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Department of the Treasury Internal Revenue Service

Check if applicable
Address change

Name change

Initial return

For the 2013 calendar year, or tax year beginning

Appaloosa Horse Club

2720 W. Pullman Rd

Moscow, ID 83843

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

4/01

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

2013, and ending

3/31

OMB No 1545-0047

Open to Public

, 2014

D Employer Identification Number

208-882-5578

82-0229989

Telephone number

Terminated Amended return G Gross receipts \$,542,693. F Name and address of principal officer Application pending H(a) Is this a group return for subordinates Yes Are all subordinates included? If 'No,' attach a list (see instructions) Same As C Above Tax-exempt status 501(c)(3) |X| 501(c) (5 (insert no) 4947(a)(1) or 527 Website: ► www.appaloosa.com H(c) Group exemption number X Corporation Other ▶ M State of legal domicile. ID Form of organization L Year of formation 1938 Association Briefly describe the organization's mission or most significant activities: This Organization's mission is to maintain the official registry of the Appaloosa Horse - an equine breed with a Governance color preference; to collect, record and preserve the history and integrity of the breed; to improve, enhance and promote the Appaloosa, and to honor the tradition, Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 19 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a 247,223. b Net unrelated business taxable income from Form 990-T, line 34 -55<mark>,237</mark>. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h). 42,947 40,726. Program service revenue (Part VIII, line 2g) 3,541,593. 3,501,530. Investment income (Part VIII, column (A), lines 3, 4, and 7d 373. 7,486. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2014 11 -3.251-5,322. Total revenue - add lines 8 through 11 (must equal Part VIII) column (A), line 3,588,775 3,537,307. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4). Salaries, other compensation, employee benefits (Part IX) column 1,189,224 1,192,100. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,485,737. 2,390,287. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 3,674,961 3,582,387. 19 Revenue less expenses. Subtract line 18 from line 12 . . . -86,186. -45,080. **End of Year Beginning of Current Year** 20 Total assets (Part X, line 16) 1,752,891 1,727,268 21 Total liabilities (Part X, line 26) 744,564 764,021 Net assets or fund balances Subtract line 21 from line 20 1,008,327 963,247 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 Signature of officer Sign Here Steven Taylor CEO Type or print name and title Print/Type preparer's name Prephristiala. Decoria Date -12-14 Micheal A. Micheal A. DeCoria DeCoria P01217290 **Paid** self-employed ► DECORIA MAICHEL AND TEAGUE PS Preparer Use Only 7307 N DIVISION ST Ste 222 Firm's EIN ► 91-1900424 SPOKANE, WA 99208-6545 (509) 535-3503 Phone no May the IRS discuss this return with the preparer shown above? (see instructions).... Yes Nο IXI BAA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2013) TEEA0113L 11/08/13

Form 990 (2013) Appaloosa Horse Club		82-0229989	Page 2
Statement of Program Service Ac	•		
Check if Schedule O contains a response 1 Briefly describe the organization's mission:	or note to any line in this Part III		. <u>X</u>
See Schedule 0			
bee benedite o			
2 Did the organization undertake any significant progra	m services during the year which were not listed on the	ne prior	
Form 990 or 990-EZ?	••••	Yes	X No
If 'Yes,' describe these new services on Schedule			_
3 Did the organization cease conducting, or make s if 'Yes,' describe these changes on Schedule O.	significant changes in how it conducts, any prograi	m services? . Yes	X No
4 Describe the organization's program service acco	mplishments for each of its three largest program	services, as measured by	expenses.
Section 501(c)(3) and 501(c)(4) organizations and se others, the total expenses, and revenue, if any, for	ction 4947(a)(1) trusts are required to report the amount or each program service reported	unt of grants and allocations t	to
) (Revenue \$)
	any other aspects of promoting t		
world show, and numerous trail	around the world, and sponsors	<u>a nacional snow,</u>	
"orig show, and numerous crair		-	
			
4b (Code:) (Expenses \$ 387.4	470 . including grants of \$) (Revenue \$	<u>`</u>
	ApHC also publishes a magazine.	-' ' <u></u>	
	<u> </u>	<u></u>	
			
			
			
			-
			
) (Revenue \$)
	IC is to maintain the official r		
	ecordkeeping of the registered	horses transferre	ed and
stallion_breeding_records.			
			
			
			
			
4d Other program services. (Describe in Schedule O	.)		
	g grants of \$) (Revenue	\$)
	795,413.		
BAA	TEEA0102L 07/02/13	Form	990 (2013)

Form 990 (2013) Appaloosa Horse Club Partily 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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		Х
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		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		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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8	-	х
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		Х
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		Х
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.			0.00
ā	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
Ŀ	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.	11 Ь		Х
•	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	11 c		х
c	I 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	11 d	Х	
e	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	х	
	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		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X
t	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
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		Х
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		х
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
Ł	of 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

BAA

Form 990 (2013)

82-0229989 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II Х 21 Did the organization report more than \$5,000 of grants or 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 Х 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 Х 23 Х 242 **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 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		х
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		Х
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).			
é	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
•	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
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? <i>If 'Yes,' complete Schedule R, Part I</i>	33		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ł	olf '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	35ь		
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		Х
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		х

ı aı	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 271			
Ь	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		ŀ	
-	(gambling) winnings to prize winners?	1 c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-		ļ	
	ments, filed for the calendar year ending with or within the year covered by this return.		.,	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2Ь	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		X	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	X	
	If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	30		
4 a	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)?	4 a		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.			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	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?			v
	ł	6 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).		ļ	
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?	7 a		
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7 c		
	If 'Yes,' indicate the number of Forms 8282 filed during the year	-	 i	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	/1		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
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.	-		
	Did the organization make any taxable distributions under section 4966?	9 a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
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		ļ	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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			
	Enter the amount of reserves on hand 13c	}		
14 a	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		

	<u> </u>	====, nppuroobu	110100 014						- 02	0223303			
Par	t VI	Governance, Ma a 'No' response Schedule O. Se	to līne 8a, 8b e instructions	o, or 10b b s.	elow, des	scribe the	circumstan						_
		Check if Schedule C			e to any lin	e in this Parl	<u> </u>						X
Sec	tion /	A. Governing Bo	dy and Mana	gement									
												Yes	No
1 a	If the	the number of voting re are material difference governing body, or in rity to an executive of	ences in voting r if the governing	ights among body delegal	members led broad		-	1 a		19			
		the number of voting						1 b		1.0			
		ny officer, director, trus	-			•			any other	19			
	office	r, director, trustee or	key employee?.		-						2		X
3	Did th of offi	e organization delegat icers, directors or tru	e control over ma stees, or key em	nagement dut aployees to a	ties customa i managem	arily performed ent company	d by or under t or other per	the directson?	t supervisio	n 	3	_	X
4	Did th	ie organization make	any significant	changes to it	ts governing	g documents							
	sınce	the prior Form 990 v	vas filed?	•							4		_X_
5		ie organization becor	_	-	a significan	it diversion o	f the organiza	ation's a	assets?		5		X
6	Did th	ie organization have	members or sto	ckholders?							6	X	
7 a		e organization have moers of the governing		ders, or other	persons who	o had the pow	ver to elect or	appoint	one or more	:	7 a	х	
Ł		ny governance decis holders, or other pers				subject to ap	proval by) m	embers	,		7 b	х	
8	the fo	e organization contem Illowing:	poraneously docu	ment the mee	etings held o	or written actio	ns undertaker	during	the year by				
	•	overning body? .									8 a	Х	
b		committee with auth-	-	_		-					8ъ	Х	
9		re any officer, directo ization's mailing add						not be	reached at	the	9		х
Sec	tion E	3. Policies (This	Section B re	quests info	ormation	about poli	cies not re	quired	by the li	nternal Re	venu	ie Co	ide.)
			•					-				Yes	No
10 a	Did th	e organization have	local chapters, b	oranches, or	affiliates?						10a	Х	
t		' did the organization have ons are consistent with the				vities of such ch	apters, affiliates,	, and bran	ches to ensur	e their	10Ь	х	
11 a	Has the	e organization provided a c	complete copy of this	Form 990 to all	members of it	s governing bod	y before filing the	e form?			11 a		X
t	Descr	be in Schedule O th	e process, if any	, used by th	e organizat	ion to review	this Form 99	90. Se	ee Sche	dule O			
12 a	Did th	e organization have	a written conflic	t of interest p	policy? If 'N	No,' go to line	e 13				12a	Х	
Ł	Were to cor	officers, directors, or ti officts?	rustees, and key e	employees red	quired to dis	close annuall	y interests tha	t could g	jive rise		12Ь		Х
c	Did th	e organization regularl dule O how this was	ly and consistently done See .s	y monitor and Schedule	enforce con	mpliance with	the policy? If	'Yes,' de	escribe in		12c	х	
13	Did th	e organization have	a written whistle	blower polic	y?				. ,		13		X
14	Did th	e organization have	a written docum	ent retention	and destru	uction policy?	?				14	Х	
15		e process for determin ns, comparability dat											
a		rganization's CEO, E	· · · · · · · · · · · · · · · · · · ·								15 a	X	
		officers of key empl									15 b	X	
		s' to line 15a or 15b,			edule O <i>(</i> S	iee instructio	ns.)						$\overline{}$
16 a	Did th	ne organization investle entity during the y	t in, contribute a		•		•	ar arran	gement wit	h a	16a		
t	olf 'Yes	s,' did the organization ipation in joint ventui	follow a written p	under appli	cable federa	al tax law, ar	nd taken step	s to saf	eguard the				
		ization's exempt stat	tus with respect	to such arrar	ngements?.	. ,		• • • • •			16Ь		
		C. Disclosure e states with which a c	copy of this Form	990 is require	ed to be filed	J ► No	ne						
18	inspe	on 6104 requires an o ction. Indicate how y	ou make these a	available. Ch	eck all that	apply.	-				⁄ailabl	e for p	oublic
	∐ o	wn website	Another's w	ebsite	X Up	oon request	Ot	her <i>(exp</i>	laın ın Sche	edule O)			
19	the put	ne in Schedule O whether (plic during the tax year.	Sec	e Schedu	le O						ble to		
		the name, physical ad							ords of the o	organization			
•	Tin.	<u>a Rea 2720 W.</u>	<u>Pullman R</u>	d Mosco	w ID 83	843 208-	- <u>882-55</u> 78	}	- 			. .	
BAA				— — — Ti	EEA0106L 07/	02/13					Form	990 (2013)

	•			
Form 990 ((2013)	Appaloosa	Horse	Club

82-0229989

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1 a 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 rela	ited org	ganız	zatio	n co	mpens	sated	d any current officer, di	rector, or trustee.	
				(C	;)					
(A) Name and Title	(B) Average hours per week (list	one bo	er an	less (oerso	more to n is both or/trusted	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Brian Irvin	3									
Director	0	X						0.	0.	0.
(2) Mary Ann Page	3									
Director	70-	Х						0.	0.	0.
(3) Lynette Thompson	3									
Director	7-0-	Х						0.	0.	0.
(4) Lesli Glen	3									
Director	0	Х						0.	0.	0.
(5) Lori Ann Richards	3									
Director	7-0-	X						0.	0.	0.
(6) Valerie Showalter	3									
Director	7 0	X						0.	0.	0.
(7) Dena Raggio	3									
Director	70	X						0.	0.	0.
(8) Jim Jirkovsky	3									
Director	7 0	X						0.	0.	0.
(9) Bill Thiel	3									
Director	70-	X				_		0.	0.	0.
(10) Diane Rushing	3									
President	7 0	X		Х	ļ			0.	0.	0.
(11) Deborah Letham	3									-
Director	7-0-	Х						0.	0.	0.
(12) Jack Zuidema	3								-	
Director	7-0-	X		İ				0.	0.	0.
(13) Todd Davis	3									
Director	7	X						0.	0.	0.
(14) Deb Dyer	3	1								
Director	7-0-	X						0.	0.	0.

Part VII	Section A. Officers, Directors, Trus		ney	Emj			es, a	חכ	Highest Com	ipensated Emp	loyee	S (cont	tinuea)_
		(B)			(C	•					ł		
	(A)	Average	(do	not ch	Pos ieck	ition	than o	ne	(D)	(E)		(F)	
	Name and title	hours	box	, unles	s pe	erson	is both or/truste	an	Reportable	Reportable		Estimate	
		week (list any	<u> </u>						compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	co	ount of o	tion
		hours	ndividual trustee or director	똴	到	é	클림	<u> </u>	(W-2/1099-MISC)	(W-2/1099-MISC)		from the ganizati	
		for related	100 E	등	혖	釬	જુ ડા	ಕ್	ļ		a	nd relate ganızatıc	ed
		organiza • tions	ξ <u>α</u>	르	ļ	ğ	le ši				"	,	,,,,
		below dotted	K	25	ı	8	8				}		
		line)	6	Institutional trustee	ł		Highest compensated employee	١					
(15) To	slie Foxvog	3	┢		_		H	_			-		
	rector	-3-	X	ll	ļ				0.	0.			0.
	dd Michael	3	1	\vdash	-	-	 	-		<u></u>	 		
	ce President	-5-	X		\mathbf{x}				0.	0.			0.
	ymond Burchett	3	 ^`	 	~			\dashv			-		
	rector	1- <u>6</u> -	X						0.	0.			0.
	ıck McWhirter	3	+^-		-+		-	\dashv	- 0.	0.	┼		
	rector	1-5-	X	1 1	ļ		1 1	١	0.	0.	1		0.
	ebe Lise	3	^	+	\dashv			ᅥ			 	_	
	rector	1-5-	X	i l	l				0.	0.	1		0.
	even Taylor	60	 ^	 	-	_		\dashv			 		
CE(1-00	1	1	\mathbf{x}				81,281.	0.		6	389.
(21) Tir		50	-		^	-	+	-	01,201.	<u>U</u> .	 		<u> </u>
	easurer	1-20-	1		х				91,191.	0.		14	927.
(22)		 	<u> </u>	+++		\vdash		ᅥ	31,131.	0.	†		<u> </u>
<u>/</u>		4	1	1	ſ	1	1 1	-			1		
(23)						_		7					
(24)													
		<u> </u>	<u> </u>					_					
(25)		 					i l						
			ļ	$oxed{L}$			Щ	_		<u> </u>			
1 b Sub				•		• •			172,472.	0.		21,	<u>316.</u>
	of from continuation sheets to Part VII, Section	n A	•						0.	0.			0.
	l (add lines 1b and 1c)					_	· · ·	\Box	172,472.	0.			<u>316.</u>
	I number of individuals (including but not limited to the organization	o those i	istea	above	e) w	vno	receiv	ea	more than \$100,00	of reportable com	pensatio	ЭΠ	
	Title organization 5			_	_		_					Yes	No
												res	1 140
3 Did t	the organization list any former officer, director ne 1a? <i>If 'Yes,' complete Schedule J for such</i>	or, or tru Lindwidu	stee, _{Ial}	, key	em	plo	yee, o	r h	ighest compensat	ted employee	3	1-	X
	•										<u> </u>	1	+
4 For a	any individual listed on line 1a, is the sum of i organization and related organizations greater	reportab than \$1	ie co 50.0	mper ೧೧२ <i>।</i>	nsai 'f 'Y	tion 'es'	comn	oth <i>leti</i>	er compensation ' e Schedule I for	from			
such	ındıvıdual						٠				4		X
5 Did a	any person listed on line 1a receive or accrue	comper	satio	n fro	m a	any	unrel	ate	d organization or	ındıvıdual	<u> </u>	4	
	ervices rendered to the organization? If 'Yes, B. Independent Contractors	comple	te So	chedu	ıle .	J fo	r such	r p	erson	· <u>;</u>	. 5		X
1 Com	plete this table for your five highest compens	ated ind	epen	dent	cor	ntra	ctors 1	tha	t received more to	han \$100,000 of	-		
comp	pensation from the organization. Report compens	ation for	the c	alend	ar y	year	endin	gν	vith or within the or	ganization's tax yea	r.		
	(A) Name and business addre	200							(B) Description (of sonyons	Comp	(C) ensati	
	Traille and business addre								Description	or services	Comp	ensau	
					_								
											-		
								_	<u> </u>				
							<u> </u>						
2 Total	number of independent contractors (including bu	ıt not limi	ited to	o thos	se li	ister	d abov	e) v	who received more	than	-		
	0,000 of compensation from the organization				"			-,					
DAA		<u> </u>								—·			(2012)

-		Check if Schedule O conta	ins a resp	onse or note to an	y line in this Part V	701		. \square
			············		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ITS	1 a	Federated campaigns	1 a					
RAI	t	Membership dues	1 b					
S, G	C	Fundraising events	1 c				•	
AR/	d	Related organizations	. 1 d					
IS, G	е	Government grants (contributions)	1 e					
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS	f	All other contributions, gifts, grants, similar amounts not included above		40,726.				:
E S	9	Noncash contributions included in line	s 1a-1f [.] \$_			ļ		
<u> </u>	h	Total. Add lines 1a-1f .			40,726.			
3	2-			Business Code				
2	28	Shows and other ev	ents		2,259,698.	2,259,698.		
띘	0	Registration	· – – – - 		494,365.	494,365.		
<u>\$</u>	ن	Appaloosa Journal	· – – – 		397,280.	150,057.	247,223.	
3	0	Membership dues	. – – – –		350,187.	350,187.		
Æ	6	All other program service rev						
ဗ္ဗ	'	T-1-1 Add Inc 0 - 04	L		2 501 500			
╼			 	<u> </u>	3,501,530.			
	3	Investment income (including other similar amounts)	aiviaenas	s, interest and	373.			373.
	4	Income from investment of ta	x-exempt	bond proceeds. ►				373.
	5	Royalties .		≻		<u>,</u>		,
			(ı) 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 (1)	Securities	(II) Other				
		assets other than inventory.						
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)			· · · · · · · · · · · · · · · · · · ·			
	d	Net gain or (loss)		· · · · · · · · ·		·		
OTHER REVENUE	8 a	Gross income from fundraising (not including . \$	-					
Ř		of contributions reported on In See Part IV, line 18	•					
쯦	L	·		1				
5		Less: direct expenses Net income or (loss) from fun	droicina a	o vente				
				vents .				
		Gross income from gaming a See Part IV, line 19.	ctivities.					
		Less: direct expenses Net income or (loss) from gar	l nina satu	The state of the s				
		, ,	•	illes				
	10 a	Gross sales of inventory, less and allowances	returns					
		Less: cost of goods sold .		64. 5,386.	1			
		Net income or (loss) from sal			-5,322.	-5,322.		
		Miscellaneous Revenue		Business Code	3,322.	-3,322.		
Ì	11 a							
	b			-				
	С					_		
		All other revenue				_		
		Total. Add lines 11a-11d		►	_			
	12	Total revenue. See instruction	ns	<u></u> ►	3,537,307.	3,248,985.	247,223.	373.

	1 990 (2013) Appaloosa Horse Club			82-022	9989 Page 10
	tion 501(c)(3) and 501(c)(4) organizations must con	nplete all columns All oti		omplete column (A)	
	Check if Schedule O contains a r				X
	not include amounts reported on lines 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				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	193,788.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	836,719.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	100,157.	-		
10	Payroll taxes	61,436.			
11	Fees for services (non-employees).	02, 100.			
á	Management				
ŀ	Legal	47,492.	· · · · · · · · · · · · · · · · · · ·		
	: Accounting	17,600.			
	Lobbying	17,000.			· · · · · · · · · · · · · · · · · · ·
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amt exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule 0)	263,319.			
12	Advertising and promotion .	85,106.			
13	Office expenses	8,185.			
14	Information technology				
15	Royalties.				
16	Occupancy .	30,032.			
17	Travel	289,181.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	•			
22	Depreciation, depletion, and amortization .	29,965.			
	Insurance	19,824.			
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.)				
ā	Trophies & Awards	394,328.			
	Show Facilities Expenses	317,348.			
	Printing and Publications	188,866.	·		
	Administrative Services	156,340.		-	
	All other expenses. See Sch. O	542,701.			
	Total functional expenses. Add lines 1 through 24e	3,582,387.			
	· · · · · · · · · · · · · · · · · · ·	2,202,007.			
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)				

Page 11

	· · · · ·	Check if Schedule O contains a response or note to	any line	in this Part X			П		
			- • ····/ -	-	(A) Beginning of year		(B) End of year		
	1	Cash - non-interest-bearing			75,785.	1	14,835.		
	2	Savings and temporary cash investments				2	640,675.		
	3	Pledges and grants receivable, net			<u>-</u>	3			
	4	Accounts receivable, net			165,117.	4	381,275.		
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated en	officers, o	directors, . Complete					
		Part II of Schedule L				5			
	6	Loans and other receivables from other disqualified posection 4958(f)(1)), persons described in section 4958(c)(comployers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	ersons (a: 3)(B), and (9) volunta Part II o	s defined under contributing ary employees' f Schedule L		6			
S	7	Notes and loans receivable, net		[7			
ASSETS	8	Inventories for sale or use			56,587.	8	40,335.		
S	9	Prepaid expenses and deferred charges		[93,761.	9	82,925.		
	10a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a	1,127,197.					
		Less: accumulated depreciation	10Ь	793,806.	361,409.	10 c	333,391.		
	11	Investments – publicly traded securities	•••			11			
	12	Investments – other securities. See Part IV, line 11			746,359.	12			
	13	Investments - program-related. See Part IV, line 11				13			
	14	Intangible assets				14			
	15	Other assets. See Part IV, line 11	253,873.	15	233,832.				
	16	Total assets. Add lines 1 through 15 (must equal line	34)		1,752,891.	16	1,727,268.		
	17	Accounts payable and accrued expenses .			143,748.	17	228,404.		
	18	Grants payable	•	18	~				
	19	Deferred revenue		[411,384.	19	366,226.		
Ļ	20	Tax-exempt bond liabilities		[20			
A	21	Escrow or custodial account liability. Complete Part I	IV of Sche	edule D		21			
ABILIT	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, dırect d dısqualı	ors, trustees, fied persons.		22			
į	23	Secured mortgages and notes payable to unrelated the	nird partie	s		23			
E	24	Unsecured notes and loans payable to unrelated third	•	}		24			
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to relat plete Par	ed third parties, t X of Schedule D	189,432.	25	169,391.		
	26	Total liabilities. Add lines 17 through 25			744,564.	26	764,021.		
NET A		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	ere ►	and complete					
4のかに下の	27	Unrestricted net assets			855,729.	27	805,428.		
Į	28	Temporarily restricted net assets			152,598.	28	157,819.		
	29	Permanently restricted net assets.		· · <u>· · ·</u> · · ·		29			
Р Г.		Organizations that do not follow SFAS 117 (ASC 958), chand complete lines 30 through 34.	neck here	▶ ∐					
	30	Capital stock or trust principal, or current funds				30			
	31	· · · · · · · · · · · · · · · · · · ·	aid-in or capital surplus, or land, building, or equipment fund						
Ç	32	Retained earnings, endowment, accumulated income	, or other	funds [32			
B女し女艺ひ辿 の	33	Total net assets or fund balances .		[1,008,327.	33	963,247.		
Š	34	Total liabilities and net assets/fund balances			1,752,891.	34	1,727,268.		
BA	Α						Form 990 (2013)		

	-0229989		Pa	age 12
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response or note to any line in this Part XI				\square
1 Total revenue (must equal Part VIII, column (A), line 12)	1	3.5	37.3	<u> </u>
2 Total expenses (must equal Part IX, column (A), line 25)	2			387.
3 Revenue less expenses Subtract line 2 from line 1	3			080.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4			327.
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			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	9	53,2	<u> 247.</u>
Part XII Financial Statements and Reporting	, ,			
Check if Schedule O contains a response or note to any line in this Part XII				П
			Yes	No
1 Accounting method used to prepare the Form 990: Cash X 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		1 <u>x</u>
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:	ved on a			
Separate basis Consolidated basis Both consolidated and separate basis				
b Were the organization's financial statements audited by an independent accountant?		2 b	X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both:	rate			
X Separate basis Consolidated basis Both consolidated and separate basis		1		
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	it,	2 c	Х	
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		X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required at or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ıdıt 	3ь		
BAA			990	(2013)

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

Anı	oaloosa Horse Club				82-0229	989		
Par		r Advised Funds or Ot	her Similar Fun					
1	Complete if the organization answ	wered 'Yes' to Form 990), Part IV, line 6	5 .				
		(a) Donor advised	l funds	(b) Fu	unds and oth	her accou	ints	
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 dor are the organization's property, subject to the	nor advisors in writing that th organization's exclusive lega	e assets held in doi il control?	nor advised i	funds	Yes		No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in wri	ting that grant fund or, or for any other	s can be use purpose con	ferring	Yes		No
Par	<u> </u>						<u>ٔ ب</u>	
ı aı	Complete if the organization ans	wered 'Yes' to Form 99	D. Part IV. line 7	7.				
1	Purpose(s) of conservation easements held by							
	Preservation of land for public use (e.g., r	ecreation or education)	Preservation of	an historica	ılly ımportan	t land are	ea	
	Protection of natural habitat		Preservation of	a certified h	nistoric struc	ture		
	Preservation of open space							
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation co	ntribution in the form	of a conserv	ation easeme	ent on the		
	last day of the tax year				-14 -44b - F		T	V
	a Total number of conservation easements.			2a	eld at the E	na or the	ıax	rear
	Total acreage restricted by conservation ease	ments	•	2 b				
	Number of conservation easements on a certif		 dun (a)	2 c				
			• •					
•	I Number of conservation easements included i structure listed in the National Register		·	_ 2 d				
3	Number of conservation easements modified, trantax year ►	sferred, released, extinguished	, or terminated by the	e organizatioi	n during the			
4	Number of states where property subject to conse	rvation easement is located >						
5	Does the organization have a written policy re and enforcement of the conservation easemer		ng, inspection, han	dling of viola		Yes	<u></u>	No
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conse	rvation easements d	uring the yea	r			
7	Amount of expenses incurred in monitoring, insper ▶\$	cting, and enforcing conservati	on easements during	the year				
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the i		tion 170(h)(4	4)(B)(i)	Yes	ı	No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote conservation easements.	conservation easements in its to the organization's financia	revenue and expens I statements that de	e statement, escribes the	and balance organization	sheet, and	d nting	for
Par		ctions of Art, Historica wered 'Yes' to Form 99	Treasures, or 0), Part IV, line 8	Other Sim	ilar Asset	ts.		
1 8	If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	ld for public exhibition, educati	on, or research in fui	ue statemen therance of p	it and baland oublic service	ce sheet v	work	s of
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	r SFAS 116 (ASC 958), to report public exhibition, education,	oort in its revenue s or research in further	statement an ance of publi	id balance s c service, pro	heet work	ks of	art,
	(i) Revenues included in Form 990, Part VIII,				. ► \$			
	(ii) Assets included in Form 990, Part X				▶\$_			
	If the organization received or held works of art, hamounts required to be reported under SFAS	iistorical treasures, or other sin 116 (ASC 958) relating to the	nilar assets for financese items:	ial gain, prov	ride the follow	ving		
á	a Revenues included in Form 990, Part VIII, line	:1			► \$_			
t	Assets included in Form 990, Part X				. ▶\$			

Schedule D (Form 990) 2013 Appa. Part III Organizations Mainta				orical	Treasures, or	82-022 Other Similar Ass		Page 2
3 Using the organization's acquisition			·			•	•	
items (check all that apply):	,,				_			
a Public exhibition			 	or exc	hange programs			
b Scholarly research	-4		e U Other					_
c Preservation for future gener 4 Provide a description of the organize		ione and	l evoluin how they	, furthe	or the organization's	evemnt nurnose in		
Part XIII.								
5 During the year, did the organiza to be sold to raise funds rather the	ition solicit or nan to be ma	receive intained	donations of ar as part of the o	t, histo Irganiz	orical treasures, or ation's collection?	other similar assets	Yes	No
Part IV Escrow and Custodia	l Arrangen	nents.	Complete if t	he o	rganization ans		m 990, Pa	irt IV,
line 9, or reported an	amount on	Form	990, Part X,	line	21. 	· · · · · · · · · · · · · · · · · · ·		
1 a Is the organization an agent, trus	stee, custodia	an, or ot	her intermediary	for co	ontributions or othe	er assets not included	□ v	□ Na
on Form 990, Part X? b If 'Yes,' explain the arrangement	ın Part XIII s	and com	Inlete the followi	na tah	No:	•	Yes	No
bit res, explain the arrangement	iii ait Xiii e	and Com	piete trie rollowi	ng tar	ne.		Amount	
c Beginning balance						1 c	,	
d Additions during the year						1 d		
e Distributions during the year						. 1e		
f Ending balance						1f		
2a Did the organization include an a	mount on Fo	rm 990,	Part X, line 21?	'			Yes	No
b If 'Yes,' explain the arrangement	in Part XIII.	Check h	ere if the explar	ntion h	as been provided	ın Part XIII		
1								
Part V Endowment Funds. C								
1 - Paginging of year balance	(a) Current	t year	(b) Prior year	r	(c) Two years back	(d) Three years back	(e) Four ye	ars back
1 a Beginning of year balance b Contributions							+	
b Contributions			-					
 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 percentag	e of the curre	ent year	end balance (lir	ne 1g,	column (a)) held a	is:		
a Board designated or quasi-endown			<u> </u>					
b Permanent endowment ▶		5	_					
c Temporarily restricted endowmen			^{&}					
The percentages in lines 2a, 2b,	and 2c shoul	ld equal	100%.					
3a Are there endowment funds not in a organization by:	he possession	of the c	organization that a	are hel	d and administered	for the	Yes	No
(i) unrelated organizations							3a(i)	+ 110
(ii) related organizations.						· 	. 3a(ii)	
b If 'Yes' to 3a(II), are the related	organizations	listed a					3b	
4 Describe in Part XIII the intended							<u> </u>	
Part VI Land, Buildings, and			· · · · · · · · · · · · · · · · · · ·					
Complete if the organ			'Yes' to Forn	n 990), Part IV, line	11a. See Form 990	0, Part X,	line 10.
Description of property		(a) Cos	t or other basis	(b)	Cost or other pasis (other)	(c) Accumulated depreciation	(d) Book	
1 a Land		<u>`</u>			89,208.		8	9,208.
b Buildings					721,464.	516,503.		4,961.
c Leasehold improvements .					98,868.	78,282.		0,586.
d Equipment					217,657.	199,021.		8,63 <u>6.</u>
e Other								-, - <u>-</u>
Total. Add lines 1a through 1e. (Colum		qual Fo	rm 990, Part X,	colum	n (B), line 10(c).)		33	3,391.
BAA						Sched	ule D (Form 9	

Part VII Investments – Other Securities.		N/A	
Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-or	-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			<u>-</u> .
(A)			
(B)			
(C)			
(C) (D) (E)	 		. <u>.</u>
(E)			·
(F) (G)			_
(d)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>-</u>
Part VIII Investments – Program Related.		N/A	
Complete if the organization answered	'Yes' to Form 990		90, Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost or end-	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		10 TH 10 TH 10 TH 10 TH	
(9)			
(10)		······································	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.). Part IX Other Assets.			
Part IX Other Assets. Complete if the organization answered	'Yes' to Form 990	. Part IV. line 11d. See Form 99	0. Part X. line 15.
	cription	, ,	(b) Book value
(1) Art and artifacts			64,441.
(2) Assets held in trust			169,391.
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			-"
Total. (Column (b) must equal Form 990, Part X, column (E	r), line 15.)		233,832.
Part X Other Liabilities.			
Complete if the organization answered 'Yes' to Fo		e or 11f. See Form 990, Part X, line 25	
(a) Description of liability (1) Federal income taxes	(b) Book value		
(2) Assets held in trust	169,39	1	
(3)	109,39	* · 	
(4)		 	
(5)			
(6)	-		
(7)			
(8)			
(9)		→	
(10)		_	
(11)		_	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.).	<u>►</u> 169,39		L-L-L-K-
Liability for uncertain tax positions. In Part XIII, provide the text of the footax positions under FIN 48 (ASC 740). Check here if the text of the footnote h	as been provided in Part XIII		

Schedule D (Form 990) 2013 Appaloosa Horse Club			-0229	989 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statement			turn.	
Complete if the organization answered 'Yes' to Form 990, Pa	art IV, line	: 12a.	<u> </u>	2 622 162
 Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 	•		1	3,620,468.
a Net unrealized gains on investments	2 a			
b Donated services and use of facilities	2 b	77,775.	1 1	
c Recoveries of prior year grants	2 c	11,113.	1 1	
d Other (Describe in Part XIII.) See Part XIII	2 d	5,386.	1 1	
e Add lines 2a through 2d		3,300.	2 e	83,161.
3 Subtract line 2e from line 1			3	3,537,307.
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.	4 a		1 1	
b Other (Describe in Part XIII.)	4 b			
c Add lines 4a and 4b			4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,537,307.
Part XII Reconciliation of Expenses per Audited Financial Statemen			Return	•
Complete if the organization answered 'Yes' to Form 990, Pa	art IV, line	: 12a.		
1 Total expenses and losses per audited financial statements			1	3,665,548.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a Donated services and use of facilities	2 a	77,775.	[
b Prior year adjustments	2 b		Į	
c Other losses	2 c			
d Other (Describe in Part XIII.) See Part XIII	2 d	5,386.		
e Add lines 2a through 2d			2 e	83,161.
3 Subtract line 2e from line 1	 I		3	3,582,387.
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 .			4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18).			5	3,582,387.
Part XIII Supplemental Information.				
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also comp	Part IV, line: plete this pa	s 1b and 2b; Parint to provide any	V, addition	al information.

Schedule **D** (Form 990) 2013

BAA

SCHEDULE O (Form 990 or 990-EZ)

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 2013

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

Appaloosa Horse Club	82-0229989
Form 990, Part III, Line 1 Organization Mission	
This Organization's mission is to maintain the official regis	stry of the Appaloosa
Horse - an equine breed with a color preference; to collect,	record and preserve the
history and integrity of the breed; to improve, enhance and p	promote the Appaloosa,
and to honor the tradition, history and heritage of the breed	l.
Form 990, Part VI, Line 11b - Form 990 Review Process	
No review was or will be conducted.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of C	onflicts
The code of conduct outlines duties and responsibilities of t	he staff and the Board
of Directors, including the conflict of interest policy. All	staff and members of
the board are required to sign an acknowledgement of receipt	of the code of conduct.
Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, T	op Management
Key management's compensation is governed by contracts, which	are negotiated and
approved by the Board of Directors.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available)
Forms 1023, 990, and 990-T are available for public inspection	on upon request.
Annually, the Organization engages an independent auditor to	complete a financial
statement audit, the results of which are printed in the Appa	aloosa Journal.
	
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.
See separate instructions. Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Open to Public Inspection

(f) Direct controlling entity Employer identification number 82-0229989 (e) End-of-year assets Part I Identification of Disregarded Entities Complete If the organization answered 'Yes' on Form 990, Part IV, line 33. (d) Total income (c)
Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity Appaloosa Horse Club Name of the organization 1 1 1 1111 £¦ ୍ର ئ

(g) Sec 512(b)(13) controlled entity? No Part II Identification of Related Tax-Exempt Organizations Complete If the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (f)
Direct controlling
entity (e)
Public charity status
(if section 501(c)(3)) (d) Exempt Code section (c)
Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN of related organization

						Yes
Appaloosa Museum & Heritage Center 2720 W. Pullman Rd	Museum / Public Charity	ID	501 (C) 3	509 (a) 2	No	

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Schedule R (Form 990) 2013

TEEA5001L 06/26/13

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

Schedule R (Form 990) 2013 Appaloosa Horse Club

Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. 82-0229989

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile	(d) Direct controlling		come Share of total income tax		(g) Share of end-of-year assets	(h) Disproportionate	or- Code V-UBI G e amount in box n ns? 20 of Schedule	31 Gen box mar	(i) General or managing partner?	(k) Percentage ownership
		foreign country)		under sections 512-514)				Yes	K-1 (Form No 1065)	Yes	No	
(1)												
				;								
(2)												
										·		
(6)												
Partily Identification o	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answare 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	zations T	Taxable as ed organiza	a Corporation	n or Trust Co as a corpora	omplete if the	ne organiza during the	ition ansv tax year	s a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, cations treated as a corporation or trust during the tax year.	Form 9	90, Pa	η IV,
(a) Name, address, and EIN of related organization	of related organization		(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp,		(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership		(f) Sec 512(b)(13) controlled entity?
				country)	entity	or trust)					<u> ^ </u>	Yes No
(I)		.										
		-1-										
											-	
(z)		<u>.</u>										
		- 										
(3)												
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		_									
		1										
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82-0229989

Schedule R (Form 990) 2013 Appaloosa Horse Club

| Part V | Transactions With Related Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

					ı	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	ջ	_
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?	d in Parts II-IV?					
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		:	1 a	_	×	
b Giff, grant, or capital contribution to related organization(s)			1 P	×		
c. Giff. grant. or capital contribution from related organization(s)			10		×	
4 Loans or loan organises to or for related organization(s)		:	1 9		×	
ברספוס כו נספו מתפופות כי בי			-		>	
e Loans or loan guarantees by related organization(s) .		•	-	_	4	
				-		
f Dividends from related organization(s).	•	:	1,		×	
			1		×	
	•		-	<u> </u>	: > -	
h Purchase of assets from related organization(s) .	•	•		_	4	
i Exchange of assets with related organization(s)			: -		×	
i Lease of facilities, equipment, or other assets to related organization(s)		:	1.		× —	
						.—
k Lease of facilities, equipment, or other assets from related organization(s)	-	:	.	v	×	
I Performance of services or membership or fundraising solicitations for related organization(s)	•	:	=		×	
• Deformance of services or membership of fundration solicitations by related organization(s)		٠	=	=	×	
Electrical of facilities pariment mailing lets or other assets with related organization(s)			֚֓֡֡֞֜֜֜֜֜֡֜֜֜֜֜֡֜֜֜֜֜֜֡֡֡֡֜֜֜֜֡		×	
n Staring Or actinies, equipment, manning issis, or other assets with reaction of garages.	•	•	-		: >	
 Sharing of paid employees with related organization(s) 			-	1	√	-
				1	7	_
p Reimbursement paid to related organization(s) for expenses		:	<u>라</u>	_	×	
q Reimbursement paid by related organization(s) for expenses .	:	:	<u>-</u>	×		
r Other transfer of cash or property to related organization(s)			<u>-</u>	_	×	
c Other transfer of cash or property from related organization(s)		٠	18	<u></u>	×	
	relationships and trai	saction thresholds				
- 1	(4)	(3)		3		
Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	of deter	rmining Ived	_
d) Annalonea Miseim & Heritage Center	۵	25,000.	FMV			
מווכדדרמאכ						
(2)						
(3)						
(4)						
(5)						
			ı İ	3		1.4
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82-0229989

Schedule R (Form 990) 2013

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on 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

		1								
(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	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportonate allocations?	Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	General or managing partner?	(k) Percentage ownership
			section 512-514)	Yes No			Yes No		Yes No	
(i)										
(2)										
(3)										
										
(5)									_	
				•						
<u></u>										
(8)										
ВАА			TEE	TEEA5004L 06/27/13				Schedule	Schedule R (Form 990) 2013	990) 2013

Schedule R	(Form 990) 2013	Appaloosa	Horse	Club	82-0229989	Page 5
	Supplementa	Information				
	Provide additu	onal informati	on for r	esponses to questions on Schedule R (see	e instructions).	
				·	·	
						
						.
		_				
		- 	_ _			
					·	
				_		-
		- -				
						

	•
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Schedule O - Supplemental Information

Page 2

Appaloosa Horse Club

82-0229989

Form 990, Part IX, Line 24e Other Expenses

	(A)	(B)	(C)	(D)
	Total	Program Services	Management <u>& General</u>	<u>Fundraising</u>
Bank Service Charges Board Meetings	54,353. 36,149.			
Dues & Subscriptions Education	15,307. 3,455.			
Equipment Rental and Maintenan Museum Support Other	76,785. 25,000. 46,420.			
Other Supplies Postage and Shipping	141,743. 103,707.			
Taxes Trail and Distance Riding Total	24,931. 14,851. \$ 542,701.	S 0.	<u>\$ 0.</u>	<u>\$</u> 0.

Schedule D, Part XIII - Supplemental Information		Page 5
Appaloosa Horse Club		82-022998
Part XI, Line 2d se Included In F/S But Not Included On Form 990		
ods Sold not in revenue	Total \$	5,386. 5,386.
Part XII, Line 2d ses And Losses Per Audited F/S		
od sold .	Total \$	5,386. 5,386.
	Appaloosa Horse Club Part XI, Line 2d see Included In F/S But Not Included On Form 990 and Sold not in revenue Part XII, Line 2d see And Losses Per Audited F/S	Appaloosa Horse Club Part XI, Line 2d see Included In F/S But Not Included On Form 990 and Sold not in revenue Total \$\frac{\frac{5}{3}}{3}\$ Part XII, Line 2d see And Losses Per Audited F/S and sold \$\frac{5}{3}\$