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DLN: 93493216000356

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 201	L4 cal <u>e</u>	endar year, or tax year beginni	ng 10-01-2014 , and ending 09-	-30-2015				
B Che	eck if appli	cable	C Name of organization AMERICAN QUARTER HORSE ASSO	CIATION			D Emplo	yer ide	ntification number
	lress chan		•				75-07	2557	5
	ne change	•	Doing business as						
Init	ıal return		Number and street (or D.O. boy if	mail is not delivered to street address)	Doom/suits		E Telepho	ne num	ber
Fina	al ırn/termına	ated	PO BOX 200	mail is not delivered to street address)	ROOM/ Suite	•	(806)	376-4	888
┌ Am	ended retu	ım	City or town, state or province, co	untry, and ZIP or foreign postal code					
┌ App	olication pe	ending	AMARILLO, TX 791680001				G Gross re	eceipts s	58,910,248
			F Name and address of pr CRAIG HUFFHINES	incipal officer		H(a) Is th	• ıs a group rdınates?	return	for
			1600 QUARTER HORSE D	R		Subo	iumates		j 1es j• 110
			AMARILLO,TX 79104			H(b) Are a		nates	┌ Yes ┌ No
Tax	x-exempt	status	「 501(c)(3) 「 501(c) (5) ◀	I (insert no)	527	ınclu If "N		a lıst	(see instructions)
	ebsite: Þ	• ww	W A Q HA C O M			_	ıp exempt		
						1			
			Corporation Trust Associat Trust ✓ Associat	on Other ►		L Year of fo	rmation 19	40 M	State of legal domicile TX
Ра			-	ion or most significant activities					
Governance	RE	LATIV	'E TO THE BREED, AND TO P	TAIN RECORDS OF THE AMER UBLISH "THE AMERICAN QUA	RTER HC	RSE JOUR	NAL AND	"AME	RICA'S HORSE "
	2 Ch	eck th	is box 🞮 if the organization o	liscontinued its operations or dis	sposed of	more than 2	15% of its	net as	sets
Activities &				ning body (Part VI, line 1a) .				3	268
Æ.	1			of the governing body (Part VI,				4	264
ĮCĮ.			• •	n calendar year 2014 (Part V, lin	•			5 6	377 750
4.				necessary)				7a	3,594,67!
	l			from Form 990-T, line 34				7b	-6,250
				·			r Year		Current Year
	8 (Contrib	outions and grants (Part VIII,	line 1h)			185,8	397	277,303
Rayente	9 P	rogra	m service revenue (Part VIII,	line 2g)			44,753,7		45,414,722
łąye	1			nn (A), lines 3, 4, and 7d)			2,084,3		2,340,921
_), lines 5, 6d, 8c, 9c, 10c, and 1 1 (must equal Part VIII, column	-		324,8	355	-389,825
							47,348,7	772	47,643,121
				t IX, column (A), lines 1-3) .			7,142,9	920	7,290,434
	1			IX, column (A), line 4)				0	0
Ø		Salarıe 5-10)		vee benefits (Part IX, column (A)), lines		15,028,7	702	14,727,894
Expenses		,		(, column (A), line 11e)				0	0
хþе	 b ⊺	otal fun	ndraising expenses (Part IX, column (D), line 25) ▶ 0					
ш	17 ()ther e	expenses (Part IX, column (A)	, lines 11a-11d, 11f-24e) .			24,268,7	733	25,593,858
				, ust equal Part IX, column (A), lır			46,440,3		47,612,186
	19 F	Revenu	ue less expenses Subtract line	e 18 from line 12			908,4	117	30,935
Net Assets or Fund Balances							g of Curre 'ear	nt	End of Year
Set Ses	20 T	otal a	ssets (Part X. line 16)			•	53,732,6	588	50,998,312
A As	l						36,833,9		35,103,883
22	22 N	let as:	sets or fund balances Subtrac	t line 21 from line 20			16,898,7	705	15,894,429
Par	t II	Signa	ature Block						
my kr	nowledge	and b		kamined this return, including ac mplete Declaration of preparer (
		****					016-08-01		
Sign		_	ture of officer			Di	ate		
Here	*)		TON TAYLOR COO & TREASURER or print name and title						
	17	Pr	nnt/Type preparer's name	Preparer's signature	Dat	e Che	eck 🗀 ıf	PTIN	
Paid	t	_	AMELA ALEXANDERSON	PAMELA ALEXANDERSON		self	-employed	P01218	
	parer		m's name MOSS ADAMS LLP				n's EIN 🟲 9:		
Use	Only	Fi	rm's address ► 6565 AMERICAS PARI			Pho	ne no (505) 878-7	200
	-		ALBUQUERQUE, NM	87110					

✓ Yes ☐ No

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		Νo
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		Νo
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^{\square}	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		Νo
L1	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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Νo
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Νo
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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	Yes	
L 5	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	Yes	
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	Yes	
۱7	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		No
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		Νo
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		Νo
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
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 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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 "Yes," complete Schedule L, Part II	26	Yes	
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		No
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			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	Yes	
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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			<u></u>
	Estable sumbar assistad as Paul 2 of Estable 2006 Estable		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 5,852 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	 		
	gaming (gambling) winnings to prize winners?	1c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	34	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
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		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_	Describe annual management that are all the second and the second	5c		
	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? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		N o
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	file Form 8282?	7 c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
h	required?	7g 7h		
8	Form 1098-C?			
0-	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
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)			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
C	Enter the amount of reserves on hand	Į Į		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response or note to any line in this Part VI														.[\tau
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Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website Vupon 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, address, and telephone number of the person who possesses the organization's books and records
 ►TRENTON TAYLOR

 1.000 ONA PTER MORGE DR

1600 QUARTER HORSE DR

Form 990 (2014)	
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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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

any hours for related organizations (W- organizations (W- organizations (W- organization (W- 2/1099-MISC) organization related	(A) Name and Title	for related organizations below		•	` `	organization and
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Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t	han d n is	one both	box, ∣an (officer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	•			
C	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	►	1,704,293	0	141,945

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►9

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

Section B. Independent Contractors

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

(B) Description of services	(C) Compensation
CONSULTING SERVICES	250,000
CLEANING SERVICES	160,309
IT SERVICES	150,187
ACCOUNTING SERVICES	142,771
	Description of services CONSULTING SERVICES CLEANING SERVICES IT SERVICES

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►4

Yes No

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f
Program Service Revenue	2a b c d e f g
evenue	3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Other R	b C 9a
	10a
	c
	11a b c d

Form 99		•						Page 9
Part V	/	Statement o	of Revenue ule O contains a respon	se or note to any lu	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated cam	paigns 1a					
Grants mounts	ь	Membership du	ies 1b					
وق	С	Fundraising eve	ents 1c					
Giffs, iilar A	d	Related organiz	zations 1d	277,303				
9 <u>∺</u>	e	Government grants	s (contributions) 1e					
ons Sil	f	All other contribution	ons, gifts, grants, and 1f					
buti the		similar amounts no	ot included above					
Contributions, Giffs, Grants and Other Similar Amounts	g	1a-1f \$	ons included in lines					
ë G	h	Total. Add lines	s 1 a - 1 f	· · · •	277,303			
<u> </u>				Business Code				
Program Serwoe Revenue	2a	SPONSORSHIP INC	COME	541800	6,789,713	6,789,713		
æ	Ь	MEMBERSHIP INCO	OME	900099	6,760,542	6,760,542		
MCP	С	CHAMPIONSHIP SH	HOWS	900099	6,345,534	6,345,534		
j.	d	REGISTRATIONS		900099	4,692,043	4,692,043		
Ē	e	All other progra		541800	3,586,172	1,200	3,584,972	
Ş	f		am service revenue		17,240,718	17,240,718		
	g		s 2a – 2f		45,414,722			
	3		ome (including dividend ar amounts)		603,034			603,034
	4	Income from inves	stment of tax-exempt bond p	oroceeds 🕨				
	5	Royalties			523			523
	6a	Gross rents	(ı) Real 13,200	(II) Personal				
	ь	Less rental	0					
	С	expenses Rental income	13,200					
	d	or (loss) Net rental inco	me or (loss)		13,200		9,703	3,497
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	12,216,156					
	ь	Less cost or other basis and	10,478,269					
		sales expenses						
	d	Gain or (loss)	1,737,887		1,737,887			1,737,887
ů.	8a	Gross income f	from fundraising		_,,			-,,
Other Revenue		\$	s reported on line 1c)					
<u>₩</u>		·	a					
ţ	b		penses b					
•	C 9a		(loss) from fundraising e from gaming activities	events p -				
		See Part IV, lin	ne 19					
	.		a					
	b c		penses b (loss) from gaming activ	uties L				
		Gross sales of	-					
		returns and allo	owances .	1,422,100				
	ь	less cost of a	oods sold b					
	c		(loss) from sales of inve	788,858 entory .	633,242	633,242		
		Miscellaneous		Business Code				
	11a	PARTNERSHIP	PINCOME	900099	-59,857			-59,857
	b	PENSION PLA	N ACTUARIAL	900099	-976,933			-976,933
	C .							
	d	All other reven	L					
	e	Total. Add lines		🕨	-1,036,790			
	12	Total revenue.	See Instructions		47,643,121	42,462,992	3,594,675	1,308,151

Part IX Statement of Functional Expenses

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

	on solice (c) and solice (c) organizations made complete an equations //	other organizati	one mast comp	rete coramin (///					
	Check if Schedule O contains a response or note to any line in this Part IX								
	ot include amounts reported on lines 6b, p, 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 domestic organizations and domestic governments See Part IV, line 21	481,638							
2	Grants and other assistance to domestic individuals See Part IV, line 22	6,133,874							
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	674,922							
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees	923,532							
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	10,788,085							
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	937,829							
9	Other employee benefits	1,223,734							
10	Payroll taxes	854,714							
11	Fees for services (non-employees)								
а	Management								
b	Legal	138,567							
c	Accounting	226,071							
d	Lobbying								
e	Professional fundraising services See Part IV, line 17								
f	Investment management fees	108,390							
g	Other (If line 11g amount exceeds 10 $\%$ of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,174,581							
12	Advertising and promotion	3,359,654							
13	Office expenses	2,260,513							
14	Information technology	544,394							
15	Royalties								
16	Occupancy	555,165							
17	Travel	913,168							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	201,306							
20	Interest	45,894							
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	1,222,040							
23	Insurance	387,078							
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)								
а	CHAMPIONSHIP SHOWS	3,754,975							
b	RACING CHALLENGE	2,580,103							
c	MAGAZINE	2,040,538							
d	GENOTYPING	1,852,713							
е	·	4,228,708							
25	Total functional expenses. Add lines 1 through 24e	47,612,186							
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)								

Part X Balance Sheet

Par	τχ	Check if Schedule O contains a response or note to any line in	this Pa	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			1,974,131	1	2,642,695
	2	Savings and temporary cash investments			2,138,927	2	1,744,113
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,654,814	4	1,575,841
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete Paschedule L	of	04.005		45.000	
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	outing employers	31,935	5	15,968	
8	7	Notes and loans receivable, net			7	_	
⋖	8	Inventories for sale or use			510,184	8	693,892
	9	Prepaid expenses and deferred charges			501,378	9	512,131
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	18,821,972	·		<u> </u>	
	ь	Less accumulated depreciation	10b	12,200,312	5,924,148	10 c	6,621,660
	11	Investments—publicly traded securities	37,134,778	11	31,468,012		
	12	Investments—other securities See Part IV, line 11	2,318,500	12	2,565,234		
	13	Investments—program-related See Part IV, line 11		13	1,600,000		
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,543,893	15	1,558,766
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			53,732,688	16	50,998,312
	17	Accounts payable and accrued expenses			3,622,358	17	3,286,830
	18	Grants payable				18	
	19	Deferred revenue			27,937,887	19	26,437,618
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability Complete Part IV of Scho				21	
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	ors, tr				
аę		persons Complete Part II of Schedule L				22	
\exists	23	Secured mortgages and notes payable to unrelated third partie	s.		448,832	23	331,281
	24	Unsecured notes and loans payable to unrelated third parties			1,291,648	24	1,029,317
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X of	Schedule	0.500.050		4.040.007
		D			3,533,258	25	4,018,837
	26	Total liabilities. Add lines 17 through 25			36,833,983	26	35,103,883
φ S		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	✓ and	complete			
Ë	27	Unrestricted net assets			16,898,705	27	15,894,429
Fund Balance	28	Temporarily restricted net assets	•		1.5,555,1.55	28	, 30 1, 120
	29	Permanently restricted net assets				29	
Ĭ		Organizations that do not follow SFAS 117 (ASC 958), check h					
		complete lines 30 through 34.	F	,			
S O.	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ΑS	32	Retained earnings, endowment, accumulated income, or other				32	
Net /	33	Total net assets or fund balances			16,898,705	33	15,894,429
Z	34	Total liabilities and net assets/fund balances			53,732,688	34	50,998,312
	ı	. I II abinities and need assets fund salunces	- •		1 33,732,000	5 7	55,555,512

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)				
		1		47,6	543,121
2	Total expenses (must equal Part IX, column (A), line 25)	2		47,6	512,186
3	Revenue less expenses Subtract line 2 from line 1			<u> </u>	
		3			30,935
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		16.8	398,705
5	Net unrealized gains (losses) on investments	-		10,0	
_	Not unrealized gains (1055cs) on investments.	5		-2,4	17,268
6	Donated services and use of facilities				
-	I muse have a value of the control o	6			
7	Investment expenses	7			
8	Prior period adjustments				
		8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1,3	382,057
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			<u>, , , , , , , , , , , , , , , , , , , </u>	
	column (B))	10		15,8	394,429
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	• •			<u>. </u>
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigl audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: **Software Version:**

EIN: 75-0725576

Name: AMERICAN QUARTER HORSE ASSOCIATION

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more tl perso and a	tion (han o n is b	ne b oth ctor,	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,1033 MI3C)	2/1033 1136)	related organizations	
(1) DR GLENN BLODGETT	8 00	x		х				0	0	0	
EC/DIRECTOR-AT-LARGE (1) SANDRA ARLEDGE	2 00					1					
EC/DIRECTOR EMERITUS	2 00	х		Х				0	0	0	
(2) RALPH SEEKINS	8 00										
EC/DIRECTOR	2 00	X		Х				0	0	0	
(3) DR JIM HEIRD	8 00	×		x				0	0	0	
EC/DIRECTOR	2 00			<u> </u>				0	0		
(4) STAN WEAVER	8 00	X		x				0	0	0	
EC/DIRECTOR (5) GEORGE PHILLIPS	2 00 8 00					-					
EC/DIRECTOR (THROUGH JANUARY 2015)	2 00	Х		Х				0	0	0	
(6) JOHNNY TROTTER	8 00										
PAST PRESIDENT(EC THROUGH MARCH 2015)	2 00	X		X				14,400	0	0	
(7) A CLARK SCOGGIN	4 00	×						18,875	0	0	
DIRECTOR								10,073	0	0	
(8) ADRIANA GOMEZ BARNOLA	30 00	X						0	0	0	
DIRECTOR (9) AL DUNNING	2 00					<u> </u>					
		X						0	0	0	
DIRECTOR-AT-LARGE (10) ALICE W HOLMES	2 00										
DIRECTOR		X						0	0	0	
(11) ANDY MOORMAN	1 00	×						0	0	0	
DIRECTOR EMERITUS									Ů		
(12) ANDY REES	1 00	X						0	0	0	
HONORARY VICE PRESIDENT (13) ANGELO D BIZZARRO	5 00										
DIRECTOR		Х						0	0	0	
(14) ANNA RIGGS-EADER	1 00								_		
DIRECTOR		X						0	0	0	
(15) ANNE L PRINCE	1 00	x						0	0	0	
DIRECTOR											
(16) ANNE M BRZEZICKI	3 00	X						0	0	0	
DIRECTOR (17) ANTONIO ALEARDO GIRAUDINI	4 00										
DIRECTOR-AT-LARGE		Х						0	0	0	
(18) BEN L HUDSON	5 00										
DIRECTOR-AT-LARGE		X						0	0	0	
(19) BENNIE T SARGENT	10 00	×						0	0	0	
DIRECTOR-AT-LARGE						<u> </u>		_	_		
(20) BETH C AUSTIN	2 00	x						0	0	0	
DIRECTOR (21) BILLIE G BREWER	1 00			\vdash			\vdash				
HONORARY VICE PRESIDENT		X						0	0	0	
(22) BOB G LINES	1 00	.,						-	-	-	
DIRECTOR	•••••	X		L				0	0	0	
(23) BOB MOORHOUSE	1 00	x					1	0	0	0	
DIRECTOR-AT-LARGE			<u> </u>	<u> </u>			_				
(24) BRAD LUND	1 00	x						0	0	0	
DIRECTOR		L	1			1	<u> </u>	<u> </u>	<u> </u>		

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (e nan o n is b	ne b oth	ox, ι an o	ınless fficer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations	
(26) BRAD TATE	1 00	x						0	0	0	
PAST PRESIDENT		^						Ů		0	
(1) BUTCH HAMMERDIRECTOR EMERITUS	12 00	x						0	0	0	
(2) C A COFER	1 00							_	_	_	
DIRECTOR EMERITUS		X						0	0	0	
(3) C DAVID FLOHR	2 00	v						0	0		
DIRECTOR		Х						0	U	0	
(4) C W 'BILL' ENGLUND JR	1 00	x						0	0	0	
PAST PRESIDENT		^						Ů		0	
(5) CAL R BRANDT	1 00	l x						0	0	0	
DIRECTOR								Ů	Ů		
(6) CALVIN R WHITE DVMDIRECTOR	5 00	x						0	0	0	
(7) CAROL A BRADLEY	2 00									_	
DIRECTOR		Х						0	0	0	
(8) CAROL COOPER	1 00	×						0	0	0	
DIRECTOR	F 00										
(9) CAROL L WHITTAKER	5 00	×						0	0	0	
DIRECTOR (10) CAROL ROSE	1 00										
DIRECTOR-AT-LARGE		х						0	0	0	
(11) CATHY HANSON	1 00										
DIRECTOR		×						0	0	0	
(12) CHARLES W GRAHAM DVM	1 00							_			
DIRECTOR-AT-LARGE		X						0	0	0	
(13) CHERYLLEE SARGENT	20 00	,						27.500			
DIRECTOR		Х						27,500	0	U	
(14) CHRIS HARDCASTLE	5 00	X						0	0	0	
DIRECTOR-AT-LARGE								Ů	Ů		
(15) CHRIS J JENSEN	1 00	l x						0	0	0	
DIRECTOR											
(16) CHRISTA L BALDWIN	3 00	×						0	0	0	
DIRECTOR (17) CHRISTIAN BEAUCHEMIN	2 00						_				
		×						0	0	0	
DIRECTOR (18) CLARK BRADLEY	2 00										
DIRECTOR EMERITUS		×						4,200	0	0	
(19) CLAY E MACLEOD	1 00										
DIRECTOR		х						0	0	0	
(20) CLAYTON RUSSELL	5 00									_	
DIRECTOR		×						0	0	0	
(21) COL EARL A LILLEY	1 00	,,									
DIRECTOR EMERITUS		X						0	0	0	
(22) CONNIE ARMSTRONG	5 00							0	0	0	
DIRECTOR		X						0	0		
(23) CURTIS G FERGUSON	2 00	X						0	0		
DIRECTOR		<u> </u>						ļ			
(24) D JOE SMITH	1 00	x						0	0	0	
DIRECTOR-AT-LARGE											

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Posit to a person a Individual trustae	ion (e nan o n is b	ne bo oth a ctor/	ox, u an of trus	nless ficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		trustae r	nal Trustee		0)88	Highest compensated				
(51) DAN TREIN	5 00	х						0	0	0
DIRECTOR (1) DARLENE M CHASE	1 00									
DIRECTOR		Х						0	0	0
(2) DAVID L NELSON	2 00	х						0	0	0
DIRECTOR-AT-LARGE (3) DAVID S NELSON	2 00									
DIRECTOR		x						0	0	0
(4) DAVID WHITAKER	1 00	х						0	0	0
DIRECTOR-AT-LARGE								Ů	0	
(5) DEAN R JOHNSON	10 00	×						0	0	0
DIRECTOR (6) DEAN ROSS	1 00									
DIRECTOR		×						0	0	0
(7) DEBARA K SCHAUF	2 00	х						0	0	0
DIRECTOR								, and the second		
(8) DEBBY BREHM	2 00	x						0	0	0
DIRECTOR (9) DEE DEE MCGRANE	1 00									
HONORARY VICE PRESIDENT		X						0	0	0
(10) DENNY HASSETT	2 00	х						0	0	0
DIRECTOR EMERITUS (11) DIRK JONES	2 00									
DIRECTOR-AT-LARGE		x						0	0	0
(12) DON BELL	1 00	, , ,								
DIRECTOR		Х						0	0	
(13) DONNA GOODSON CASEY	15 00	×						0	0	0
DIRECTOR (14) DONNA JOHNSON	1 00									
HONORARY VICE PRESIDENT		X						0	0	0
(15) DORN PARKINSON	2 00	х						0	0	0
DIRECTOR EMERITUS		^						Ů	Ů	
(16) DORVAN SOLBERG	1 00	x						0	0	0
DIRECTOR EMERITUS (17) DOUGLAS BROWN	10 00									
DIRECTOR		Х						0	0	0
(18) DR CAROLE JOUBERT GABOURY	1 00	х						0	0	0
DIRECTOR-AT-LARGE (19) DR DICKSON VARNER	1 00									
DIRECTOR		x						0	0	0
(20) DR LARRY L FINDLEY	4 00							_	_	
DIRECTOR		X						0	0	0
(21) DR MICHAEL MARTIN	2 00	×						0	0	0
DIRECTOR EMERITUS (22) DR R M CHRISTENSEN	1 00									
DIRECTOR-AT-LARGE		×						0	0	0
(23) DR ROLAND WOHLIN	1 00	,						0	0	0
DIRECTOR EMERITUS		X						U	U	U
(24) DR SCOTT MYERS	1 00	×						0	0	0
DIRECTOR	I	<u> </u>					L			

(A) Name and Title	(B) A verage hours per week (list any hours	A verage hours per week (list any hours A verage Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(76) DR TRACY LEANNE ADAMS	1 00	х						0	0	0
DIRECTOR (1) DUANE MCDAVITT DVM	2 00		 			\vdash				
HONORARY VICE PRESIDENT		х	<u> </u>					0	0	0
(2) DUANE W WALKER DIRECTOR-AT-LARGE	1 00	х						0	0	0
(3) DUAYNE DIDERICKSEN DIRECTOR-AT-LARGE	1 00	х						0	0	0
(4) ED MURRAY DVM	2 00	x						0	0	0
DIRECTOR-AT-LARGE			<u> </u>			\square		Ţ.	, and the second	
(5) EDWARD J MCNELIS DIRECTOR EMERITUS	10 00	х						0	0	0
(6) EDWARD L SQUIRES HONORARY VICE PRESIDENT	1 00	х						0	0	0
(7) ELEANOR M GREEN	2 00	x						0	0	0
DIRECTOR (8) FLOYD E 'BUTCH' WISE	10 00	x						0	0	0
DIRECTOR (9) FRANK G MERRILL	5 00		_		_	$\vdash \vdash$		_		
PAST PRESIDENT	40.00	Х						0	0	0
(10) GALE LITTLE DIRECTOR	10 00	x						0	0	0
(11) GARY LYNN OLSON DIRECTOR	1 00	х						0	0	0
(12) GENE A PARKER	1 00	х						0	0	0
DIRECTOR-AT-LARGE (13) GEORGA M SUTTON	1 00	x				\vdash		0	0	
HONORARY VICE PRESIDENT	9.00					\square		Ŭ	Ŭ	<u> </u>
(14) GEORGIANNA V RENOUARD DIRECTOR	8 00	х						0	0	0
(15) GINGER HYLAND PAST PRESIDENT	1 00	х						0	0	0
(16) GLORIA ENGER	1 00	х						0	0	0
DIRECTOR EMERITUS (17) GREG TORGERSON	5 00		 		_	\vdash				
DIRECTOR		Х						0	0	0
(18) GRETCHEN MATHES DIRECTOR	4 00	x						706	0	0
(19) GUNNAR R OTNESS	6 00	х						0	0	0
HONORARY VICE PRESIDENT (20) GUS BARAKIS JR	1 00	x						0	0	0
DIRECTOR-AT-LARGE (21) HAIDEE LANDRY	10 00		_		-					
DIRECTOR (22) HARRY A KNIGHT	1 00	Х	_		<u> </u>			0	0	0
DIRECTOR EMERITUS	1 00	x						0	0	0
(23) HEATHER LYNN THRAPP MAUCK	1 00	х						0	0	0
DIRECTOR (24) HOMER R STUDE	1 00		\vdash	\vdash	-	\vdash				
DIRECTOR-AT-LARGE		Х						0	0	0

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and				
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2,2333 11333)	2,2333 11333,	related organizations		
(101) HOWARD R WEISS	1 00					 						
PAST PRESIDENT		Х						0	0	0		
(1) J D YATES	1 00	×						3,500	0	0		
DIRECTOR (2) J LLOYD YOTHER	4 00											
DIRECTOR		X						0	0	0		
(3) J WADE ELLERBROEK JR	10 00	x						0	0	0		
DIRECTOR		^						Ŭ	Ŭ			
(4) JACKIE KRSHKA	5 00	x						0	0	0		
DIRECTOR-AT-LARGE (5) JAMES A RUDOLPH	2 00											
DIRECTOR-AT-LARGE		Х						0	0	0		
(6) JAMES BARTON PAST PRESIDENT	10 00	х						0	0	0		
(7) JAMES E HELZER	2 00	X						0	0	0		
PAST PRESIDENT (8) JAMES HUNT	3 00											
DIRECTOR		х						0	0	0		
(9) JAMES L EAKIN	5 00	.,										
DIRECTOR		X						0	0	0		
(10) JAMES M ELLER III DIRECTOR	3 00	х						0	0	0		
(11) JAMES R HOOTMAN	1 00	x						0	0	0		
DIRECTOR EMERITUS (12) JAMES R MITCHELL	1 00											
DIRECTOR		х						0	0	0		
(13) JANET NEWTON	3 00	x						0	0	0		
DIRECTOR-AT-LARGE		_ ^						0	0			
(14) JANET S HANSEN	4 00	x						0	0	0		
DIRECTOR (15) JEFF B TEBOW	1 00											
DIRECTOR		X						0	0	0		
(16) JEFF TERPSTRA	1 00	х						0	0	0		
DIRECTOR-AT-LARGE (17) JERRY B BLACK	1 00											
DIRECTOR		х						0	0	0		
(18) JERRY S DANIELS	1 00											
HONORARY VICE PRESIDENT		Х						0	0	0		
(19) JERRY W FULLER	1 00	x						0	0	0		
DIRECTOR (20) JERRY WINDHAM	1 00											
PAST PRESIDENT		X						0	0	0		
(21) JIM BRINKMAN	1 00	x						0	0	0		
DIRECTOR								, and the second	, , , , , , , , , , , , , , , , , , ,			
(22) JIM DUDLEYDIRECTOR	5 00	x						0	0	0		
(23) JIM J SHOEMAKE	2 00											
PAST PRESIDENT		X						0	0	0		
(24) JIM PURDY	2 00	х						0	0	0		
DIRECTOR-AT-LARGE												

Compensated Employees, and Ind	ependent Cor	ntracto	rs					I	1	1 1
(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and			
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke, emplojee	Highest compensated employee	Former	2/1099-14130/	2/1099-14130)	related organizations
(126) JIM R SEARLES	1 00	X						0	0	0
DIRECTOR (1) JIMMY E SEAGO	1.00						_			
	1 00	×						0	0	0
DIRECTOR (2) JOAN SCHROEDER	1 00									_
DIRECTOR		×						0	0	0
(3) JOE CARTER	2 00									
DIRECTOR-AT-LARGE		X						0	0	0
(4) JOHANNES ORGELDINGER	1 00	,,								
PAST PRESIDENT		Х						0	0	0
(5) JOHN ANDREINI	3 00	х						0	0	0
DIRECTOR EMERITUS	•••••	_ ^						0	U	
(6) JOHN B KUNKLE	3 00	l x						1,800	0	0
DIRECTOR								2,555		
(7) JOHN BOBENRIETH II	5 00	l x						0	0	0
DIRECTOR	10.00					-				
(8) JOHN BOXELL	10 00	x						0	0	0
DIRECTOR (9) JOHN D HAMMES	1 00									
		x						1,000	0	0
DIRECTOR-AT-LARGE (10) JOHN H SEDGWICK	1 00									
DIRECTOR		×						0	0	0
(11) JOHN HOVDE	2 00									
DIRECTOR		X						0	0	0
(12) JOHN PIPKIN	5 00									
DIRECTOR-AT-LARGE		×						0	0	0
(13) JOHN SCHMAHL	1 00	V						0	0	0
DIRECTOR EMERITUS		Х						0	U	0
(14) JOHN W TRAFTON	1 00	X						0	0	0
DIRECTOR								,		
(15) JOHNE DOBBS	2 00	l x						0	0	0
PAST PRESIDENT	0.00									
(16) JOSE ARTURO JIMENEZ MANGAS	8 00	×						0	0	0
DIRECTOR (17) JOSEPH H MCALLISTER	5 00					-				
		×						4,800	0	0
DIRECTOR-AT-LARGE (18) JUDY COY-HORTON	5 00									
DIRECTOR		×						0	0	0
(19) KARL BAUER	1 00									
DIRECTOR		×						0	0	0
(20) KATE BAMFORD	1 00							_	_	_
DIRECTOR		X						0	0	0
(21) KATE LEHANE JOHNSON	1 00	V						0	0	0
DIRECTOR		Х						0	0	0
(22) KATHRYN SCHROEDER	2 00	X						0	0	0
DIRECTOR		<u> </u>						<u> </u>		
(23) KATHY M PATTERSON	5 00	X						0	0	0
DIRECTOR (24) KELLY BOLES CHAPMAN	3 00		_		_	1	_			
	3 00	х						0	0	0
DIRECTOR		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	L	I		<u> </u>

Compensated Employees, and Inde	ependent Cor	ntracto	rs			·	•		1	
(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and				
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former			related organizations
(151) KELVIN CHILDERS	2 00					_				
DIRECTOR		X						0	0	0
(1) KEN A MUMY	2 00	x						0	0	0
PAST PRESIDENT								,		
(2) KEN COCHRANE	15 00	x						0	0	0
DIRECTOR EMERITUS (3) KENNETH BANKS	1 00									
DIRECTOR-AT-LARGE		x						0	0	0
(4) KENNETH T SMITH	1 00									
PAST PRESIDENT		X						0	0	0
(5) KENNETH W KNOWLTON	1 00	,						4.500		
DIRECTOR		Х						1,500	0	0
(6) KRISTINA K HELZER	5 00	x						0	0	0
DIRECTOR								Ů	Ů	
(7) LAINA P BANKS	8 00	×						0	0	0
DIRECTOR (8) LAINIE M DEBOER	1 00									
		×						500	0	0
DIRECTOR (9) LANCE R TREPTOW	1 00									
DIRECTOR-AT-LARGE		×						900	0	0
(10) LARRY G CLIFFORD	2 00									
DIRECTOR		X						0	0	0
(11) LARRY LARSON	1 00	х						0	0	0
DIRECTOR-AT-LARGE		_ ^						Ů	Ů	
(12) LAUREL BETH CAPURRO-WACHTEL	2 00	×						1,200	0	0
DIRECTOR	2.00							,		
(13) LAWRENCE A LEMKE	2 00	×						0	0	0
DIRECTOR (14) LAURENCE W JAYNES	15 00									
DIRECTOR		×						1,800	0	0
(15) LESLIE VAGNEUR LANGE	5 00									
HONORARY VICE PRESIDENT		×						4,900	0	0
(16) LLOYD BENOIT JR	1 00	x						0	0	0
DIRECTOR EMERITUS		_ ^						Ů	Ů	
(17) LORI PFAFF	1 00	l x						0	0	0
DIRECTOR-AT-LARGE										
(18) LORI S BUCHOLZ	10 00	×						0	0	0
DIRECTOR (19) LORNE A WINTHER	1 00									
DIRECTOR		×						0	0	0
(20) LUKE CASTLE	7 00									
DIRECTOR		×						0	0	0
(21) LYLE LOVETT	1 00	,,								
HONORARY VICE PRESIDENT		X						0	0	0
(22) MARGARITA CHURCH	4 00	х						0	0	0
DIRECTOR										
(23) MARGO LEA BALL	4 00	x						0	0	0
DIRECTOR (24) MARILYN RANDALL	4 00						_			
(,		x						2,700	0	0
DIRECTOR-AT-LARGE	1	<u> </u>						<u> </u>		<u> </u>

Compensated Employees, and Inde	1	ntracto	rs					I	1	1 1
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (e nan o n is b	ne b	ox, u an of	ınless fficer	į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensat	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
			æ			ted				
(176) MARK DUNHAM	1 00	х						0	0	0
DIRECTOR (1) MARKUS RENSING	20 00	х						0	0	0
DIRECTOR (2) MARLENE R MONVOISIN	4 00									
DIRECTOR		Х						0	0	0
(3) MARNIE SOMERS	5 00	x						0	0	0
DIRECTOR-AT-LARGE (4) MARTEN A CLARK	1 00									
PAST PRESIDENT		х						0	0	0
(5) MARTY OAK SIMPER	2 00	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						1.000		
DIRECTOR		Х						1,000	0	0
(6) MARY EBNET	10 00	x						0	0	0
DIRECTOR (7) MARY HANNAGAN	1 00									
DIRECTOR		Х						665	0	0
(8) MATT R WITMAN	2 00	x						0	0	0
DIRECTOR								Ů	-	
(9) MELANIE BURNS	1 00	x						0	0	0
DIRECTOR (10) MELISSA HARGETT DUKES	1 00									
DIRECTOR		X						2,000	0	0
(11) MEREDITH 'PEG' EDMONDSON	1 00	x						0	0	0
DIRECTOR EMERITUS (12) MICAH MCKINNEY	10 00									
DIRECTOR		х						0	0	0
(13) MICHAEL D MURPHY	4 00	V						0	0	0
DIRECTOR		X						0	0	0
(14) MICHAEL JENNINGS	1 00	x						0	0	0
DIRECTOR-AT-LARGE (15) MICHAEL L SWAIN	2 00									
DIRECTOR EMERITUS		X						0	0	0
(16) MICHAELA KAYSER	12 00	х						0	0	0
DIRECTOR (17) MICHEL H CLITES	1 00									
DIRECTOR		х						0	0	0
(18) MICHELE PFENDER	2 00	<u> </u>						_		_
DIRECTOR		X						0	0	0
(19) MICHELLE M FORNESS	5 00	x						0	0	0
DIRECTOR (20) MIKE J PERKINS	1 00									
PAST PRESIDENT		Х						363	0	0
(21) NANCY A MARTIN	1 00	x						0	0	0
DIRECTOR-AT-LARGE	2.00	<u> </u>			1			ı		
(22) NANCY CAHILL	2 00	x						0	0	0
DIRECTOR (23) NARCISO FLORES	15 00									
DIRECTOR		Х					L	0	0	0
(24) NORMAN K LUBA	5 00	х						0	0	0
DIRECTOR										

Compensated Employees, and Ind	ependent Cor	ntracto	rs					I	1	l I
(A) Name and Title	(B) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and			
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-14130/	2/1099-14130)	related organizations
(201) P G PAWLEY-WILSON	5 00	l x						0	0	0
DIRECTOR-AT-LARGE	1.00					-				
(1) PARIS WIXON	1 00	x						0	0	0
DIRECTOR-AT-LARGE (2) PAUL E BAILEY	6 00					-				
DIRECTOR		Х						0	0	0
(3) PAUL LINDSEY JR	1 00	x						0	0	0
DIRECTOR-AT-LARGE		^						Ů	Ů	<u> </u>
(4) PAUL TREADWELL	2 00	l x						0	0	0
DIRECTOR								,		
(5) PETE A SCARMARDO	1 00	l x						0	0	0
DIRECTOR						-				
(6) PETER J COFRANCESCO III	1 00	×						0	0	0
PAST PRESIDENT (7) R H STEVENS JR	8 00									
		×						0	0	0
PAST PRESIDENT (8) RALPH G YOUNG	1 00					+				
		×						0	0	0
OIRECTOR (9) RANDY RATLIFF	3 00									
DIRECTOR		×						0	0	0
(10) RICHARD L HARRIS	2 00					+				
DIRECTOR-AT-LARGE		×						0	0	0
(11) RICHARD SHIFFLER	5 00							_		_
DIRECTOR		X						0	0	0
(12) RICK ADKINS	2 00	V						0	0	0
DIRECTOR		Х						0	0	0
(13) RICK BAILEY	2 00	l x						0	0	0
DIRECTOR		^						Ů	Ŭ.	<u> </u>
(14) RICK C JOHNS	0 00	l x						0	0	0
PAST PRESIDENT	1.00					-				
(15) RICK CHAYER	1 00	×						0	0	0
DIRECTOR (16) RICKY BORDIGNON	5 00					-				
		×						0	0	0
DIRECTOR (17) ROB A BROWN	1 00									
DIRECTOR		×						0	0	0
(18) ROB BROWN	1 00									
PAST PRESIDENT		×						0	0	0
(19) ROBBIE RAINER	1 00									
DIRECTOR-AT-LARGE		X						0	0	0
(20) ROBERT C NORRIS	1 00	.,								
PAST PRESIDENT		X						0	0	0
(21) ROGER ELDER	2 00	x						750	0	0
DIRECTOR-AT-LARGE		^						730	Ů	<u> </u>
(22) RONALD D SMITH	3 00	x						0	0	0
DIRECTOR								<u> </u>		
(23) RONALD J HARTLEY	10 00	l x						0	0	0
DIRECTOR EMERITUS										
(24) ROSS ROARK	15 00	x						0	0	0
DIRECTOR						1		<u> </u>		<u> </u>

Compensated Employees, and Inde	1	ntracto 						l	l	l I
(A) Name and Title	(B) Average hours per week (list any hours	Position (do not chec more than one box, unle person is both an officiand a director/trustee			ınless fficer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(226) RUTH J MCDONALD-GATES	15 00								0	
DIRECTOR		Х						0	0	0
(1) RUTH P DISMUKE-BLAKELY DIRECTOR	1 00	х						0	0	0
(2) SAAD-EL-DIN HADJ-ABDOU	10 00	x						0	0	0
DIRECTOR								Ů		
(3) SAM ROSE	5 00	x						11,600	0	0
DIRECTOR (4) SANDRA VAUGHN	4 00									
HONORARY VICE PRESIDENT		Х						0	0	0
(5) SARAH N KUNKLE	5 00	х						0	0	0
DIRECTOR EMERITUS (6) SARAH SHOEMAKE DOLES	2 00									
DIRECTOR		X						0	0	0
(7) SCOTT A MERRITT	1 00	х						0	0	0
DIRECTOR-AT-LARGE								, and the second		
(8) SCOTT R FLACH	2 00	х						0	0	0
DIRECTOR (9) SCOTT R GILTNER	2 00									
DIRECTOR		х						0	0	0
(10) SHAUN DULEY-GLOUDE	1 00	х						0	0	0
DIRECTOR (11) SHAWN T MAGEE	8 00	X						0	0	0
DIRECTOR (12) SHERRI A TEARNEY	2 00								0	
DIRECTOR (13) SID MILLER	1 00	X						0	0	0
HONORARY VICE PRESIDENT		X						0	0	0
(14) SKIP SALOME DIRECTOR EMERITUS	2 00	х						0	0	0
(15) STARLET HUNT	1 00	Х						0	0	0
DIRECTOR (16) STEPHEN D FISCH DVM	2 00	X						0	0	0
DIRECTOR (17) STEPHEN J KLEBERG	1 00							_	-	
PAST PRESIDENT		х						0	0	0
(18) STEVE MEADOWS	5 00	х						2,000	0	0
(19) STEVE SCHIESTEL	1 00	х						0	0	0
DIRECTOR (20) STEVEN CLAY OSBORNE DVM	15 00	Х						0	0	0
DIRECTOR (21) STUART J SPROUSE	1 00	X						0	0	0
DIRECTOR EMERITUS (22) SUE O HAGERTY	1 00									
DIRECTOR		×						0	0	0
(23) SUZY JEANE DIRECTOR-AT-LARGE	1 00	х						0	0	0
(24) THOMAS M DOWNING	3 00	x						0	0	0
DIRECTOR								<u> </u>		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (A) (B) (C) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the 2/1099-MISC) for related 2/1099-MISC) organization and Former Individual trustee or director Office Highest compensated employee organizations Institutional related below organizations employee dotted line) Trustee (251) TOM BIVINS 1.00 Χ 0 0 0 (1) TOM MCBEATH 5 00 0 0 Х 0 DIRECTOR (2) TOM R LENZ DVM 1 00 Х n 0 ٥ HONORARY VICE PRESIDENT (3) TOMMY HAYS DR 1 00 0 Χ 0 0 DIRECTOR (4) TRAVIS DOBBS Х 0 0 0 (5) TYLER GRAHAM 1 00 Χ 0 0 0 DIRECTOR (6) ULLRICH VEY 2 00 Χ 0 0 0 DIRECTOR-AT-LARGE (7) VALERIE CLARK 5 00 Χ 0 0 0 DIRECTOR (8) VAUGHN M COOK 8 00 Χ 0 0 0 DIRECTOR-AT-LARGE (9) VINCENT P GENCO 2 00 Х 0 0 0 DIRECTOR (10) W A BURWASH DVM 2.00 0 ٥ ٥ Х DIRECTOR (11) W MICHAEL JUNG 2 00 0 0 0 Х (12) W R 'ROSS' BRIGDEN 1 00 Х 0 0 0 DIRECTOR (13) WALT KNORPP 4 00 Χ 0 0 0 DIRECTOR-AT-LARGE (14) WALTER FLETCHER 2 00 Χ 0 0 0 PAST PRESIDENT (15) WANDA WATERS 2 00 0 0 0 Χ HONORARY VICE PRESIDENT (16) WAYNE HALVORSON 5.00 Χ 0 0 0 DIRECTOR-AT-LARGE (17) WILLIAM CROUCH 2.00 Х 0 0 0 DIRECTOR EMERITUS (THROUGH DECEMBER 2014) (18) WILLARD B NORDICK 1 00 0 0 Х 0 DIRECTOR EMERITUS (19) WILLIAM R HORTON 1 00 Χ 0 0 0 DIRECTOR (20) CRAIG HUFFHINES 55 00 Χ 0 0 0 EXECUTIVE VICE PRESIDENT 5 00 (21) TRENTON TAYLOR 50 00 Χ 226,789 0 19,795 CHIEF OPERATING OFFICER & TREASURER 10 00 (22) DONALD TREADWAY 30.00 Х 364,188 0 20,216 EVP (THROUGH MARCH 2015) & STRATEGIC PLANNING 10 00 DIR (23) TOM PERSECHINO 50 00 168,881 0 10,617 Χ EXECUTIVE DIRECTOR OF COMPETITION AND BREED

40 00

10 00

Х

225,957

0

22,199

INTEGR

(24) ROBERT PIERCE

GENERAL COUNSEL

SENIOR DIRECTOR OF RACING

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not chec more than one box, unle person is both an offic and a director/trustee			ınless fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(276) WILLIAM 'ALEX' ROSS SENIOR DIRECTOR OF JUDGES	40 00					х		224,143	0	23,591
(1) PHIL JONES SENIOR DIRECTOR OF INFORMATION TECHNOLOGY	45 00					х		148,391	0	25,342
(2) KAREN LATTA DIRECTOR OF MARKETING & PUBLICATION OPERATIONS	45 00 10 00					х		126,520	0	9,659
(3) RICHARD BUCK	40 00					х		110,765	0	10,526

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DLN: 93493216000356

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

ame of the organization MERICAN OUARTER HORSE ASSOCIATION		Employer ide	ntification number
TENTEAN QUANTER HORSE ASSOCIATION		75-0725576	5
organizations Maintaining Donor A organization answered "Yes" to Form 9	90, Part IV, line 6.	Funds or Acc	ounts. Complete if th
	(a) Donor advised funds	(b) Fund	s and other accounts
Total number at end of year			
Aggregate value of contributions to (during year)			
Aggregate value of grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor adv funds are the organization's property, subject to the		onor advised	┌ Yes ┌ No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the bell conferring impermissible private benefit?			e □ Yes □ N o
rt II Conservation Easements. Complete	of the organization answered "Yes"	to Form 990. F	Part IV. line 7.
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat. Preservation of open space Complete lines 2a through 2d if the organization held easement on the last day of the tax year.	on or education) Preservation of a	an historically im a certified historic n the form of a coi	structure
easement on the last day of the tax year		Hold	at the End of the Year
Total number of conservation easements		2a	at the End of the Year
	5		
Total acreage restricted by conservation easements		2b	
Number of conservation easements on a certified hi	• •	2c	
Number of conservation easements included in (c) a historic structure listed in the National Register	acquired after 8/1 //06, and not on a	2d	
the tax year ► Number of states where property subject to conserv			
Does the organization have a written policy regarding enforcement of the conservation easements it holds	;?		☐ Yes ☐ No
Staff and volunteer hours devoted to monitoring, ins	pecting, and enforcing conservation eas	ements during the	e year
A mount of expenses incurred in monitoring, inspect * \$	ing, and enforcing conservation easemei	nts during the yea	ır
Does each conservation easement reported on line and section $170(h)(4)(B)(II)$?	2(d) above satisfy the requirements of s	ection 170(h)(4)((B)(ı)
In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financ	•	•
Complete if the organization answered	"Yes" to Form 990, Part IV, line 8.		
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide, in Part XIII, the text of the footnot	ssets held for public exhibition, education	n, or research in f	
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide the following amounts relating to the	ssets held for public exhibition, education		
(i) Revenue included in Form 990, Part VIII, line 1		► \$.	
(ii) Assets included in Form 990, Part X		► \$	
If the organization received or held works of art, his following amounts required to be reported under SFA			, provide the

Revenue included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part	Organizations Maintaining Collections of Art	, His	tori	cal T	reası	ires, or Oth	er Sim	ilar Ass	ets (co	ontinued)
3	Using the organization's acquisition, accession, and other record collection items (check all that apply)	ds, ch	neck	any of	the foll	lowing that are	a sıgnıfı	cant use o	of its	
а	Public exhibition	d	Γ	Loan	orexc	hange progran	าร			
b	Scholarly research	e	Γ	Othe	r					
c	Preservation for future generations									
4	Provide a description of the organization's collections and expla Part ${\tt XIII}$	ın hov	w the	y furth	er the (organızatıon's	exempt	purpose in		
5	During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as						ımılar	Г	Yes	□ No
Par	ESCROW and Custodial Arrangements. Comple	ete ıf	the	organ	ızatıo		'Yes" to			, 140
	Part IV, line 9, or reported an amount on Form 99 Is the organization an agent, trustee, custodian or other interme					or other assets	s not			
b	included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the	follov	vina t	able				J	Yes	No
_	11 100, explain the unungement in a ut x111 and complete the	101101	,,,,,	u Di C				Amo	ount	
c	Beginning balance					10	:			
d	Additions during the year					1d				
e	Distributions during the year					1e	:			
f	Ending balance					1f				
2a	Did the organization include an amount on Form 990, Part X, line	e 21,	for e	scrow	orcust	odial account	liability?	. Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII Check here if the	evnl	anati	on has	heen r	orovided in Par	+ XIII			Г
Par	t V Endowment Funds. Complete if the organization								• •	
	(a)Current year) Prior			wo years back ((e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current year end balance	ce (lın	e 1g	, colun	nn (a))	held as				
а	Board designated or quasi-endowment ►									
b	Permanent endowment ▶									
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100%									
За	Are there endowment funds not in the possession of the organization	ation	that	are hel	d and a	admınıstered fo	or the			
	organization by (i) unrelated organizations							25/1	Yes	No
	(ii) related organizations		•		•			. 3a(i)		
ь	If "Yes" to 3a(II), are the related organizations listed as required	· · d on S	Sched	· · Iule R?	٠			. 3b	+	<u> </u>
4	Describe in Part XIII the intended uses of the organization's en								<u> </u>	
Par	Land, Buildings, and Equipment. Complete if t 11a. See Form 990, Part X, line 10.	the o	rgan	ızatıo	n ansv	wered 'Yes' t	o Form	990, Par	t IV, lı	ne
	Description of property			Cost oi		(b)Cost or othe basis (other)		ccumulated preciation	(d) B	ook value
1a l	and					197,52	29			197,529
ЬE	Buildings					6,827,88	36	4,671,036		2,156,850
c 1						T				
	easehold improvements	•	L_						<u> </u>	
d E	quipment	•				11,796,55	57	7,529,276		4,267,281
d E		X colu	ump /	B) lino	10(c)		57	7,529,276	,	4,267,281 6,621,660

Part VII Investments—Other Securities. Con See Form 990, Part X, line 12.	nplete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category	(b) Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other		_
(A) PARTNERSHIP INVESTMENTS	2,565,234	C
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	2,565,234	
Part VIII Investments—Program Related. Co		ı answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organization (a) Descri		, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
(4) 50000	ption	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1.	5.)	
Part X Other Liabilities. Complete if the orga	inization answered 'Yes' to	Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
Federal income taxes	(=) = = = = = =	
MINIMUM PENSION LIABILITY	4,018,837	
]	
	1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	4,018,837	

Part		evenue per Audited Financial Statements With Revenue p vered 'Yes' to Form 990, Part IV, line 12a.	er Re	eturn Complete if
1		r support per audited financial statements	1	
2		t not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) o	· · · · · · · · · · · · · · · · · · ·		
b	Donated services and use of fa	acilities	1 !	
С	Recoveries of prior year grants	3	1 !	
d	Other (Describe in Part XIII)		1 !	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1 .		3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1		
а	Investment expenses not incli	uded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	4b	1	
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line 12)	5	
Part		xpenses per Audited Financial Statements With Expenses	per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line 12a.		
1	·	audited financial statements	1	
2		t not on Form 990, Part IX, line 25		
а		icilities	4	
Ь	·		4	
С	Other losses	 	_	
d	Other (Describe in Part XIII)		4	
е	Add lines 2a through 2d		2e	
3			3	
4		O, Part IX, line 25, but not on line 1:		
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b 4a	_	
b	Other (Describe in Part XIII)		_	
С			4c	
5		nd 4c. (This must equal Form 990, Part I, line 18)	5	
	XIII Supplemental Inf			
		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		le any additional
	nation	, , , , , , , , , , , , , , , , , , , ,	<u> </u>	,
	Return Reference	Explanation		
PART :	X, LINE 2	AQHA IS QUALIFIED UNDER SECTION 501 OF THE INTERNAL REVE		CODE (IRC),
	,	THEREFORE, THE MAJORITY OF ITS INCOME IS EXEMPT FROM FED	ERALI	INCOME TAX UNDER
		THE PROVISIONS OF SECTION 501(C)(5) INCOME FROM CERTAIN PRIMARILY ADVERTISING IN ITS PUBLICATIONS, IS TAXABLE FOR		
		PURPOSES FOR THE YEARS ENDED SEPTEMBER 30, 2015 AND 201		
		ANY FEDERAL INCOME TAX EXPENSE ALL OTHER OPERATIONS OF	-	
		FEDERAL INCOME TAX AQHF CLAIMS EXEMPTION FROM FEDERAL SECTION 501(C)(3) OF THE IRC AND IS RECOGNIZED AS A PUBLIC		
		SECTION 509(A)(3) OF THE IRC AQHA'S WHOLLY OWNED SUBSIDI	ARY R	GP WAS CONVERTED
		TO A LIMITED LIABILITY COMPANY ON JUNE 3, 2014, AND IS THE		
		DISREGARDED ENTITY FOR TAX PURPOSES AS SEPTEMBER 30, 201 ADDITIONAL TAX FILINGS PER THE IRC FINANCIAL ACCOUNTING		
		(FASB) PROVIDES GUIDANCE FOR HOW UNCERTAIN TAX POSITION		
		RECOGNIZED, MEASURED, DISCLOSED AND PRESENTED IN THE FI THIS REQUIRES THE VALUATION OF TAX POSITIONS TAKEN OR E		
		THE COURSE OF PREPARING THE ASSOCIATION'S TAX RETURN TO		
		THE TAX POSITIONS ARE "MORELIKELYTHANNOT" OF BEING SUST		
		CHALLENGED OR "WHEN EXAMINED" BY THE APPLICABLE TAX AUT NOT DEEMED TO MEET THE MORELIKELYTHANNOT THRESHOLD WO		
		TAX BENEFIT OR EXPENSE AND LIABILITY IN THE CURRENT YEAR		
		DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN INCOM	ETAX	POSITIONS

Jenedale 2 (1 31111 33 3) 23 13		i age S
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493216000356

2014

OMB No 1545-0047

SCHEDULE F (Form 990)

Name of the organization

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

► Attach to Form 990.

Department of the Treasury
Internal Revenue Service

► Informatio

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

Open to Public Inspection

Employer identification number

A 84 F	TO OF THE OFGUNERATION	CIATION			Limployer lucit	ii icacion nambei
AME	ERICAN QUARTER HORSE ASSO	CIATION			75-0725576	
Pa	General Information "Yes" to Form 990, Pai	n on Activitie t IV, line 14b.	es Outside th	ne United States. Co	mplete if the organiz	ation answered
1	For grantmakers. Does the d			s to substantiate the a	mount of its grants	
	and other assistance, the gra	ıntees' eligibili	ty for the gran	its or assistance, and t	the selection criteria	
	used to award the grants or a	assistance?				✓ Yes
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitorir	ng the use of its grant	ts and other
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ce is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2	2)					
(3)					
(4)					
(5	7)					
3	a Sub-total	0	0			466,916
	b Total from continuation sheets to Part I	0	0			348,470
	c Totals (add lines 3a and 3b)	0	0			815,386

	- · · · · · · · · · · · · · · · · · · ·
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, rec	ognized	d a
	tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter		

36

32

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

(CAN MEX: (2) WORLD SHOW SOU (3) WORLD SHOW EURG (INC ICEL GREE) (4) WORLD SHOW EAST PAC: (5) INCENTIVE FUND EURG (INC ICEL GREE) (6) INCENTIVE FUND NOR (CAN MEX: (7) INCENTIVE FUND EAST PAC: (8) RACING CHALLENGE NOR (CAN (CAN (CAN (CAN (CAN (CAN (CAN (CAN	DRTH AMERICA ANADA AND EXICO) DUTH AMERICA JROPE NCLUDING ELAND AND REENLAND) AST ASIA AND THE ACIFIC JROPE NCLUDING	32 9 3	4,185	CHECKS AND WIRES CHECKS AND WIRES CHECKS AND WIRES	5,115	BUCKLES, JACKETS, TROPHIES, ETC BUCKLES, JACKETS, TROPHIES, ETC	appraisal, other) COST COST
(3) WORLD SHOW (3) WORLD SHOW (1NC) (4) WORLD SHOW EAST PACT (5) INCENTIVE FUND (1NC) (1CEL) GREE (6) INCENTIVE FUND NOR (CAN) MEX. (7) INCENTIVE FUND EAST PACT (8) RACING CHALLENGE (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN) (CAN)	JROPE NCLUDING ELAND AND REENLAND) AST ASIA AND THE	3	ŕ				COST
(INC ICEL GREE PACE) (4) WORLD SHOW EAST PACE (5) INCENTIVE FUND EURO (INC ICEL GREE PACE) (6) INCENTIVE FUND NOR (CAN MEXE) (7) INCENTIVE FUND EAST PACE (8) RACING CHALLENGE NOR (CAN (CAN (CAN (CAN (CAN (CAN (CAN (CAN	NCLUDING ELAND AND REENLAND) AST ASIA AND THE ACIFIC JROPE		917	CHECKS AND WIRES	405		
(4) WORLD SHOW EAST PACT (INC ICEL GREE (A) INCENTIVE FUND NOR (CAN MEXT) (7) INCENTIVE FUND EAST PACT (CAN (CAN (CAN (CAN (CAN (CAN (CAN (CAN	AST ASIA AND THE ACIFIC JROPE	3	·			BUCKLES, JACKETS, TROPHIES, ETC	COST
(INC ICEL GREE GREE (6) INCENTIVE FUND NOR (CAN MEX) (7) INCENTIVE FUND EAST PAC: (8) RACING CHALLENGE NOR (CAN		·	0			BUCKLES, JACKETS, TROPHIES, ETC	COST
(CAN MEX. (7) INCENTIVE FUND EAST PAC. (8) RACING CHALLENGE NOR (CAN	ELAND AND REENLAND)	97		CHECKS AND WIRES			
(8) RACING CHALLENGE NOR	ORTH AMERICA ANADA AND EXICO)	251		CHECKS AND WIRES			
(CAN	AST ASIA AND THE ACIFIC			CHECKS AND WIRES			
	ORTH AMERICA ANADA AND EXICO)	17	ŕ	CHECKS AND WIRES			
(9) RACING CHALLENGE SOU	OUTH AMERICA	1	320	CHECKS AND WIRES			
CAR	ND THE ARIBBEAN	1				BUCKLES	COST
	ACIFIC					BUCKLES	COST
ICEL GREI	NCLUDING ELAND AND REENLAND)	35				BUCKLES	COST
NOR	IDDLE EAST AND DRTH AFRICA	1				BUCKLES	COST
(14) ROOKIE OF THE YEAR SOU		5			769	BUCKLES	COST
	JB-SAHARAN FRICA	1			154	BUCKLES	COST
CHAMPIONSHIP (CAN	ORTH AMERICA ANADA AND EXICO)	5	0			BUCKLES, JACKETS, TROPHIES, ETC	COST
CHAMPIONSHIP PAC	AST ASIA AND THE ACIFIC	17	0			BUCKLES, JACKETS, TROPHIES, ETC	COST
(18)		1	, I	!	!		

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	[~	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	▽	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	ত	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	~	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	V	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	্ন	Νo

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5**

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	ACHA BUSINESS PLAN FUNDING - THE AMERICAN QUARTER HORSE ASSOCIATION PROVIDES FUNDING TO IT S INTERNATIONAL AFFILIATES BASED ON MEMBERSHIP AND HORSE POPULATION THIS FUNDING IS USED FOR THE PROMOTION OF THE QUARTER HORSE IN THE AFFILIATE COUNTRY AND MUST BE ACCOUNTED FOR BY SENDING COPIES OF EXPENDITURES AND EXAMPLES OF PROMOTION INCENTIVE FUND. IS A PROGRAM WHEREBY AQHA-NOMINATED SHOW PARTICIPANTS AND BREEDERS WIN CASH PRIZES BASED ON TOTAL POINT S ACCUMULATED DURING EACH SHOW YEAR IN ORDER TO BE ELIGIBLE, BREEDERS MUST PAY NOMINATION FEES FOR THEIR STALLIONS AND FOALS THE NOMINATION FEES AND THE RELATED INVESTMENT INCOME REPRESENT THE SOURCE OF FUNDS FOR THE CASH PRIZES AWARDED NOMINATED STALLIONS AND FOALS ARE ELIGIBLE TO RECEIVE PAY MENTS FROM THE INCENTIVE FUND BASED ON TOTAL SHOW POINTS EARNED DURING THE PREVIOUS YEAR RACING CHALLENGE PROGRAM - IS AN INCENTIVE-TYPE PROGRAM OPEN TO ALL REGISTERED AMERICAN QUARTER HORSE FOALS THE RACING CHALLENGE RECEIVES FUNDS FROM IND VIDUALS FOR THE NOMINATION OF THEIR HORSES NOMINATIONS RECEIVED ARE USED TO SUPPLEMENT P URSE AWARDS AT CHALLENGE RACES AND ARE PAID TO THE NOMINATORS AND OWNERS AS BONUS AWARDS RACE ENTRY FEES ARE RECEIVED FROM INDIVIDUALS TO ENTER A CHALLENGE RACE AND ARE ADDED TO THE PURSE AWARDS AS WELL WORLD SHO WS - THE WORLDS BEST AMERICAN QUARTER HORSES MEET EACH YEAR FOR THE CHANCE TO BECOME A WORLD CHAMPION AND SHARE IN CASH AND AWARDS FROM HALTER TO REINING AND JUMPING TO TRAIL, THE FORD YOUTH WORLD SHOW IS HELD IN AUGUST AND THE AMATEUR AND OPEN AQHA WORLD CHAMPIONSHIP SHOW ARE HELD EACH NOVEMBER IN OKLAHOMA CITY. THE ADEQUAN SELECT SHOW IS HELD IN AUGUST IN AMARILLO AND THE ZOETIS VERSATILITY RANCH HORSE WORLD CHAMPIONSHIP IS HELD IN HOUSTON EACH HAMPON THE ZOETIS VERSATILITY RANCH HORSE WORLD CHAMPIONSHIP IS HELD IN HOUSTON EACH HAMPON THE EACH EVENT IS FOR THOSE WHO LOVE AND APPRECIATE THE ATHLETIC ABILITY AND BE AUTY OF THE AMERICAN QUARTER HORSE AND WANT TO SHOWCASE THE BEST IN EACH CLASS.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3	AMERICAN QUARTER HORSE ASSOCIATION REQUIRES THE USE OF QUERIES OF OUR ACCOUNTING SYSTEM TO IDENTIFY FOREIGN EXPENDITURES IN OUR FINANCIAL STATEMENTS REVEALING THE SOURCE AND GEOGRA PHIC ORIGIN OF THOSE EXPENDITURES EXPENDITURES ARE BASED UPON THE ACCRUAL METHOD OF ACCOUNTING

Additional Data

Software ID: Software Version:

EIN: 75-0725576

Name: AMERICAN QUARTER HORSE ASSOCIATION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	BUSINESS PLAN	18,369
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	BUSINESS PLAN	37,719
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	BUSINESS PLAN	235,503

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	BUSINESS PLAN	7,555			
NORTH AMERICA (CANADA AND MEXICO)	0	0	PROGRAM SERVICES	BUSINESS PLAN	87,290			
SOUTH AMERICA	0	0	PROGRAM SERVICES	BUSINESS PLAN	75,120			

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	BUSINESS PLAN	5,040			
SOUTH AMERICA	0	0	PROGRAM SERVICES	RACING CHALLENGE	320			
NORTH AMERICA (CANADA AND MEXICO)	0	0	PROGRAM SERVICES	RACING CHALLENGE	10,412			

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	INCENTIVE FUND	26,346			
NORTH AMERICA (CANADA AND MEXICO)	0	0	PROGRAM SERVICES	INCENTIVE FUND	115,734			
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	INCENTIVE FUND	411			

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	ROOKIE OF THE YEAR	154			
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	ROOKIE OF THE YEAR	769			
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	ROOKIE OF THE YEAR	5,383			

Form 990 Schedule F I	Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	ROOKIE OF THE YEAR	154					
SOUTH AMERICA	0	0	PROGRAM SERVICES	ROOKIE OF THE YEAR	769					
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	ROOKIE OF THE YEAR	154					

Form 990 Schedule F F	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	EUROPEAN CHAMPIONSHIP	45,376
NORTH AMERICA (CANADA AND MEXICO)	0	0	PROGRAM SERVICES	WORLD SHOW	29,949
SOUTH AMERICA	0	0	PROGRAM SERVICES	WORLD SHOW	9,300

Form 990 Schedule F F	Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	WORLD SHOW	4,864				
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	WORLD SHOW	1,998				
SOUTH AMERICA	0	0	PROGRAM SERVICES	LATIN AMERICAN CHAMPIONSHIP	24,027				

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	YOUTH WORLD CUP	15,164			
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0		EQUITANA TRADE FAIR	14,766			
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	AMERICANA	700			

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region			
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0		HORSEMANSHIP CAMPS	38,139			
NORTH AMERICA (CANADA AND MEXICO)	0	0		EAST NOVICE CHAMPIONSHIP	872			
EAST ASIA AND THE PACIFIC	0	0		WEST NOVICE CHAMPIONSHIP	3,029			

Form 990 Schedu	le F Part II	- Grants or Entitie	es Outside The Un	ited States	_			· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	BUSINESS PLAN	1	CHECKS AND WIRES	,	TRAVEL EXPENSE AND JUDGING FEES	COST
		EAST ASIA AND THE PACIFIC	BUSINESS PLAN	· ·	CHECKS AND WIRES	,	TRAVEL EXPENSE AND JUDGING FEES	COST
		EUROPE (INCLUDING ICELAND AND GREENLAND)	BUSINESS PLAN	1	CHECKS AND WIRES	,	TRAVEL EXPENSE AND JUDGING FEES	COST
		MIDDLE EAST AND NORTH AFRICA	BUSINESS PLAN	1 '	CHECKS AND WIRES	,	TRAVEL EXPENSE AND JUDGING FEES	соѕт

Form 990 Schedu	ıle F Part II	- Grants or Entiti	es Outside The Uni	ited States	_	_	_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		NORTH AMERICA (CANADA AND MEXICO)	BUSINESS PLAN	,	CHECKS AND WIRES	·	TRAVEL EXPENSE AND JUDGING FEES	COST
		SOUTH AMERICA	BUSINESS PLAN	· · · · · · · · · · · · · · · · · · ·	CHECKS AND WIRES	·	TRAVEL EXPENSE AND JUDGING FEES	COST
		SUB-SAHARAN AFRICA	BUSINESS PLAN	· '	CHECKS AND WIRES		TRAVEL EXPENSE AND JUDGING FEES	COST
		EUROPE (INCLUDING ICELAND AND GREENLAND)	INCENTIVE PLAN	· · · · · · · · · · · · · · · · · · ·	CHECKS AND WIRES			

Form 990 Schedu	Ale F Part II	- Grants or Entiti	ies Outside The Uni	ited States	_	_	_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA (CANADA AND MEXICO)	INCENTIVE PLAN	'	CHECKS AND WIRES			
		NORTH AMERICA (CANADA AND MEXICO)	WORLD SHOW		CHECKS AND WIRES		BUCKLES, JACKETS, TROPHIES, ETC	COST
		EAST ASIA AND THE PACIFIC	WORLD SHOW	· · · · · · · · · · · · · · · · · · ·	CHECKS AND WIRES			
		EUROPE (INCLUDING ICELAND AND GREENLAND)	WORLD SHOW		CHECKS AND WIRES			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

(Form 990)

DLN: 93493216000356

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service		Open to Public Inspection					
Name of the organization	CO CIATION					Employer identificat	on number
AMERICAN QUARTER HORSE AS	SOCIATION					75-0725576	
Part I General Informat	ion on Grants an	d Assistance				•	
Does the organization mainta the selection criteria used toDescribe in Part IV the organ	award the grants or as	ssistance?					ר Yes רוֹ Yes רוֹ
			ons and Domestic more than \$5,000. Pa				es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							

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Return Reference

Explanation

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Addıtıonal Data Table					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

AFFILIATE PROGRAM - AQHA HAS PARTNERSHIPS WITH LIKE-MINDED GRASSROOTS AMERICAN QUARTER HORSE ASSOCIATIONS TO PART I. LINE 2 HELP PROMOTE THE BENEFITS OF AMERICAN QUARTER HORSE INVOLVEMENT THERE ARE 83 STATE/PROVINCIAL AQHA AFFILIATES REPRESENTING ALL FIFTY STATES AND SEVEN PROVINCES IF AN ASSOCIATION HANDLES BOTH THE RACE AND SHOW SEGMENTS OF OUR INDUSTRY, THEN AQHA HAS ONLY ONE AFFILIATE IN THAT STATE OR PROVINCE IN THE CASE WHERE THOSE SEGMENTS ARE REPRESENTED BY THEIR OWN ENTITY, THEN AQHA COULD HAVE TWO AFFILIATES IN THAT LOCATION THE AFFILIATE/AQHA PARTNERSHIP WILL UNITE AMERICAN QUARTER HORSE OWNERS, DEVELOP AND PROVIDE BENEFICIAL SERVICES FOR ALL HORSE OWNERS THAT ENHANCE AND ENCOURAGE AMERICAN QUARTER HORSE OWNERSHIP AND PARTICIPATION THE AFFILIATE/AQHA PARTNERSHIP WILL GENERATE GROWTH OF AFFILIATE MEMBERSHIP VIA THE EDUCATIONAL PROGRAMS, RECOGNITION, MONITORING PUBLIC POLICY, MARKETING, PROMOTION, AND PUBLICITY OF THE AMERICAN QUARTER HORSE THE AFFILIATE/AQHA PARTNERSHIP WILL BE THE EFFECTIVE INDUSTRY VOICE SERVING ALL AQHA MEMBERS AND HORSE OWNERS AT THE LOCAL LEVEL WITH DIVERSE PROGRAMS THAT PROMOTE THE AMERICAN QUARTER HORSE RACING COUNCIL GRANTS - IS A PROGRAM WHERE REQUESTS FOR GRANTS ARE SUBMITTED BY OUR STATE AFFILIATES FOR RACING PROMOTION INITIATIVE PURPOSES GRANTS ARE REVIEWED AND APPROVED BY OUR RACING COUNCIL INCENTIVE FUND - IS A PROGRAM WHEREBY AQHA-SANCTIONED SHOW PARTICIPANTS AND BREEDERS WIN CASH PRIZES BASED ON TOTAL POINTS ACCUMULATED DURING EACH SHOWYEAR IN ORDER TO BE ELIGIBLE, BREEDERS MUST PAY NOMINATION FEES FOR THEIR STALLIONS AND FOALS THE NOMINATION FEES AND THE RELATED INVESTMENT INCOME REPRESENT THE SOURCE OF FUNDS FOR THE CASH PRIZES AWARDED NOMINATED STALLIONS AND FOALS ARE ELIGIBLE TO RECEIVE PAYMENTS FROM THE INCENTIVE FUND BASED ON TOTAL SHOW POINTS EARNED DURING THE PREVIOUS YEAR RACING CHALLENGE PROGRAM - IS AN INCENTIVE-TYPE PROGRAM OPEN TO ALL REGISTERED AMERICAN QUARTER HORSE FOALS THE RACING CHALLENGE RECEIVES FUNDS FROM INDIVIDUALS FOR THE NOMINATION OF THEIR HORSES NOMINATIONS RECEIVED ARE USED TO SUPPLEMENT PURSE AWARDS AT CHALLENGE RACES AND ARE PAID TO THE NOMINATORS AND OWNERS AS BONUS AWARDS RACE ENTRY FEES ARE RECEIVED FROM INDIVIDUALS TO ENTER A CHALLENGE RACE AND ARE ADDED TO THE PURSE AWARD. CORPORATE SPONSORS CONTRIBUTE FUNDS TO THE PURSE AWARDS AS WELL HORSEMANSHIP GRANTS - EACH YEAR U S COLLEGE EQUESTRIAN TEAMS FILL OUT APPLICATIONS FOR GRANTS TO TRAVEL ABROAD AND TEACH HORSEMANSHIP SKILLS AND THE VALUE OR THE AMERICAN QUARTER HORSE BREED AS THE RIDE OF CHOICE THE RECIPIENTS ARE SELECTED BASED UPON THEIR APPLICATION AND THEIR TEAM COMMITMENT TO HORSEMANSHIP THE TEAMS THEN CONDUCT CLINICS IN VARIOUS EUROPEAN COUNTRIES PROMOTING THE WESTERN STYLE OF RIDING AND THE AMERICAN QUARTER HORSE STEP OR STEWARDS FOR TRAILS, EDUCATION AND PARTNERSHIPS IS A PROGRAM UNDER AQHA'S WING THAT WAS FORMERLY KNOWN AS TRAIL TROTTERS TRAIL TROTTERS WAS LAUNCHED IN NOVEMBER 2004 BY THE EQUESTRIAN LAND CONSERVATION RESOURCE IN PARTNERSHIP WITH THE NATIONAL FOREST FOUNDATION THE IDEA WAS TO BUILD A PROGRAM THAT WOULD INCREASE PARTICIPATION IN TRAIL STEWARDSHIP AMONG EQUINE ENTHUSIASTS WHILE CASTING A POSITIVE LIGHT ON HORSEBACK RIDERS TO LAND MANAGERS AND OTHER TRAIL USERS THIS PROGRAM PROMOTES EQUESTRIAN INVOLVEMENT IN THE RESTORATION, REPAIR, AND ESTABLISHMENT OF TRAILS AND TRAILHEADS ON NATIONAL TRAILS DAY, WHICH HAS BEEN HELD EVERY JUNE SINCE 1992 AND HAS BEEN EXPANDED TO INCLUDE THE ENTIRE MONTH OF JUNE IN CONJUNCTION WITH GREAT OUTDOORS MONTH EQUESTRIAN GROUPS AND INDIVIDUALS ARE ENCOURAGED TO PARTICIPATE IN TRAIL MAINTENANCE AND RESTORATION PROJECTS A NATIONAL STEWARDSHIP AWARD IS GIVEN EACH YEAR TO A GROUP OR ORGANIZATION WHOSE PROJECT PROVES COMMENDABLE THROUGH COMMUNITY INVOLVEMENT AND SUSTAINABILITY WORLD SHOWS - THE WORLD'S BEST AMERICAN QUARTER HORSES MEET EACH YEAR FOR THE CHANCE TO BECOME A WORLD CHAMPION AND SHARE IN CASH AND AWARDS FROM HALTER TO REINING AND JUMPING TO TRAIL, THE FORD YOUTH WORLD SHOW IS HELD IN AUGUST AND AMATEUR AND OPEN AQHA WORLD CHAMPIONSHIP SHOW ARE HELD EACH NOVEMBER IN OKLAHOMA CITY THE ADEQUAN SELECT SHOW IS HELD IN AUGUST IN AMARILLO AND THE ZOETIS VERSATILITY RANCH HORSE WORLD CHAMPIONSHIP IS HELD IN HOUSTON EACH MARCH ENTRIES ARE BY INVITATION ONLY BASED UPON COMPETITION IN THE 2,400 APPROVED AQHA SHOWS A PANEL OF JUDGES EVALUATES EACH CLASS TO DETERMINE THE BEST CHOICE FOR THE WORLD CHAMPION TITLE EACH EVENT IS FOR THOSE WHO LOVE AND APPRECIATE THE ATHLETIC ABILITY AND BEAUTY OF THE AMERICAN QUARTER HORSE AND WANT TO SHOWCASE THE BEST IN EACH CLASS

Additional Data

Software ID:

Software Version:

EIN: 75-0725576

Name: AMERICAN QUARTER HORSE ASSOCIATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF KINGS MTN STATE PARK117 MICHAEL JAMES RD GAFFNEY,SC 29340	26-4113234	501(C)(3)	6,000	0			STEP PROGRAM GRANT
SPORTSMAN LAKE DEVELOPMENT COMMISSIONPO BOX 979 SEMINOLE,OK 74818	73-6005421		5,825	0			STEP PROGRAM GRANT
MISSOURI QUARTER HORSE ASSN801 DOC HENRY RD GREENWOOD,MO 64034	43-1142390	501(C)(5)	10,000	0			AFFILIATE ACHIEVEMENT AWARD GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DELAWARE QUARTER HORSE ASSOCIATION5529 DOG KENNEL RD RHODESDALE, MD 21659	51-0272690	501(C)(3)	10,000	0			AFFILIATE ACHIEVEMENT AWARD GRANT		
WASHINGTON STATE QUARTER HORSE ASSNPO 1010 MCKENNA, WA 98558	31-1467592	501(C)(5)	10,000	0			AFFILIATE ACHIEVEMENT AWARD GRANT		
SAM HOUSTON STATE UNIVERSITY1831 UNIVERSITY DRIVE HUNTSVILLE,TX 77340	74-6001430		20,000	0			HORSEMANSHIP GRANT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LOUISIANA STATE UNIVERSITYOFFICE OF ACCOUNTING SERVICES BATON ROUGE, LA 70803	72-6000848	115	12,500	0			HORSEMANSHIP GRANT		
MIDDLE TENNESSEE STATE UNIVERSITY1301 EAST MAIN STREET MURFREESBORO,TN 37132	62-6005794	115	12,500	0			HORSEMANSHIP GRANT		
KANSAS QUARTER HORSE RACING ASSOCIATION 19001 NALL AVE STILWELL, KS 66085	48-0689151	501(C)(5)	15,000	0			RACING COUNCIL GRANT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FLORIDA QUARTER HORSE RACING ASSOCIATION 9085 MAGNOLIA HILL DR TALLAHASSEE,FL 32309	43-2098089	501(C)(6)	47,000	0			RACING COUNCIL GRANT		
RESEARCH MEDICATION AND TESTING CONSORTIUM821 CORPORATE DRIVE LEXINGTON,KY 40503	72-1559413	501(C)(3)	50,000	0			EQUINE RESEARCH GRANT		
UNIVERSITY OF ARIZONA FND RTIP1111 N CHERRY AVE TUCSON,AZ 85271	86-6050388	501(C)(3)	6,000	0			RACING COUNCIL SPONSORSHIP		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
RACING OFFICIALS ACCREDITATION PROGRAM821 CORPORATE DRIVE LEXINGTON, KY 40503	20-4137857	501(C)(6)	10,000	0		1	RACING COUNCIL CONTRIBUTION		
DEAN R & DARRELL L FREY 10770 VIA JACARA STANTON,CA 90680	33-0514806		6,785	0			RACE CHALLENGE		
CORNER K QUARTER HORSES LLC3015 E JOYCE BLVD FAYETTEVILLE,AR 72703	34-2429339		6,851	0			RACE CHALLENGE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BURNETT RANCHES LLC 801 CHERRY ST FORT WORTH,TX 76102	26-1613545		11,577	0			RACE CHALLENGE		
FRITZ LEEMAN13900 KIMMENS RD SW MASSILLON,OH 44647	80-0114031		9,228	0			WORLD SHOW		
CHESTER W PRINCE5411 WILLIS RD PALMETTO,FL 34221	72-3939347		6,997	0			WORLD SHOW		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GREGG LAFITTE3838 OAK LAWN STE 500 DALLAS,TX 75219	75-2949309		7,091	820		BUCKLES, TROPHIES, JACKETS, ETC	WORLD SHOW		
WT WAGGONER ESTATEPO BOX 2130 VERNON,TX 76385	75-0634500		5,177	8,132		BUCKLES, TROPHIES, JACKETS, ETC	WORLD SHOW		
EE RANCHES OF TEXAS INCPO BOX 802207 DALLAS,TX 75380	75-2145083		9,988	0			WORLD SHOW		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CENTER RANCH3582 FM 811 CENTERVILLE,TX 75833	26-0363099		8,623	0			WORLD SHOW		
CHARLIE COLE & JASON MARTIN11015 COLE RD PILOT POINT,TX 76258	26-2136363		5,779	590		BUCKLES, TROPHIES, JACKETS, ETC	WORLD SHOW		
ROGERS HEAVEN SENT RANCH8526 E TANQUE VERDE RD TUCSON,AZ 85749	46-0519722		5,427	359		BUCKLES, TROPHIES, JACKETS, ETC	WORLD SHOW		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BELLE MEADE RANCH QH OWNERS5469 NIWOT RD LONGMONT,CO 80503	74-3187761		7,894	180		BUCKLES, TROPHIES, JACKETS,ETC	WORLD SHOW			
RDJ QUARTER HORSES LLC 5280 NC HIGHWAY 127 TAYLORSVILLE, NC 28681	20-3597322		11,506	410		BUCKLES, TROPHIES, JACKETS,ETC	WORLD SHOW			
SILVER SPURS EQUINE 14445 E QUAIL TRACK RD SCOTTSDALE, AZ 85262	20-3986003		12,384	0			WORLD SHOW			

Form 990,Schedule I, Par	Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
EE RANCHES INCPO BOX 829 WHITESBORO,TX 76273	75-2145083		8,084	359		BUCKLES, TROPHIES, JACKETS, ETC	WORLD SHOW				
COX TRINITY EQUINE LLC PO BOX 16606 LUBBOCK,TX 79490	75-2432345		10,060	0			WORLD SHOW				
CHARLOTTE FARMS INCPO BOX 27 ROSSTON,TX 76263	43-1407249		12,574	0			WORLD SHOW				

<u>Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
KNAPP QUARTER HORSE FARMS LC 26413 360TH ST VAN METER, IA 50261	87-0541387		7,382	410		BUCKLES, TROPHIES, JACKETS,ETC	WORLD SHOW					
CAPITAL QUARTER HORSES LLC11320 SAINT JOHN RD PILOT POINT,TX 76258	45-3327294		15,390	410		BUCKLES, TROPHIES, JACKETS,ETC	WORLD SHOW					
ROCKIN' K REMUDA LLC 5025 COUNTY ROAD R DUMAS,TX 79029	45-4970798		11,747	0			WORLD SHOW					

Form 990,Schedule I, Pa	<u>rt II, Grants ar</u>	<u>ıd Other Assistanc</u> e	<u>e to Domestic Org</u>	<u>anizations and Do</u>	mestic Governmer	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AARON RANCH5983 COUNTY ROAD 4400 COMMERCE,TX 75428	27-2887518		5,427	359		BUCKLES, TROPHIES, JACKETS, ETC	WORLD SHOW
ROCKING J RANCH INC 1533 RANCHO AVE GLENDALE,CA 91201	96-0463481		10,659	590		BUCKLES, TROPHIES, JACKETS, ETC	WORLD SHOW
DAROL OR KAREN RODROCKPO BOX 25390 OVERLAND PARK, KS 66225	48-0959125		5,104	0			INCENTIVE

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ROBBIE & JOAN SCHROEDER6736 HIGHWAY 82 GAINESVILLE,TX 76240	75-2963729		5,835	0			INCENTIVE			
KENNETH & MARILYN MASTERSON400 UNION DR SOMERVILLE,TN 38068	62-1679726		8,493	0			INCENTIVE			
BRICKHAM QUARTER HORSES LLC3265 WALDEN LN OSHKOSH,WI 54904	39-2032366		6,796	0			INCENTIVE			

<u>Form 990,Schedule I, Par</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
STANLEY OR SUSAN SCOTT LLC10624 NW HIGHWAY 225A OCALA,FL 34482	57-1144177		5,497	0			INCENTIVE					
GALLOPING B RANCH LLC 3554 NE DEER CREEK RD TURNEY,MO 64493	45-1762288		5,656	0			INCENTIVE					
JEREMY PLONKPO BOX 41 MILNESVILLE,PA 18239	26-1729812		8,000	0			SPONSORSHIP					

<u> Form 990,Schedule I, Par</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
AMERICAN QUARTER HORSE FOUNDATIONPO BOX 32111 AMARILLO,TX 79120	51-0187823	501(C)(3)	7,059	0			MUSEUM OPERATIONS, EQUINE RESEARCH, YOUTH SCHOLARSHIPS				
RANCHO OSO RIO LLC 14241 E RIO VERDE DR SCOTTSDALE,AZ 85262	06-1735243		5,124	0			WORLD SHOW				

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
WORLD SHOW	626	1,513,882	1,823,569	COST	BUCKLES, SADDLES, TROPHIES
RACING CHALLENGE	165	186,743	0		
INCENTIVE FUND	3213	1,497,592	0		
AQHA PROMOTION AND SPONSORSHIP AWARDS	26691	9,206	319,842	COST	BAGS, BLANKETS, CAPS, CERTIFICATES, JACKETS, PATCHES, PENS, RINGS, ETC
TEAM WRANGLER/CHAMPIONSHIP AND ROOKIE WINNERS	539	56,500	338,478	cost	BUCKLES, TROPHIES, JACKETS, VESTS, ETC
VERSATILITY RANCH HORSE	20	48,459	23,216	cost	BUCKLES, TROPHIES, ETC
EAST NOVICE CHAMPIONSHIP	364	23,835	84,517	COST	BUCKLES, TROPHIES, ETC
WEST NOVICE CHAMPIONSHIP	346	21,767	84,881	COST	BUCKLES, TROPHIES, ETC
CATTLE NOVICE CHAMPIONSHIP	95	12,975	33,412	COST	BUCKLES, TROPHIES, ETC
WORLD CHAMPION RACE HORSE	1	10,000			
ALL AROUND AMATEUR	1	10,000			
ALL AROUND HIGH POINT JUNIOR	1	10,000			
ALL AROUND HIGH POINT SENIOR	1	10,000			
2014 ALL AROUND HIGH POINT	1	10,000			
2014 RESERVE ALL AROUND HIGH POINT	1	5,000			

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OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN QUARTER HORSE ASSOCIATION

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

Employer identification number

75-0725576

Pai	t I Questions Regarding Compensatio	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					_
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	▼ Travel for companions	Γ	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	I→	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses do			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe				V	
	and colors, crastees, officers, metading the GES/EXC	cutive D	meetor, regarding the realist effected in line 14	2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all ti used by a related organization to establish compens	hat apply				
	▼ Compensation committee	Γ	Written employment contract			
	☐ Independent compensation consultant	ᅜ	Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		No
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	tions mu	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of					
а	The organization?			5a		
ь	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		
8	Were any amounts reported in Form 990, Part VII,	paid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in	n Regula	tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 TRENTON TAYLOR, CHIEF OPERATING OFFICER & TREASURER	(i) (ii)	210,945 0	0	15,844	0	19,795	246,584	0
- DONALD TREADWAY EVE	(i) (ii)	298,719	4,346	61,123	0	20,216	384,404	0
3 TOM PERSECHINO, EXECUTIVE DIRECTOR OF COMPETITION AN	(i) (ii)	157,606 0	0	11,275	0	10,617	179,498 0	0
4 ROBERT PIERCE, GENERAL COUNSEL	(i) (ii)	218,864	0	7,093 0	12,128	10,071	248,156 0	0
5 WILLIAM 'ALEX' ROSS, SENIOR DIRECTOR OF JUDGES	(i) (ii)	152,761 0	10,933	60,449	10,136	13,455	247,734 0	0
6 PHIL JONES, SENIOR DIRECTOR OF INFORMATION TECHN	(i) (ii)	146,082 0	0	2,309	9,323	16,019	173,733	0

Schedule J (Form 990) 2014

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

The state of the s	
Return Reference	Explanation
	FIRST-CLASS TRAVEL FOR EXECUTIVE COMMITTEE MEMBERS IS NOT REPORTED AS TAXABLE COMPENSATION AS THE ORGANIZATION UTILIZES UPGRADES THROUGH AIRLINE REWARD PROGRAMS AFTER PURCHASING COACH FARES SPOUSAL TRAVEL IS OFFERED TO EXECUTIVE COMMITTEE MEMBERS ONLY SPOUSES ARE REQUIRED TO ATTEND MEETINGS AND FUNCTIONS AND THEIR TIME IS DEDICATED TO ASSOCIATION ACTIVITIES WHILE TRAVELING, THEREFORE SPOUSAL TRAVEL IS NOT TAXABLE TO THE INDIVIDUAL THE ORGANIZATION DOES REPORT TAX INDEMNIFICATIONS AND GROSS-UP PAYMENTS FOR ALEX ROSS AND DONALD TREADWAY AND DOES INCLUDE THEM IN TAXABLE COMPENSATION THE ORGANIZATION PAYS FOR HEALTH/SOCIAL CLUB DUES FOR THE EVP AND INCLUDES IT IN HIS TAXABLE COMPENSATION

Schedule J (Form 990) 2014

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OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

MERICAN QUARTER HORSE A art I Excess Bene Complete if the							Employer identification number						
	330CIAI 10IV						75	5-072	5576				
Complete if the													
1 (a) Name of disqua	alified perso			o between dis nd organizati		(c) Descri	ption (of tran	saction	-	(d) Corr		
			7C13011 a1	na organizaci	-					+	Yes	No	
Enter the amount of the 4958	tax, if any,	on line 2, abo	ve, reim	bursed by the	• • • e organizatior			•	▶ \$				
omplete if the organiza eported an amount on F i) Name of nterested person (b) Relat with organization with organization in the organization in	orm 990, P		6, or 22	an to n the	(e) Original principal amount	(f) Balance due	(g) defa	In	(h) Approved by board or committee?		(i)Written agreement?		
			То	From			Yes	No	Yes	No	Yes	No	
DONALD EADWAY	DO	PLIT OLLAR LIFE ISURANCE		Х	159,680	15,968		No	Yes		Yes		

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.												
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	zation's							
				Yes	No							

Part V	Supplemental Information	
Provide additional information for responses to questions on Schedule L (see instructions)		
	Return Reference	Explanation

Schedule L (Form 990 or 990-EZ) 2014

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SCHEDULE 0 (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.

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

Name of the organization **Employer identification number** AMERICAN QUARTER HORSE ASSOCIATION 75-0725576

Return Reference	Explanation					
FORM 990, PART VI, SECTION A, LINE 2	JIM HEIRD, EXECUTIVE COMMITTEE, AND ELEANOR GREEN, DIRECTOR, FAMILY RELATIONSHIP DIRK JONES, DIRECTOR-AT-LARGE, AND R C JONES, DIRECTOR-AT-LARGE, FAMILY RELATIONSHIP JOHNE DOBBS, DIRECTOR-AT-LARGE, AND TRAVIS DOBBS, DIRECTOR, FAMILY RELATIONSHIP JIM J SHOEMAKE, PAST PRESIDENT, AND SARAH SHOEMAKE-DOLLES, DIRECTOR, FAMILY RELATIONSHIP LAINA BANKS, DIRECTOR, AND KENNETH BANKS, DIRECTOR-AT-LARGE, FAMILY RELATIONSHIP EDWARD MCNELIS, DIRECTOR EMERITUS, AND LAINA AND KENNETH BANKS, DIRECTOR AND DIRECTOR EMERITUS, FAMILY RELATIONSHIP CHARLES GRAHAM, DIRECTOR-AT-LARGE, AND TYLER GRAHAM, DIRECTOR, FAMILY AND BUSINESS RELATIONSHIP ROB BROWN, PAST PRESIDENT, AND ROB A BROWN, DIRECTOR, FAMILY RELATIONSHIP SARAH N KUNKLE, DIRECTOR EMERITUS, AND JOHN B KUNKLE, DIRECTOR, FAMILY RELATIONSHIP J WADE ELLERBROEK, JR, DIRECTOR, AND WILLIAM HORTON, FAMILY AND BUSINESS RELATIONSHIP J WADE ELLERBROEK, JR, DIRECTOR, AND GEORGA M SUTTON, HONORARY VICE PRESIDENT, FAMILY RELATIONSHIP RALPH C SEEKINS, EXECUTIVE COMMITTEE, AND BETH C AUSTIN, DIRECTOR, FAMILY RELATIONSHIP PETE SCARMARDO, DIRECTOR, AND JOHNNY TROTTER, PAST PRESIDENT, BUSINESS RELATIONSHIP POTES SCARMARDO, DIRECTOR, BUSINESS RELATIONSHIP RELATIONSHIP					

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE AMERICAN QUARTER HORSE ASSOCIATION IS A NONPROFIT CORPORATION THAT IS COMPOSED OF OVER 260,000 MEMBERS WORLDWIDE. THE MEMBERS IN ATTENDANCE EACH HAVE A VOTE AT THE ANNUAL MEMBERSHIP MEETINGS THESE MEMBERS ARE DIVIDED INTO GEOGRAPHICAL AREAS REPRESENTING STATES, PROVINCES, COUNTRIES, OR REGIONS THESE MEMBERS ARE REPRESENTED ON THE BOARD OF DIRECTORS THE TOTAL NUMBER OF ELECTED DIRECTORS IS 150. THE NUMBER OF DIRECTORS REPRESENTING AN AREA IS DETERMINED BY THE NUMBER OF REGISTERED AMERICAN QUARTER HORSES IN THEIR GEOGRAPHIC REGION. THE MEMBERS FROM EACH REGION ELECT THE DIRECTORS FROM THEIR REGION. THE MEMBERS APPROVE ALL DECISIONS OF THE BOARD OF DIRECTORS AND EXECUTIVE COMMITTEE AT THE ANNUAL MEETING. SEE SECTION II AND III OF THE BY-LAWS.

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE BOARD OF DIRECTORS IS COMPOSED OF ELECTED DIRECTORS, PAST PRESIDENTS, DIRECTORS EMERITI, DIRECTORS-AT-LARGE, HONORARY VICE PRESIDENTS, AND APPOINTED INTERNATIONAL DIRECTORS ALL OF THESE HAVE VOTING RIGHTS ON THE BOARD OF DIRECTORS PROVIDED THEY ADHERE TO THE POLICIES TO MAINTAIN THEIR VOTING RIGHTS THE BOARD OF DIRECTORS MEETS ANNUALLY AT THE ANNUAL MEMBERSHIP MEETING. THE BOARD OF DIRECTORS ELECTS THE EXECUTIVE COMMITTEE, WHICH HAS ALL RIGHTS OF THE BOARD OF DIRECTORS EXCEPT THE POWER TO CHANGE BY-LAWS AND ANY RULES PERTAINING TO THE REGISTRATION OF HORSES. THE EXECUTIVE COMMITTEE IS A FIVE-MEMBER COMMITTEE CONSISTING OF THE PRESIDENT, FIRST VICE PRESIDENT, SECOND VICE PRESIDENT, AND TWO MEMBERS. SEE SECTION IV AND V OF THE BY-LAWS.

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THE DECISIONS OF THE EXECUTIVE COMMITTEE ARE APPROVED BY THE BOARD OF DIRECTORS THE ACTIONS OF THE BOARD OF DIRECTORS ARE APPROVED BY THE MEMBERS AT THE ANNUAL MEMBERSHIP MEETING

Return Reference	Explanation
VI, SECTION B, LINE 11	THE 990 IS COMPLETED WITH THE ASSISTANCE OF THE ACCOUNTING DEPARTMENT IN CONJUNCTION WITH THE TREASURER THE 990 IS THEN REVIEWED BY THE TREASURER AND THE EXECUTIVE VICE PRESIDENT THE BOARD OF DIRECTORS THROUGH THE EXECUTIVE COMMITTEE ALSO REVIEWS THE RETURN AFTER FILING, THE 990 IS AVAILABLE TO ANY ONE UPON REQUEST

Return Reference	Explanation
VI, SECTION B, LINE 12C	ALL BOARD MEMBERS, OFFICERS, KEY EMPLOYEES, AND HIGHLY COMPENSATED INDIVIDUALS ARE REQUIRED TO FILL OUT THE CONFLICT OF INTEREST STATEMENTS ON AN ANNUAL BASIS ALL OF THESE RESPONSES ARE REVIEWED TO DETERMINE WHERE CONFLICTS MAY EXIST IF A CONFLICT ARISES, THE BOARD MEMBER WITH SUCH CONFLICT WILL NOT BE ALLOWED TO VOTE ON THE TRANSACTION INVOLVED

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTEE APPROVES COMPENSATION FOR ALL STAFF, INCLUDING THE EXECUTIVE VICE PRESIDENT, TREASURER, AND KEY EMPLOYEES THEY HAVE COMPARABILITY DATA AVAILABLE TO REVIEW FOR BOTH NON-PROFIT AND FOR-PROFIT CORPORATIONS THEY HAVE RECEIVED INDEPENDENT REVIEWS OF THE EXECUTIVE VICE PRESIDENT'S COMPENSATION IN THE PAST, BUT IT IS NOT DONE ON AN ANNUAL BASIS THE DOCUMENTATION OF THEIR DECISIONS IS REFLECTED IN THE MINUTES OF THE EXECUTIVE COMMITTEE MEETINGS THE COMPENSATION PROCESS WAS LAST DONE IN 2015

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS ARE PRINTED IN THE ANNUAL OFFICIAL HANDBOOK THAT IS AVAILABLE UPON REQUEST TO ALL MEMBERS AND IS POSTED ON THE AQHA WEBSITE. THE INFORMATION CAN ALSO BE DOWNLOADED THROUGH THE AQHA APP THE CONFLICT OF INTEREST POLICY IS AVAILABLE TO THE PUBLIC UPON REQUEST. THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS ARE PRESENTED TO THE MEMBERS AT THE ANNUAL MEETING AND THEN POSTED ON THE AQHA WEBSITE. IN ADDITION, EACH DIRECTOR RECEIVES QUARTERLY UNAUDITED FINANCIALS TO SHARE WITH THE MEMBERS THEY REPRESENT.

Return Reference	Explanation
FORM 990, PART VII- COMPENSATION	BOARD OF DIRECTOR COMPENSATION AMOUNTS INCLUDE PRIZE MONEY AND COMPENSATION FOR OTHER SERVICES PROVIDED TO THE AMERICAN QUARTER HORSE ASSOCIATION IN THE NORMAL COURSE OF BUSINESS

Return Reference	Explanation
FORM 990, PART XI, LINE 9	TO REFLECT NET ASSETS AT WHOLE, UNCONSOLIDATED AMOUNT 1,382,057

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2014

OMB No 1545-0047

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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.

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

Name of the organization AMERICAN QUARTER HORSE ASSOCIATION **Employer identification number**

75-0725576

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.							
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
(1) ROBIN GLENN PEDIGREES LLC PO BOX 200 AMARILLO, TX 791680001 73-1557829	SEE PART VII	TX	503,266	2,944,517			
(2) AWARDS RECOGNITION CONCEPTS PO BOX 200 AMARILLO, TX 791680001 47-3392191	SEE PART VII	TX	0	0			

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b (13) controller entity?	
						Yes	No
(1) AMERICAN QUARTER HORSE FOUNDATION PO BOX 32111 AMARILLO, TX 79120 51-0187823	SEE PART VII	TX	501(C)(3)		AMERICAN QUARTER HORSE ASSOCIATION	Yes	

Yes No

Yes

No

Part III	Identification of 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.									
	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	,	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	_
					l '					

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

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

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

hedule R (Form 990) 2014		Рa	age 3
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, o	or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1 j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
• Sharing of paid employees with related organization(s)	10		No
P Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1 q	Yes	

a 16+h	 	 including covered relationships a	

2 If the district to diffy of the districtions for information on who must complete this line, merading covered relationships and transaction thresholds								
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved					
(1) AMOUNT LESS THAN 50K NOT REPORTABLE	В							
(2) AMERICAN QUARTER HORSE FOUNDATION	С	277,303	ACTUAL AMOUNT INCURRED					

No

No

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
/		 .	<u> </u>							

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
LINE 1(B), ROBIN GLENN	SUPPORTS THE ACTIVITIES OF THE AMERICAN QUARTER HORSE ASSOCIATION BY PRODUCING SALE CATALOGS AND PEDIGREES FOR THE INDUSTRY'S PREMIER RACE SALES AND PERFORMANCE SALES, AS WELL AS ALL FACETS OF THE QUARTER HORSE PERFORMANCE INDUSTRY IT ALSO MAINTAINS A LARGE DATABASE OF HORSE RECORDS
LINE 2(B), AWARDS RECOGNITION	SUPPORTS THE ACTIVITIES OF THE AMERICAN QUARTER HORSE ASSOCIATION BY MANUFACTURING AWARDS FOR SHOWS AND EVENTS ARC FILED TO ORGANIZE WITH THE STATE AS A DISREGARDED ENTITY ON FEBRUARY 13, 2015, BUT DID NOT OFFICIALLY OPERATE AS A SEPARATE ENTITY UNTIL OCTOBER 1, 2016 THEREFORE, THERE ARE NO ASSETS OR INCOME FOR ARC INCLUDED WITH THE BALANCE SHEET OR INCOME STATEMENT DURING THIS REPORTING PERIOD
FORM 990, SCHEDULE R, PART II, LINE 1(B)	SUPPORT OF EDUCATIONAL PROJECTS OF INTEREST TO DEVOTEES OF THE QUARTER HORSE

Schedule R (Form 990) 2014