining	Collections of	Art, His	torical Tre	asures, or	Other S	imilar A	ssets	(continu	ied)	
3	Using the organization's acquisition, accession										
	collection items (check all that apply)										
а	Public exhibition	d 🗌	Loan or e	exchange prog	grams						
b	Scholarly research	е 🗌	Other								
С	Preservation for future generations										
4	Provide a description of the organization's coll	ections and explain	how they f	further the org	anization's exe	mpt purp	ose in Par	t			
	XIII										
5	During the year, did the organization solicit or	receive donations of	art, histor	ncal treasures	, or other simila	ar			Eta		_
	assets to be sold to raise funds rather than to										' No
Pa	ert IV Escrow and Custodial Arra	ingements. Co	mplete ıf	f the organı	ization answ	ered "Y	es" to F	orm 990), Part I∖	,	
	line 9, or reported an amoun	<u>t on Form 990, F</u>	Part X, III	ne 21			_		_		
1a	Is the organization an agent, trustee, custodia	n or other intermedia	ary for con	tributions or o	ther assets not					_	_,
	ıncluded on Form 990, Part X?								Y	es	_ No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the follo	owing table	Э			_				
							_		Amour	ıt	
С	Beginning balance							Ic			
d	Additions during the year						1	ld			
е	Distributions during the year						1	le			
f	Ending balance							if			
2a	Did the organization include an amount on For	m 990, Part X, line 2	212						Y	es [No
b	If "Yes," explain the arrangement in Part XIII							<u></u>]
Pa	irt V Endowment Funds. Compl	ete if the organiz	zation ar	nswered "Y	es" to Form	990, Pa	art IV, lin	e 10			
		(a) Current year	(b) Prior year	(c) Two years	back	(d) Three	years back	(e) Fo	ır years	back
1a	Beginning of year balance		<u> </u>								
b	Contributions									_	
Ç	Net investment earnings, gains, and										
	losses										
d	Grants or scholarships										
е	Other expenditures for facilities and										
	programs										
f	Administrative expenses		1								
g	End of year balance		ŀ								
2	Provide the estimated percentage of the curre	nt year end balance	(line 1g, c	olumn (a)) he	ld as				,		
а	Board designated or quasi-endowment	%	`	. ,,							
b	Permanent endowment ▶ %										
c	Temporarily restricted endowment ▶	%									
·	The percentages in lines 2a, 2b, and 2c should										
3a	Are there endowment funds not in the possess		on that are	e held and adi	ministered for t	he					
	organization by	J								Yes	No
	(i) unrelated organizations								3a(ı)		ļ
	(ii) related organizations								3a(11)		1
h	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										
	art VI Land, Buildings, and Equip				10		·				
									(d) Book	value	
	,	(investment		(othe			preciation		•		
1a	Land								•		
	Buildings								-		
	Leasehold improvements	-									
	Equipment		-		12,686		5,0	50		7	636
	Other				,						<u> </u>
	I Add lines 1a through 1e (Column (d) must eq	ual Form 990 Part 3		(B), line 10(c))			>		7	636
			.,	. //	<u> </u>						

Total (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

(9) (10) (11)

chedul	e D (Form 990) 2012 HUNTING RETRIEVER CLUB INC	5	8-1750231	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Stateme	nts With Reven	ue per Return	
1 To	otal revenue, gains, and other support per audited financial statements		1	
2 Ar	mounts included on line 1 but not on Form 990, Part VIII, line 12			
a Ne	et unrealized gains on investments	2a		
b Do	onated services and use of facilities	2b		
c Re	ecoveries of prior year grants	2c		
d O	ther (Describe in Part XIII)	2d		
e Ad	dd lines 2a through 2d		2e	
3 St	ubtract line 2e from line 1		3	
4 Ar	mounts included on Form 990, Part VIII, line 12, but not on line 1:			
a In	vestment expenses not included on Form 990, Part VIII, line 7b	4a		
b O	ther (Describe in Part XIII)	4b		
c Ad	dd lines 4a and 4b		4c	
5 To	otal revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents With Expe	nses per Return	
1 To	otal expenses and losses per audited financial statements		1	
2 Ar	mounts included on line 1 but not on Form 990, Part IX, line 25			
a D	onated services and use of facilities	2a		
b Pr	rior year adjustments	2b		
c O	ther losses	2c		
d O	ther (Describe in Part XIII)	2d		
e Ad	dd lines 2a through 2d			
3 St	ubtract line 2e from line 1	()	3	<u> </u>
4 A	mounts included on Form 990, Part IX, line 25, but not on line 1:			
a In	vestment expenses not included on Form 990, Part VIII, line 7b	4a		
b O	ther (Describe in Part XIII)	4b		
c Ad	dd lines 4a and 4b		4c	

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

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

information

Part XIII Supplemental Information (continued)

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.

2012 Open to Public Inspection

OMB No 1545-0047

Name of the organization

HUNTING RETRIEVER CLUB INC

Employer identification number 58 - 1750231

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS
YES

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS
YES

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS
YES

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

2012

Department of the Treasury Internal Revenue Service

(99) See separate instructions.

► Attach to your tax return

Attachment Sequence No.

Name(s) shown on return Identifying number 58-1750231 HUNTING RETRIEVER CLUB INC Business or activity to which this form relates INDIRECT DEPRECIATION Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I 500,000 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property. Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 12 13 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 13 Note Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Part II 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property) (See instructions) Part III Section A 521 MACRS deductions for assets placed in service in tax years beginning before 2012 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (f) Method placed in (e) Convention (q) Depreciation deduction (a) Classification of property (business/investment use period only-see instructions) 19a 3-year property 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25 yrs g 25-year property S/L h Residential rentat 27 5 yrs MM property MM S/L 27 5 yrs MM 39 vrs S/L Nonresidential real property MM S/L Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs S/L b 12-year S/L 40 yrs MAM 40-year Summary (See instructions) Part IV 21 Listed property Enter amount from line 28 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 521 22 and on the appropriate lines of your return. Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

58-1750231

Federal Asset Report Form 990, Page 1

Asset	Description	Date I <u>n Service</u>	Cost	Bus Sec <u>%</u> 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS: 2 TRAILE		7/08/07 _ =	5,830 5.830		5,830 5.830		4 529 4 529	521 521
Other Deprecia I FQUIPM	tion: IENT Total Other Depreciation	1/01/07 _ _	6.856 6.856		6,856 6,856		0	0
	Total ACRS and Other Depre	eciation =	6,856		6,856		0	0
	Grand Totals Less: Dispositions and Transl Less: Start-up/Org Expense Net Grand Totals	fers =	12,686 0 0 12,686		12,686 0 0 12,686		4 529 0 0 4.529	521 0 0 521

Form 990, Part IX, Line 24e - All Other Expenses Total Expenses Service General Statement & Fund General Statement & Fund General Statement & Fund Service Se					 · · · - — · · · ·	 	 	
Form 990, Part IX, Line 246 - All Other Expenses Total Service \$ 470 \$ 470 \$ 470 \$ \$ 470 \$ \$ \$ 470 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$								
Form 990, Part IX, Line 24e - All Other Expenses Total Expenses \$ 470 \$ 470 \$ 470 \$ 470 \$ 470 \$ 512			Management & General					
	ements	- All Other Expenses	Program Service	470 42 512				
	Federal Stat	n 990, Part IX, Line 24e	Total Expenses					
		Forn						