Form **990**

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.\

Open to Public

Dep	artiment of t	he Treasury e Service	▶ Do not enter social	-		-	-	A 1 D 1	Upen to r	
Inte			► Information about Indar year, or tax year beginning	21-	in o see	1011				
<u>A</u>				, 20 D Employer identification number						
В	Check if a		C Name of organization American Y	outh Horse Council,	Inc			D Employ	er identification n	ember
	Address o	hange	Doing business as			61-1229542				
Ц	Name cha	inge	Number and street (or P.O. box if ma	B	E Telephone number					
Ø	Initial retu	m	1 Gainer Rd			817.320.2005				
\Box	Final return	/terminated	City or town, state or province, count							
	Amended	return	McDonald, NM 88262					G Gross re		64,229
	Applicatio	n pending	F Name and address of principal office	Danette McGuire	·		H(2a) Is this a gr	roup return for :	subordinates? 🔲 Yes	✓ No
			1 Gainer Rd, McDonald, NM 8826	52			⊢ '''	subordinate	s included? 🔲 Yes	☐ No
<u></u>	Tax-exem	pt status:) < (insert no.)	4947(a)(1) or	<u>□527</u> ○3	א"יו בַּ	lo," attach a	list. (see instructio	ns)
J	Website:	► AYF	IC.com	·			H(c) Group	exemption	number ▶	
K	Form of or	ganization:	Corporation Trust Associat	ion ☐ Other▶	/ LYe	er of formatic	n: 1994	M State	of legal domicile:	NM_
P	art I	Summ	ary		3					
	1 1	Briefly de	scribe the organization's missi	on or most significa	ant activities	: Equine I	Education s	support fo	r youth, Promot	ion of
8	1	quality eq	uine information and support of	youth involvement i	n equine rela	ted activiti	es			
. E] -			_			************			
Activities & Governance	2	Check th	is box ▶☐ if the organization o	iscontinued its ope	erations or d	isposed of	more than	25% of	its net assets.	
, දූ		Number (of voting members of the gover	ming body (Part VI,	line 1a)			3		15
ું હ			of independent voting members	·	-	l, line 1b)		4		15
8			nber of individuals employed in			-		5		0
₹			nber of volunteers (estimate if r	-	•	,		6		150
支	1		elated business revenue from F					7a		130
	1		ated business taxable income					7b		
_		AGE CITIES	ateu business taxable income	110111 1 01111 330-1, II	ne 34	- 	Prior Ye		Current Ye	0
	١.,	^								
~ 9	1		tions and grants (Part VIII, line 1	19,002		20,182				
<u>_</u>		_	service revenue (Part VIII, line 2	35,704		44,047				
Revenue	1		nt income (Part VIII, column (A)			_	·-·.	55		43
_			enue (Part VIII, column (A), line					0		0
			enue-add lines 8 through 11 (m					54,761		64,272
	13 (Grants a	nd similar amounts paid (Part D	C, column (A), lines	1–3)	· · L		3,250		2,000
	14	Benefits	paid to or for members (Part IX	, column (A), line 4)		· · L		0		0
æ	15	Salaries,	other compensation, employee b	enefits (Part IX, colu	ımn (A), lines	510)		0		0
Expenses	16a i	Professio	onal fundraising fees (Part IX, co	olumn (A), line 11e))	[0		0
8	Ь -	Total fund	draising expenses (Part IX, colu	ımn (D), (line 25)	@ ~~ 12 ·					
Ð			penses (Part IX, column (A), line			J		54,050		70,126
			enses. Add lines 13-17 (must e					57,300		72,126
	19	Revenue	less expenses. Subtract line 18	B from line 12 NOV	1 9 % 2017			-2,539		-7,854
<u> </u>				[C] 2	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		eginning of Cu		End of Yes	
Net Assets or	20	Total acc	ets (Part X, line 16)					27,663		23,294
22	21		silities (Part X, line 26)	<u>. U</u>	DEW, U'	r: 11		0		3,485
2	22		ts or fund balances. Subtract li	ne 21 from line 20				27,663		19,809
	art II		ture Block	TIC 21 HOTT III C 20			·	27,003		19,009
										
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.										
		7	Die alle mocco	. 500					\ <u>\</u>	
e:	I		MENC ING	<u></u>			Da		30-17	
Sig	- 1	y Sign	ature of officer		۔۔.دلہ ، ،	-				
ne	ere	7	MINTE INCIUN	T Exec	MILIA	- Dix	امت	<u></u>		
			e or print name and title	Omnometo cianata					Terris	
Pa	aid	-Turit ly	pe preparer's name	Preparer's signature		Date	5	Check [
Pr	eparer	-	· · · · · · · · · · · · · · · · · · ·					self-emp	pioyed	
	se Only		ame >				Firm	n's EIN ▶		
		Firm's a	ıddress ▶	 			Pho	ne no.		
Ma	y the IR	S discus	s this return with the preparer s	shown above? (see	instructions)	<u></u>	<u></u>	· · 🗌 Yes	
-	- D	ande Mardin	ation Act Nation, and the concret	la landariations		0-1 11	440000/		Farm 0	Q0 (2016)

Form 99	[2016] Page 2
Part	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Priefly describe the organization's mission:
	quine education support for youth; Promotion of quality equine information and support for youth involvement in equine
	elated activities
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	"Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program
_	ervices?
4	Pescribe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, he total expenses, and revenue, if any, for each program service reported.
4a	Code:) (Expenses \$ 72,126 including grants of \$ 2,000) (Revenue \$ 64,272)
	ublication of quality equine information for education; support for youth involvement in equine related activities; One scholarship
	vas awarded in 2016
4b	Code:) (Expenses \$ including grants of \$) (Revenue \$)
_	
4c	Code: (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
	Expenses \$ including grants of \$) (Revenue \$)
40	otal program service expenses > 72.126

Part I	V 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		/
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		1
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IXI, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
þ	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		1
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		1
đ	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		1
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		√
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		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		√
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		<u>·</u> ✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>·</u> ✓
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		<u>·</u> ✓
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		✓

Checklist of Required Schedules (continued)

Part IV

•			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
ь 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		1
	•	24c	<u> </u>	
25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
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		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	256	<u> </u>	
20	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
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		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
32	Part I	31		✓
33	complete Schedule N, Part II	32		✓_
_	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		√
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
00	Part VI	37		<u>✓</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	

Form **990** (2016)

Part •	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			П
	' and the contraction of the con		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	o		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors a	and		
•	reportable garning (gambling) winnings to prize winners?	· 1c		L
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
h	Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	의!		l
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a		1
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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other author	rity		<u> </u>
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	cial		ĺ
	account)?	. 4a		✓
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 Accou (FBAR).	ints		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. <u>5a</u>		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			/
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	. <u>5c</u>		<u> </u>
va	organization solicit any contributions that were not tax deductible as charitable contributions?	. 6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions			_
_	gifts were not tax deductible?	. 6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	ods		
	and services provided to the payor?	· 7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v required to file Form 8282?	vas · 7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract			1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			✓
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by			
	sponsoring organization have excess business holdings at any time during the year?	. 8		
9	Sponsoring organizations maintaining donor advised funds.	·		
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a	I	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	. 9b	$- \square$	
10	Section 501(c)(7) organizations. Enter:	1 1	}	
a	Initiation fees and capital contributions included on Part VIII, line 12		l	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
l1 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	- { }	1	
ь	Gross income from other sources (Do not net amounts due or paid to other sources		ļ	
	against amounts due or received from them.)	1 1	}	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041	? 12a		_
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	. 13a		
ь	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which		j	
	the organization is licensed to issue qualified health plans		- 1	
c	Enter the amount of reserves on hand			
148	Did the organization receive any payments for indoor tanning services during the tax year?	. 14a		√
	If "Ves " has it filed a Form 720 to report these navments? If "No " provide an evaluation in Schodule O	14h		

Part \	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. 5	See in.	struc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI			. 🗸
Section	on A. Governing Body and Management		r	
4.0	Enter the number of victing members of the governing body at the end of the toy year.		Yes	No
	Enter the number of voting members of the governing body at the end of the tax year			
	Enter the number of voting members included in line 1a, above, who are independent . 1b 15	1		1
	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		1
	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		1
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	L	1
_	Did the organization have members or stockholders?	6	/	
	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	1	<u> </u>
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	✓	<u> </u>
	Each committee with authority to act on behalf of the governing body?	8b	/	├ ─
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	✓	
Secuc	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	oae.,	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		17
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	L	1
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
	Did the organization have a written whistleblower policy?	13		/
15	Did the organization have a written document retention and destruction policy?	14		1
	The organization's CEO, Executive Director, or top management official	15a		1
	Other officers or key employees of the organization	15b		7
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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		1
	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		
	on C. Disclosure			Ь
17 18	List the states with which a copy of this Form 990 is required to be filed ► KY Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of integration in the statements available to the public during the tax year.	erest (policy	, and
	State the name, address, and telephone number of the person who possesses the organization's books and rec	cords	>	
	Danette McGuire, 1 Gainer Rd. McDonald NM 88262			

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Form **990** (2016)

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, a	ind
•	Independent Contractors	

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization if	nor any relate	d org	aniz			ompe	ensa	ted any curren	t officer, directo	r, or trustee.
		1		•	C) ition			1	ł	1
(A)	(B)	(don	ot ch			e than e	one	(D)	(E)	(F)
Name and Title	Average	box,	unles	s pe	rson	is both	an	Reportable	Reportable	Estimated
	hours per week (list any			_		or/trus	<u> </u>	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Institutional	Officer	Kay employee	ã₹	Former	the	organizations	compensation
	related organizations	8 5	Ĕ	ě	9	y eg	₫	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	8 =	<u>a</u>		ğ	9 8	j	[į	and related
	line)	1 2	trustee		8	9		[organizations
			8			Highest compensated employee				
_(1) Colvin, Kara										
Board Member		1						o	0	0
(2) Dishon, Karissa			\vdash				1	<u> </u>		<u>_</u>
Board Member		1				1	1	l o	o	0
(3) Eberle, Hayley										
Board Member		1					ĺ	0	o	0
(4) Franke, Teddy										
Board Member		1				1		0	0	O
(5) Henry, Christine										
Board Member		1						о	0	0
(6) Jousan, Dean						1				
Board Member		1				L		0	0	0
(7) Mays, Laurie										
Board Member		1				<u> </u>		0	0	0
(8) Spooner, Holly		1					ļ	}		
Board Member		✓					L	0	0	0
(9) TenBroeck, Saundra		}]]	}	}		
Board Member		1		<u> </u>		L	L	0	0	0
(10) Whitlock, Brenna		l				İ	i			
Board Member		✓		L		L	<u>L</u>	0	0	0
(11) Nadeau, Jennifer		1				}		1		_
President		ļ		1	<u>L</u>	<u> </u>	<u> </u>	0	0	0
(12) Lowder, Maria		l				l		[· · · · · · · · · · · · · · · · · · ·
Vice President		<u> </u>		✓		 	$oxed{oxed}$	0	0	0
(13) Jehlik, Connie		[[
Secretary				1	_	<u> </u>	<u> </u>	0	0.	0
(14) Sax, Meg)				1	1	1		
Treasurer		L	L.,	✓	L.,	L	<u> </u>	0	0	0

Part.	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do n box, office of dire	ot ch	Pos eck s pe	C) ition more rson frect	than is of the both or highest compensated	one 1 an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation for related organizations (W-2/1099-MIS)	om	Est erm comp fro orga and	(F) timated ount of other sensation the unization relater nization	f ion ion d
(15) w	aite, Karen						-	\vdash			\top			
(16)	ast President				✓	_		<u> </u>	0		0			0
119														
(17)											T	-		
(18)				\vdash		-		-	 		+			
			ļ				ļ	L			_			
(19)									<u> </u>		1			
(20)											+			
(21)						_			<u> </u>		\downarrow			
(21)														
(22)											1			 -
(23)						-		-	}	<u> </u>	+			
						_		_			1			
(24)						ĺ								
(25)								\vdash			\top			
1b	Sub-total	L						Ļ			4			
C	Total from continuation sheets to Part	. . . VII, Sectio	n A	:			•	>	0		0			0
<u>d</u>	<u> </u>	· · · · · ·			_			<u> </u>	0		0			0
2	Total number of individuals (including but reportable compensation from the organi		l to th	ose	list	ed a	above	e) W	ho received ma 0	ore than \$100,	000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5	ficer, direc						 emp		est compens	ated	3	Yes	No /
4	For any individual listed on line 1a, is the organization and related organizations individual	greater that	an \$1	50,0	000	r? h	f "Ye	s, "	complete Sch					1
5	Did any person listed on line 1a receive of													
Section	for services rendered to the organization? on B. Independent Contractors	rπ res, c	отрі	ere :	ocr	eal	ire J 1	or s	sucn person	· · · · · ·	<u>-</u>	5	<u> </u>	✓
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of s	ervices	_ ((C) Compens	ation	
												- -		
2	Total number of independent contractor							th	iose listed abo	ove) who				
	received more than \$100,000 of compens	ation from t	he or	gani	izat	ion I	<u> </u>		0					

		Check if Schedule O contains a	response or note		Part VIII	<u></u>	<u></u> . 🗆
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
報報	1a	Federated campaigns	1a				
ar our	ь	Membership dues	1b 1,87	0			
Contributions, Giffs, Grants and Other Similar Amounts	C	Fundraising events	1c]			
	d	Related organizations	1d]		l	
	е	Government grants (contributions)	1e	_]			
를 들	f	All other contributions, gifts, grants,					
혈충		and similar amounts not included above	1f 18,31	2			1
<u>a</u> a	9	Noncash contributions included in lines 1a-	* ****************				
	h	Total Add lines 1a-1f	Business Code	20,182			
Program Service Revenue		B. I the state of					
96	2a	Publication royalties	90099	20,240	20,240		
象	b	Meetings income	90099	23,807	23,807		
Ž	C		<u> </u>	- 		<u> </u>	
Š	d	######################################		 			
퉏	•	All other program service revenue		 			
ğ	9	Total. Add lines 2a-2f		44,047			
	3	Investment income (including					T
	1	and other similar amounts)		43	43		
	4	Income from investment of tax-exem	npt bond proceeds▶			 	<u> </u>
	5	Royalties	•				
	1	(i) Real	(ii) Personal				1
	6a	Gross rents		7			
	ь	Less: rental expenses		7 !			
	C	Rental income or (loss)]			
	d	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities assets other than inventory	(ii) Other				
	b	Less: cost or other basis and sales expenses .					
	C	Gain or (loss)		7 1			
	d	Net gain or (loss)					
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c					
ther	ь	See Part IV, line 18	<u> </u>		:		
O	1	Net income or (loss) from fundrai		7			1
	9a		ies.				
	b	Less: direct expenses		-			
	10a	Gross sales of inventory, le				·	
	b	Less: cost of goods sold Net income or (loss) from sales o	b	-			
	├ -	Miscellaneous Revenue	Business Code	 -	· · · · · · · · · · · · · · · · · · ·		
	11a			-			ì
	b			 			
	C		 				
	d	All other revenue		 			
	e	Total. Add lines 11a-11d		1		 	
	12	Total revenue. See instructions.		64,272	64,272		
	 -			04,4141	V-1,E/E		Form 990 (2016)

Part	X Statement of Functional Expenses				······································				
Sectio	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).								
	Check if Schedule O contains a response or note to any line in this Part IX								
	t include amounts reported on lines 6b, 7b, , 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	1,500	1,500						
2	Grants and other assistance to domestic		1						
	individuals. See Part IV, line 22	500	500						
3	Grants and other assistance to foreign				1				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16								
	· · · · · · · · · · · · · · · · · · ·								
4 5	Benefits paid to or for members								
•	trustees, and key employees		Ì		I				
6	Compensation not included above, to disqualified			 					
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages								
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)								
9	Other employee benefits								
10	Payroll taxes								
11	Fees for services (non-employees):								
a	Management	28,813	21,610	7,203					
b	Legal								
C	Accounting			···					
đ	Lobbying		· · · · · · · · · · · · · · · · · · ·						
f	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25, column								
	(A) amount, list line 11g expenses on Schedule O.)		ĺ						
12	Advertising and promotion	1,299	1,299						
13	Office expenses	340	340						
14	Information technology	396	396						
15	Royalties								
16	Occupancy		· · · · · · · · · · · · · · · · · · ·						
17	Travel	367	367						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings .	27,456	27,456						
20	Interest	27,430	27,436						
21	Payments to affiliates								
22	Depreciation, depletion, and amortization .	77.7							
23	Insurance	1,696	1,696						
24	Other expenses. Itemize expenses not covered								
	above (List miscellaneous expenses in line 24e. If		ļ						
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
8	Awards & Trophies Credit Card/Pay Pal Fees	408	408						
b C	Freight/Shipping	960 518	960 518						
d	Printing/Reproduction	7,552	7,552						
e	All other expenses	321	321						
25	Total functional expenses. Add lines 1 through 24e	72,126	72,126						
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 > \(\simega\) if								
	following SOP 98-2 (ASC 958-720)		ļ						

Form 990 (2016) Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X A (B) Beginning of year End of year 3,919 3,925 2 Savings and temporary cash investments 2 17,034 17,076 3 3 4 6,710 4 2,293 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 7 8 8 Prepaid expenses and deferred charges . . . 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b **b** Less: accumulated depreciation 10c 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 27,663 16 23,294 17 17 0 3,485 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24

Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 30

Other liabilities (including federal income tax, payables to related third

parties, and other liabilities not included on lines 17-24). Complete Part X

Total liabilities. Add lines 17 through 25 .

25

Net Assets or Fund Balances

31

32

33

Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . 27,663 19,809 33 27,663 34 Total liabilities and net assets/fund balances . . . 27,663

Form **990** (2016)

19,809

23,294

3,485

25

0 26

Form 99	00 (2016)			P	age 12
Part	XI Reconciliation of Net Assets				
-	Check if Schedule O contains a response or note to any line in this Part XI	<u>.</u>	<u></u> .		. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1	_		64,272
2	Total expenses (must equal Part IX, column (A), line 25)	2			72,126
3	Revenue less expenses. Subtract line 2 from line 1	3			-7,854
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			27,663
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10			19,809
Part	XII. Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			<u>. </u>
			_	Yes	No
1	Accounting method used to prepare the Form 990: 🖸 Cash 🔲 Accrual 🔲 Other		ļ		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	aplain in	1		1
	Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or	l		
	reviewed on a separate basis, consolidated basis, or both:		-		l
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		i		
ь	Were the organization's financial statements audited by an independent accountant?		2b		/
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both:		İ		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1		1
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for of		ŀ		
	of the audit, review, or compilation of its financial statements and selection of an independent according		2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, e.	cplain in			
_	Schedule O.				ļ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in] _		
	the Single Audit Act and OMB Circular A-133?		3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits a surface and the organization did not undergo the control of the organization did not undergo the control of the organization did not undergo the control of the organization did not undergo the o				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		L
			Fort	n 990	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

2016
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Employer identification number

American Youth Horse Council, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(b) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 331/2% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/2% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions). You must complete Part IV, Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization (I) Name of supported organization (iii) Type of organization (v) Amount of monetan (vii) Amount of listed in your governing (described on lines 1-10 other support (see support (see above (see instructions)) instructions) (enoitsurteni Yes No (A) (B) (C) (D) (E)

Total

Part ·	(Complete only if you checked the Part III. If the organization fails to	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
Secti	on A. Public Support	400.7			ouse compi	, w. r. w. r.	
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	/ (f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						(4)
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3				/		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Secti	on B. Total Support			/			
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10 /						
12	Gross receipts from related activities, etc.	•	-			12	
13	First five years. If the Form 990 is for the organization, check this box and stop he			id, third, fourth	n, or fifth tax y	ear as a sectio	n 501(c)(3) ▶ □
Secti	on C. Computation of Public Suppor	t Percentag	e				
14	Public support percentage for 2016 (line 6		-	1, column (f))		14	%
15	Public support percentage from 2015 Sch					15	%
16a	331/a% support test-2016. If the organi			-	nd line 14 is 3	31/3% or more,	check this
_	box and stop here. The organization qual	-		•			▶ □
b	331/2% support test—2015. If the organization this box and stop here. The organization				-	is 331/a% or m	ore, check · · ▶ 🏻
17a	10%-facts-and-circumstances test—21 10% or more, and if the organization me Part VI how the organization meets the " organization	ets the "facts	-and-circumst	ances" test, cl	heck this box a	and stop here.	Explain in
b							
18	Private foundation. If the organization di				•		see
/	instructions	· · · ·			 ~	nedule A (Form 990	or 990-EZ) 2016

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.) If the organization fails to qualify under the tests listed below, please complete Part II.)

	Title organization lass to quality	<u> </u>	JO HOLOG DOIG	viv, pioabo oo	impicto i tart i	<u>., </u>	
	on A. Public Support	4 3 2040	#1.0040 T	4) oo4 4 1	45.0045 I		
_	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")]		
2	Gross receipts from admissions, merchandise	53,917	42,498	20,399	19,002	20,182	155,998
-	sold or services performed, or facilities furnished in any activity that is related to the						
_	organization's tax-exempt purpose	41,165	28,905	45.947	35,704	44,047	195,768
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	95,082	71,403	66,346	54,706	64,229	351,766
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified				-		
	persons that exceed the greater of \$5,000	ì]	}	Ì	
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	line 6.)						054 500
Secti	on B. Total Support				l	L	351,766
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	95.082	71,403	66,346	54,706	64,229	351,766
10a	Gross income from interest, dividends,		,				33.17.33
	payments received on securities loans, rents,				1	i	
	royalties and income from similar sources .	149	88	54	55	43	389
b	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b	149	88	54	55	43	389
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	95,231	71,491	66,400	54,761 or fifth tax ve	64,272	352,155 501(c)(3)
1.4	organization, check this box and stop her	_			-		· · •
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8			3. column (fl)		15	99.889 %
16	Public support percentage from 2015 Sch		-			16	99.843 %
	on D. Computation of Investment Inc						
17	Investment income percentage for 2016 (y line 13, colun	nn (f))	17	.110 %
18	Investment income percentage from 2015					18	.156 %
19a	331/3% support tests-2016. If the organi						
	17 is not more than 331/s%, check this box		-	-		_	
b	331/3% support tests—2015. If the organize line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di		_	=		• •	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Sect	ion A. All Supporting Organizations			
_			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
Ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

10b

Part	Supporting Organizations (continued)			
•			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			į
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
h	A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations			L
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			,
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	{		
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations	لـــــــا		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			1
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	┝╌┤		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			1
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3	<u> </u>	Ĺ
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	nstru	ctions	s).
a	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in:	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
	-	2a		-
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			· '
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			· · · ·
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
_	of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	ly in	tegrated Type III supporti	ng organization (see

Part	Type III Non-Functionally Integrated 509(a)(3	 Supporting Organi 	zations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
_	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets	. 3000 0, осрроизо о. 3		
 5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
				
	Total annual distributions. Add lines 1 through 6.			· · · · · · · · · · · · · · · · · · ·
8	Distributions to attentive supported organizations to which	h the organization is res	sponsive	
	(provide details in Part VI). See instructions.			
9_	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
_1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
а			***************************************	
b				
	From 2013			
d	F 0044		· · · · · · · · · · · · · · · · · · ·	
<u>u</u>	F 004 <i>E</i>			**************************************
	The state of the s			· · · · · · · · · · · · · · · · · · ·
<u>f</u> _	Total of lines 3a through e			
<u> </u>	Applied to underdistributions of prior years			
<u></u>	Applied to 2016 distributable amount	· · · · · · · · · · · · · · · · · · ·		
	Carryover from 2011 not applied (see instructions)			·
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	ļ 		···
4	Distributions for 2016 from] .		
	Section D, line 7:			
a	Applied to underdistributions of prior years		· · · · · · · · · · · · · · · · · · ·	
b	Applied to 2016 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.	 		
	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b	Excess from 2013		. =	
c	Excess from 2014			
d	Excess from 2015			
	Excess from 2016			
<u>_</u> _		<u> </u>	Cobod-lo	A (Form 990 or 990-F7) 2016

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2016

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Open to Public Inspection

Employer identification number

Identifier	Return	Explanation
	Reference	
01 Members or	(Part VI,	AYHC is governed by an Executive Board consisting of the
stockholder classes	line 6)	President, Vice President, Treasurer, Secretary and Past
-and-rights		President. It also has a 10 member board. Those who pay annua
		dues elect these officials at the Annual AYHC Symposium.
02 member election	(Part VI,	AYHC is governed by an Executive Board consisting of the
for additional	line 7a)	President, Vice President, Treasurer, Secretary and Past
members		President. It also has a 10 member board. Those who pay annua
		dues elect these officials at the Annual AYHC Symposium.
03 Governing body	(Part VI,	Major decisions are voted on by the full Board and Directors
-decisions	line 7b)	
04 Form 990	(Part VI,	A review of the tax return is conducted at the monthly Executive
governing body	line 11)	Committee Meeting
review		
05 Officer, director,		President Jenifer Nadeau University of CT 3636 Horsebarn Rd
etc. mailing address		Storrs CT 06269-4040; Vice President Maria Lowder, PO Box
		758155, Fairbanks, AK 99775; Treasurer Meg Sax 555 South
عا شي ي جوم م بن يو ه م م م م م يو م خ م م به م ف ه الآ ي و ب ما فام و و و د		Central Ave Milaca MN 56353; Secretary Connie Jehlik, 4041 Iron
		Works Pkwy, Lexington KY 40511; Past President Karen Waite
		Michigan State University 1287 Anthony Hall East Lansing MI 48824
06 Governing	(Part VI,	Governing documents are available to anyone who calls (817)
documents, etc	line 19)	320-2005 or emails info@AYHCcom to request them
available to public		

Schedule O (Fprm 990 or 990-EZ) (2016)	Page 2
Name of the organization	Employer identification number
American Youth Horse Council, Inc.	61-1229542
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