CERTIFIED

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-	For	m 🕽	JU	Return of Organization Exempt Fro	m Inco	ome Ta	X	OMB No. 1545-0047
			•	Under section 501(c), 527, or 4947(a)(1) of the internal Reven	un Codo (e	was at his	. (- 1	2012
	n			penefit trust or private foundation	ne cons le	xcept bia	ck lung	
			of the Treasury anue Service	▶ The organization may have to use a copy of this return to satisfy		etina raasii		Open to Public
i	A	For th	e 2012 cale		nd ending		nber 30	Inspection
į	В		If applicable:	C Name of organization Doberman Pinscher Club of America	ia enaing	Septe		,
i			s change	Doing Business As				yer identification number
		Name o	Ŭ.	Munch as and American D.C. 1. 15	Room/suite		38-614	
		initial re	•	2000 0 0-1	Stite A			one number
	\Box	Termina		City, town or post office, state, and ZIP code	Julie A		(704) 8	347-8855
			ed return	Matthews, NC 28105-6726				
:	\exists			F Name and address of principal officer:			G Gross r	
:	į		p	The state of the s				o for affiliates? Yes X No
i	1	Тах-өхө	empt status:	X 501(c)(3)	Troz	H(b) Are al	l affiliates i	Included? Yes No
	J	Websit	e: > WWW		_] 527			a list. (see instructions)
ď				Vic.	of formation:			n number ▶ 2093
		art l	Summ		or formation.	1330	W State	e of legal domicile: MI
- 1 '		1		scribe the organization's mission or most significant activities:				
1			To prese	rve, protect and advance the Doberman Pinscher breed.			*	
į	Š	1		Tray protect and do tailed the bobernan Finscher breed,				
Ì	L		***********					***************************************
1	Activities & Governance	2	Check thi	s box ▶ ☐ if the organization discontinued its operations or disp			050/ ./	
:	ŏ	3	Number o					ľ
	νy.	4	Number of	of independent voting members of the governing body (Part VI, III Part VI, III			3	13
į	Ţ.	5	Total nun	nber of individuals employed in calendar year 2012 (Part V, line 2	irie ib) .		4	13
ì	ξţ	6	Total nun	har of rational and full the state of the st		• • •	5	0
.;	4	7a	Total unre	elated business revenue from Part VIII, column (C), line 12			6	110
:		b	Net unrela	atad business touchts business () = pag = 10 p.c.			7a	0
-	-			ated business taxable income from Form 990-1, line 34	• • • • • • • • • • • • • • • • • • • •	Prior Ye	7b	0
1		8	Contribut	ions and grants (Part VIII, line 1h)	-		33,232	Current Year
:	Revenue	9		ions and grants (Part VIII, line 1h)			18,122	112,548
:	34	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)			6,234	23,087 6,765
	œ	11	Other revi	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			(6,306)	91,335
		12	Total reve	nue—add lines 8 through 11 (must equal Part VIII, column (A), line	12)		51,282	233,735
. "		13		d similar amounts paid (Part IX, column (A), lines 1-3)	·/		0	22,163
		14	Benefits c	aid to or for members (Part IX, column (A), line 4)	`		0	72,103
1	S	15	Salaries, o	ther compensation, employee benefits (Part IX, column (A), lines 5-			0	
i	xpenses	16a	Profession	nal fundraising fees (Part IX, column (A), line 11e)	107		0	0
:	per			raising expenses (Part IX, column (D), line 25)			SHAMOO ON SHA	
1	ŭ	17		enses (Part IX, column (A), lines 11a-11d, 11f-24e)			37,905	339 533
		18		enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	.		37,905	228,523 250,686
		19		ess expenses. Subtract line 18 from line 12	.		36,623)	(16,951)
	5 4				Bacii	nning of Cur		End of Year
. 4	Net Assets or Fund Balances	20	Total asse	its (Part X, line 16)	2-3"		50,694	433,743
	5 E	21		ities (Part X, line 26)	•		0,034	455,745
. 4	Ĕ			or fund balances. Subtract line 21 from line 20	·	Λŧ	0,694	433,743
				ire Block	<u> </u>		0,024	433,743
. 50	.,,			r, I declare that I have examined this return, including accompanying schedules ar	nd statement	e and to the	a hact of m	w knowledge and haliaf it in
	true	, correct	t, and comple	te. Declaration of preparer (other than officer) is based on all information of which p	preparer has	any knowle	е везгогн dge.	iy kirowicoge and berei, ii is
:-			1	M. 11/2 Sa +			Aug 1	3, 2014
5	Sigi	n	? :		.per l'eg	,		,
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-		320000						

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: Refer to accompanying schedule.
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	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 153,435 including grants of \$) (Revenue \$) EDUCATION - Printed materials for general public and members to inform and educate in a variety of areas for the purpose of promoting improved breeding and health of dogs in general and the Doberman Pinscher breed in particular.
4b	(Code:) (Expenses \$ 31,360 including grants of \$) (Revenue \$)
	MEMBER SERVICES - Encouragement for members and breeders to accept the standard of the breed as approved by the American Kennel CLub as the only standard of excellence by which the Doberman shall be judged and to
	protect the Doberman breed in promoting all things possible to bring its natural qualities to perfection.
4c	(Code:) (Expenses \$ 44,271 including grants of \$ 18,163) (Revenue \$) RESCUE - Preservation and protection from overbreeding and rescue of abandoned and/or ill-treated
	RESCUE - Preservation and protection from overbreeding and rescue of abandoned and/or ill-treated Doberman dogs.
	Doberman dogs.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 229,066 Form 990 (2012

Part I	V Checklist of Required Schedules			
	THE WAS COLUMN TO A COLUMN ASSESSMENT OF THE PROPERTY OF THE P	, . ,	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	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
	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? <i>If "Yes," complete Schedule C, Part II</i>		v	
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Χ	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
	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 "Yes," complete Schedule D, Part I	6		Х
	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>			
9	complete Schedule D, Part III	8		X
Ü	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Χ	<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
¢	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		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		_	
4.6	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		^ X
	Did the organization maintain an office, employees, or agents outside of the Office States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	, 46	, .,	-^`
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4.0		V
25	If "Yes," complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u> </u>
<u>d</u>	if tes to line zua, did the organization attach a copy of its audited infancial statements to this return.		n 990	(2012)

Part I	V Checklist of Required Schedules (continued)			
-	The state of the s		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		х
	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 24c		X
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		X
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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	The second of the second	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Schedule L, Part IV	28a 28b		X
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		Х
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other conservation contributions? If "Yes," complete Schedule M	29 30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Х
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		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		Х
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		Х
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
		For	m 99 (0 (2012)

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Check it Schedule O contains a response to any question in this rait V	1	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 14		Agleran	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Χ	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1,15		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-tile (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in \$chedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:	*+d		
D	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	4 47	Χ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
•	required to file Form 8282?	7c		Χ
d	If "Yes," indicate the number of Forms 8282 filed during the year	1.41;1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Χ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Χ
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	8		
0	organization, have excess business holdings at any time during the year?	U		17.1
9 a	Did the organization make any taxable distributions under section 4966?	9a	1224 114	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			Y S
а	Initiation fees and capital contributions included on Part VIII, line 12			ki ili
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
40-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104			
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
b 13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
13 a	Is the organization licensed to issue qualified health plans in more than one state?		NIA	American Market
а	Note. See the instructions for additional information the organization must report on Schedule O.		IVV	
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	animo (مترتاسه ويشترس	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	. 000	(2012)
		r orr	11 000	(2012)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response to any question in this Part VI			
Secti	on A. Governing Body and Management			15.23
			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 . 15 13			
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		Х
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Χ
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Χ	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	l '	.,	
8	stockholders, or persons other than the governing body?	7b	Χ	
O.	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а		0-	Χ	1: 1
b	The governing body?	8a 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A who cannot be reached at	0.0		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	1
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Χ	
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	Χ	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Χ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		Χ
14	Did the organization have a written document retention and destruction policy?	14		Х
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		Χ
b	Other officers or key employees of the organization	15b		Χ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			451
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			April 1
	with a taxable entity during the year?	16a	*******	Х
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		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	i 501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.	,		
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or and financial statements available to the public during the tax year.	f inter	rest p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: > John Schoeneman, 5361 Bedfordshire Avenue, Harrisburg, NC 28075 704-455-8113		•	

Form 990 (2012)	Form	990	(201	2)
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and 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 nor any related organization compensated any current officer, director, or trustee.

(C)

(A)

(B)

Average hours per week (list any hours for related organizations below dotted)

(C)

(B)

Average hours per week (list any hours for related organizations below dotted)

(C)

(B)

Average hours per week (list any hours for related organizations below dotted)

(C)

(D)

Reportable compensation from the organization from the organization (W-2/1099-MISC)

(C)

Reportable compensation from the organizations (W-2/1099-MISC)

(W-2/1099-MISC)

	hours per	office	er an	dad	lirect	or/trus	lee)	con	npensation	compensation from	amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		from the ganization (1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Michelle Santana	5.0										
President		Х							0	0	0
(2)Skip Lee	5.0										
1st Vice President		Х							0	0	0
(3) Dr. Mary-Helene Brown	5.0										
2nd Vice President		Х							0	0	0
(4) Theresa Mullen	5.0										
Recording Secretary		Х					<u> </u>		0	0	0
(5) Sandy Teague	5.0										_
Corresponding Secretary		Х							0	0	0
(6) Lesley Reeves-Hunt	5.0										
Membership Secretary		Х							0	0	0
(7) John Schoeneman	5.0								***************************************	1	_
Treasurer		X							0	0	0
(8) L. Michelle Lewis	5.0										
Director		Х	<u> </u>	<u> </u>				ļ	0	0	0
(9) Dr. May Jacobson	5.0										_
Director		X	J	ļ			ļ		0	0	0
(10)Sharon Pflueger	5.0										
Director		Х					<u> </u>	<u> </u>	0	0	0
(11) Faye Strauss	5.0										
Director		X			<u>.</u>				0	0	0
(12)Adrian Woodfork	5.0										_
Director		Х		<u>L</u>					0	0	0
(13)Janet Van Wormer	5.0								÷		
AKC Delegate		Х							0	0	0
(14)											

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	/ees			lighe	st C	omp	ensated E	mployees (co	ntinue	d)		
	(A) Name and title	(B) Average hours per	box,	ot ch untes	Pos eck s pe	more rson	than ois both	n an		(D) eportable npensation	(E) Reportable compensation fr	mo	Estir amo	F) nated unt of	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		from the ganization /1099-MISC)	related organizations (W-2/1099-MIS		compe frot orgar and i	ther ensation the nization related izations	ı
(15)							Ω						/	,	
(16)															
(17)													Audatura, a		
(18)						_									V
(19)														ad adalasas historica in a	
(20)															e Plante 1889 e Parelle a P. P. P. P.
(21)						ļ									
(22)					<u> </u>										
(23)										Auditor (A. V. Mari altra S. Tananar		_	annondra a a baran a a baba	, <u>-</u>	
(24)						<u> </u>								g 1.994 mg m g 11 mm m m m m m	
(25)		LEAD OF ALL DESCRIPTION OF THE PERSON OF THE													
1b c d								A A A		0	A to be a section of the control of	0			0
2	Total number of individuals (including bu reportable compensation from the organ		d to th	1056	e lis	ted ——	abov	e) w	rho r	eceived m	ore than \$100	0,000	of ———	1	
3	Did the organization list any former or employee on line 1a? <i>If</i> "Yes," complete	Schedule J	for su	ich .	indi	vidu	ıal	-					3	Yes	No X
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150,	,000)?	f "Y∈	es,"	com	plete Sch	nedule J for	such	4		Х
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co? <i>If "Yes," c</i>	ompe compl	nsa ete	tior <i>Scl</i>	i fro iedu	m an ıle J 1	y ur for s	relat <i>uch</i>	ed organi <i>person</i>	zation or indiv	idual	5		X
Section	on B. Independent Contractors														
1	Complete this table for your five highest compensation from the organization. Re year.	compensat	ted in ensation	dep on f	enc or t	lent he c	contra alent	ract dar y	ors t year	hat receiv ending wi	ed more than th or within th	\$100, ie orga	ooo of	on's t	ax
	(A) Name and business ad	dress							De	(B) escription of	services	C	(C) Compens		
None	to report														
	A SAME OF THE COLUMN TO THE CO														
														AA-14-11	
2	Total number of independent contract received more than \$100,000 of comper	ors (includi	ng bi	ut r orga	not niza	limi atior	ted t	o tl	nose	listed ab	ove) who				
	Coorda monda and programs of components										132	<u> </u>	For	m 99 () (2012)

Part	VIII	Statement of Reve	nue						
		Check if Schedule O	contains a resp	onse to any ques	 			<u> </u>	<u> []</u>
					(A) Total revenue	fi	(B) lated or xempt inction evenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1a	Federated campaigns	. l 1a	. Safar Tania, kamin staniak atau katau katau katau ka					
Grants	b		1b						
S, G	С	Fundraising events .	1c	20,100					
Gifts, ilar An	d	Related organizations	1d						
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (con							
fior er S	f	All other contributions, gi							
Contributions, and Other Sim		and similar amounts not inc		24,998					
onti	g	Noncash contributions includ							
	h	Total. Add lines 1a-1	<u> </u>	Business Code	112,548	بجنبت			
Program Service Revenue	2-	Education & Publica	ation	611710	23,087	, Şiradên	23,087		
Seve	2a b	Education & Publica		011/10	25,067	ļ	23,087		
9	C							Committee of the control of the cont	of selection and development of the selection of the sele
<u>~</u>	d		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~					:	
Š	e	*****				ļ			
g E	f	All other program serv	vice revenue .						an ann ann an t-airean
6	g	Total. Add lines 2a-2		>	23,087	34.25			
	3	Investment income and other similar amo	(including divi		5,490				5,490
	4	Income from investment	t of tax-exempt	ond proceeds >					
	5	Royalties							
			(i) Real	(ii) Personal					
	6a	Gross rents							
	b	Less: rental expenses							
	C	Rental income or (loss)	!	0	🕇 i National Control (1995)				
	d	Net rental income or (67.015	0				
	7a	Gross amount from sales of assets other than inventory	(i) Securities 7,486	(ii) Other					
	b	Less: cost or other basis and sales expenses	6,21						
	С	Gain or (loss)	1,27	5 0					
	d	Net gain or (loss) .			1,275				1,275
Other Revenue	8a	Gross income from fu events (not including \$ of contributions reporte See Part IV, line 18	20,100 ad on line 1c).	121,217					
the	b	Less: direct expenses	•	38,950					
0	c	Net income or (loss) fi			82,267				82,267
	3	Gross income from ga	· · · · · · · · · · · · · · · · · · ·	a			Santa (Tana) Pandali		
	b	Less: direct expenses		b					
	С	Net income or (loss) fi		· L,	0	1 44 17 4.7		Talanti e Hadaaase igt	
	10a	Gross sales of in				1 (2 (7 (7) 1 (8 (7) (7)			
		returns and allowance	es	26,218					
	b	Less: cost of goods s		b 17,150					
	С	Net income or (loss) f	rom sales of in	ventory , . 🕨	9,068		9,608	0	0
		Miscellaneous R	evenue	Business Code					
	11a								-
	b					ļ			
	С					<u> </u>			
	d	,		L.,	<u> </u>	9-24-552	This was easier	and series as a real series of	ing and the second of the seco
	42	Total. Add lines 11a- Total revenue. See in			233,735	1.000	32,695	0	89,032
	12	TOTAL TEVELINE. See II	iou uctions	<u> </u>	233,/33	1	JZ,033	0	Form 990 (2012)

Form **990** (2012)

Part IX Statement of Functional Expenses

Sectio	on 501(c)(3) and 501(c)(4) organizations must cor	mplete all columns.	All othe	r organi	zatio	ons must complete c	olumn (A).
	Check if Schedule O contains a respons	se to any question	in this	Part IX			
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	Prog	(B) ram servic		(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	22,163		22,	163	good, co.ps.	CAPATIANS
2	Grants and other assistance to individuals in the United States. See Part IV, line 22					Francisco (Paparo Leiser), Charles (Charles)	plantinian longiyerinde di nayanik (1931), 1934, 1934, 1934, 1934, 1934, 1934, 1934, 1934, 1934, 1934, 1934, 1
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16					and a facility of the second s	Amerikanski primir i postalina skolika i postalina skolika i postalina skolika i postalina skolika i postalina
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees			·		- Andrew	
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 8	Other salaries and wages						
9	Other employee benefits						
10	Payroll taxes ,						
11	Fees for services (non-employees):						
a b	Management						
C	Accounting					A Participant of the Community of the Co	
d	Lobbying						
e	Professional fundraising services. See Part IV, line 17	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ABNONY/A	18324 (634)		s Bellingtweit between dieser	
f	Investment management fees		الماحقان والشاهال وأواشتها		tore to telephologica		LOTTES No from conditions continued to the continued to t
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)						The second secon
12	Advertising and promotion	16,578				16,578	
13	Office expenses	9,769		9,	769		***************************************
14	Information technology	7,833		7,8	333		
15	Royalties						
16	Occupancy						
17	Travel	1,550		1,	550		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials						
19	Conferences, conventions, and meetings .	120,546		120,	546		
20	Interest						· · · · · · · · · · · · · · · · · · ·
21	Payments to affiliates						A shaharafa
22	Depreciation, depletion, and amortization .	797			797		
23	Insurance		115-7, Q11-1, 11 <u>1</u> 5	(Jan Changer)			
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	Program expenses	26,494		26,4	194		and and a state of the state of
b	Printing	16,016		16,0	1		
c	Member newsletters	15,969		15,9			
d	Legislative expenses	5,010			10		, , , , , , , , , , , , , , , , , , ,
е	All other expenses	7,961			19	5,042	
25	Total functional expenses. Add lines 1 through 24e	250,686		229,0)66	21,620	AMAZ (1941) Part (1947) / / / / / / / / / / / / / / / / / / /
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)				790 11		

P	art X	Balance Sheet				
		Check if Schedule O contains a response to any question in this Part I	Х			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		314,801	1	272,388
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
ts	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.			6	
Assets	7	Notes and loans receivable, net		ACCOUNT OF THE PARTY OF THE PAR	7	Annual Manhail Manhail (Manhail Manhail ann ann ann ann ann ann ann ann ann an
ď	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 7,249				
	b	Less: accumulated depreciation 10b 5,651		2,395		1,598
	11	Investments—publicly traded securities		122,894		127,957
	12	Investments—other securities. See Part IV, line 11	Ш		12	The second desired at a supplier V and the second of the Second
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets		10.004	14	31.000
	15	Other assets. See Part IV, line 11		10,604		31,800
	16 17	Total assets. Add lines 1 through 15 (must equal line 34)	Н	450,694	16 17	433,743
	18	Grants payable	H		18	
	19	Deferred revenue	Н		19	
	20	Tax-exempt bond liabilities			20	And the state of t
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	Н		21	
Ø	22	Loans and other payables to current and former officers, directors,			12 (A. 1813)	
Liabilities		trustees, key employees, highest compensated employees, and				
ī		disqualified persons. Complete Part II of Schedule L		····	22	
	23	Secured mortgages and notes payable to unrelated third parties	Н		23 24	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0		0
S	20	Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			20	
Balances	27	Unrestricted net assets		285,011	27	247,557
ala	28	Temporarily restricted net assets		118,575		139,078
cu C	29	Permanently restricted net assets		47,108	.,	47,108
Net Assets or Fund		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
ts c	30	Capital stock or trust principal, or current funds			30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
¥.	32	Retained earnings, endowment, accumulated income, or other funds .	Ш		32	
Net 1	33	Total net assets or fund balances	Ш	450,694		433,743
	34	Total liabilities and net assets/fund balances	Ц	450,694	34	433,743
						Form 990 (2012)

Check if Schedule O contains a response to any question in this Part XI 1 Total revenue (must equal Part XIII, column (A), line 12)	Part	t XI Reconciliation of Net Assets				
1 Total revenue (must equal Part VIII, column (A), line 12). 23,735 2 Total expenses (must equal Part IX, column (A), line 25). 2 0,50,686 3 Revenue less expenses. Subtract line 2 from line 1 3 (16,951) 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). 4 450,694 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 7 Investment expenses 7 Prior period adjustments 9 Prior period adjustments 10 Prior Pr		Check if Schedule O contains a response to any question in this Part XI				
Revenue less expenses. Subtract line 2 from line 1	1	Total revenue (must equal Part VIII, column (A), line 12)			233	,735
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . 4 4 550,694 Net unrealized gains (losses) on investments . 5 Donated services and use of facilities . 6 To investment expenses . 7 Prior period adjustments . 8 Prior period adjustments . 8 Other changes in net assets or fund balances (explain in Schedule O) . 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) . 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) . 10 Accounting Method used to prepare the Form 990: IX Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Accounting method used to prepare the Form 990: IX Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Accounting method used to prepare the Form 990: IX Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Accounting method used to prepare the Form 990: IX Cash Accrual Other If the organization's financial statements compiled or reviewed by an independent accountant? 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis Consolidated basis, or both: Separate basis	2		2		250	,686
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (8)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII 1 Accounting method used to prepare the Form 990: XI 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 Were the organization's financial statements compiled or reviewed on a separate basis, consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the lax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 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 V	3		3		(16	,951
6 Donated services and use of facilities 7 Investment expenses 7 7 8 8 Prior period adjustments 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)) 10 433,743 Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XI	4		4		450	,694
7 Investment expenses 7 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)) 10 433,743 Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XI	5	Net unrealized gains (losses) on investments	5			
8 Prior period adjustments 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)) 433,743 Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII	6		6			
9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 433,743 Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XI	7	Investment expenses	7			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII. Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	8		8			
Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990: XI 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: XI Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 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 In the organization of the organization undergo such audits			9			
Check if Schedule O contains a response to any question in this Part XII	10					
Check if Schedule O contains a response to any question in this Part XI			10	Ĺ.,	433	,743
Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	Part					of 1864s
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?		Check if Schedule O contains a response to any question in this Part XII		· · · · · · ·		
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?				F-17 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Yes	No
Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	1		. 1 . 1		7.4\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 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			naın	In Page		
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: X Separate basis	2			19 100 3 -		Mar.
reviewed on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	Za				^	3.555
 ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?			illeu i			
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 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						
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	h			215	*3.7%	X
separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	U		d on		41,1104	11 514 1
Separate basis			G OII	ŭ Distrib		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?				100.25		
of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	С		ersia	ht		
Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?						Х
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?		If the organization changed either its oversight process or selection process during the tax year, ex	olain	in 💮	-56.05	p. 15g.
the Single Audit Act and OMB Circular A-133?						
the Single Audit Act and OMB Circular A-133?	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in [
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b				1		Х
	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not unde	rgo th	ne		
Form 990 (2012)		required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	idits	3b		
				Fort	₁₁ 990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2012

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization

Employer identification number

Dobern	nan Pinscher	Club of Americ	a				3	8-61472	299	
Part I			ity Status (All orga						nstructio	ons.
			ition because it is: (Fo							
_			hes, or association of			ed in sec	tion 170(b)(1)(A)(i).	
			170(b)(1)(A)(ii). (Attac							
			spital service organiza							
4			on operated in conjun	ction with	n a hospit	al descril	ed in se	ction 170	(b)(1)(A)	(iii). Enter the
		ne, city, and stat								
5		on operated for)(1)(A)(iv). (Com	the benefit of a colle plete Part II.)	ge or uni	iversity o	wned or	operated	l by a go	vernmen	tal unit described in
			nment or government							
7			receives a substantia (A)(vi). (Complete Pai		its suppo	ort from a	govern	mental ur	nit or fror	n the general public
8 🗍	A community	trust described i	n section 170(b)(1)(A)	(vi). (Coi	mplete Pa	art II.)				
			receives: (1) more that				m contri	ibutions,	member	ship fees, and gross
	receipts from	activities related	to its exempt funct	ions—su	bject to	certain ex	ceptions	s, and (2)	no mor	e than 331/3% of its
			nt income and unre						n 511 ta	ax) from businesses
	acquired by the	ne organization a	fter June 30, 1975. S	ee sectio	n 509(a)(2). (Comp	lete Par	t III.)		
			operated exclusively							
11 🗌			nd operated exclusiv							
			licly supported organ							
			describes the type of				1			_
	a Type I	b 📙 Type					1	<i>,</i> .		ctionally integrated
e 📋			that the organization							
			ers and other than on	e or more	e publicly	support	d organ	izations c	lescribed	d in section 509(a)(1)
	or section 509		and the second second second				_			401
f			a written determination			that it is	a Type	I, Type I	i, or typ	p
a	,		ne organization acce			ontributio	from a	nu of the		. ,
g	following pers	ons?		_	-			·		F. 11.75.
			ndirectly controls, eit					described	d in (ii) a	nd Yes No
		_	ody of the supported	_			1			11g(i)
			on described in (i) abo							11g(ii)
			a person described ir							11g(iii)
h	Provide the to		on about the support	ed organ	ization(s).			·		·
	e of supported	(ii) EIN	(iii) Type of organization (described on lines 1–9		organization		du notify		s the ion in col.	(vii) Amount of monetary support
O:	ganization		above or IRC section				the organ zation in col. (i) of your		zed in the	sopport
			(see instructions))	Voc	No	supp	,		S.7	
				Yes	No	Yes	No	Yes	No	Factorial control of the second of the secon
(A)										
				 						
(B)										
	10.8.14.5.417.4									
(C)										
·				<u> </u>						Control of the Contro
(D)										
(E)										
(-/	7. DOMESTIC: T									
Total		Indoors 表现是是否的	[4] 化电影名字形式 医电影影响影响	1 3031393360	MATERIAL STATES	Imported	Haran Kabi.	15. 经营工员	Property of	0

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

Schedule A (Form 990 or 990-EZ) 2012

Part	Support Schedule for Organiza (Complete only if you checked the Part III. If the organization fails to	he box on line	e 5, 7, or 8 of	Part I or if	the organization	n failed to qu	alify under
	on A. Public Support			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	piedoc compi	sto r are m.)	
Caler	idar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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)	1,537.7					
6	Public support. Subtract line 5 from line 4.	ir erine ol que no a come la companya (in principal para paga		accompanies contractive and the property of		enigen mineral metak kenjerik, silah kelalah ke	
	on B. Total Support	And the second s	dam na charrente de la company	Mary Control of the C		. Proceedings of the Control of the	
	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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	ALTONOMY LA	Action of the second of the se				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for the organization, check this box and stop he	ne organizatior	n's first, secon	: 1	rth, or fifth tax y		
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2012 (line (6, column (f) di	vided by line 1	1, column (f)))	14	%
15	Public support percentage from 2011 Sch	nedule A, Part	II, line 14			15	%
16a	33 ¹ / ₃ % support test—2012. If the organi						
b	box and stop here . The organization qua 33½% support test—2011. If the organ check this box and stop here . The organ	nization did no	t check a box	on line 13	or 16a, and line		or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "f organization	ets the "facts-acts-acts-and-circu	and-circumsta ımstances" tes	nces" test, c it. The organ	heck this box ar fization qualifies	nd stop here. E as a publicly st	xplain in apported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	011. If the orga tion meets the neets the "facts	anization did no "facts-and-ci s-and-circumst	ot check a b rcumstances ances" test.	ox on line 13, 16 s" test, check th The organizatio	ia, 16b, or 17a, iis box and st o n qualifies as a	and line pp here. publicly
18	Private foundation. If the organization di instructions	d not check a l	box on line 13,	16a, 16b,	7a, or 17b, chec	k this box and :	see
						nedule A (Form 990	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.")	311,675	297,654	228,218	233,232	112,548	1,183,327
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	36,575	44,397	18,740	20,552	32,695	152,959
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 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	348,250	342,051	246,958	253,784	145,243	1,336,286
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8 C	Add lines 7a and 7b						1,336,286
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	348,250	342,051	246,958	253,784	145,243	1,336,286
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .	6,240	4,449	7,369	6,233	6,765	31,056
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	6,240	4,449	7,369	6,233	6,765	31,056
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					82,267	82,267
13	Total support. (Add lines 9, 10c, 11, and 12.)					02,207	1,449,609
14	First five years. If the Form 990 is for the organization, check this box and stop he	=			•	ear as a section	501(c)(3)
Section	on C. Computation of Public Suppor	 					
15	Public support percentage for 2012 (line			3, column (f))		15	92.18 %
16	Public support percentage from 2011 Scl					16	97.98 %
	on D. Computation of Investment In						
17	Investment income percentage for 2012 (17	2.14 %
18	Investment income percentage from 201	I Schedule A, P	art III, line 17			18	2.02 %
19a	33½% support tests—2012. If the organ						
_	17 is not more than 331/3%, check this box						
b	331/3% support tests—2011. If the organize line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di						

Part IV	Supplemental Information. Complete this part to provide the Part II, line 17a or 17b; and Part III, line 12. Also complete the instructions).	ne expla is part fo	nations required by Part II, line 10; or any additional information. (See
The Club	holds an annual convention with various events designed to	educate	and equip members and others
who atten	I to further the exempt purposes. Funds in excess of the ass	ociated	costs are used to advance the
Doberman	breed.	: : :	
		<u>:</u>	-11-04-0
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#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2012

Name of	f the organization			Employer identification number
Dobern	man Pinscher Club	of America	***************************************	38-6147299
Organiz	zation type (check o	ne):		
Filers o	f:	Section:		
Form 99	90 or 990-EZ	[X] 501(c)( 3 ) (enter number) organization		
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as	a private foi	undation
		527 political organization		
Form 99	90-PF	501(c)(3) exempt private foundation		
		4947(a)(1) nonexempt charitable trust treated as a pr	vate founda	ation
		☐ 501(c)(3) taxable private foundation		
	Only a section 501(c)	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the Ge	eneral Rule :	and a Special Rule. See
Genera	l Rule			
X		filing Form 990, 990-EZ, or 990-PF that received, during to one contributor. Complete Parts I and II.	ne year, \$5,0	000 or more (in money or
Special	l Rules			
	under sections 509	c)(3) organization filing Form 990 or 990-EZ that met the 33 la(a)(1) and 170(b)(1)(A)(vi) and received from any one contrib 5,000 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line and II.	utor, during	the year, a contribution of
	during the year, tot	)(7), (8), or (10) organization filing Form 990 or 990-EZ that r al contributions of more than \$1,000 for use <i>exclusively</i> for tooses, or the prevention of cruelty to children or animals. Co	eligious, ch	aritable, scientific, literary,
	during the year, co not total to more the year for an exclusion	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that ntributions for use <i>exclusively</i> for religious, charitable, etc., nan \$1,000. If this box is checked, enter here the total control religious, charitable, etc., purpose. Do not complete an anization because it received nonexclusively religious, charitar	purposes, t ibutions tha y of the par table, etc., o	out these contributions did It were received during the Its unless the <b>General Rule</b> Contributions of \$5,000 or
990-EZ	, or 990-PF), but it <b>n</b>	at is not covered by the General Rule and/or the Special Runst answer "No" on Part IV, line 2 of its Form 990; or chec-PF, to certify that it does not meet the filing requirements	k the box or	n line H of its Form 990-EZ or on
For Pape	rwork Reduction Act No	tice, see the Instructions for Form 990, 990-EZ, or 990-PF.	Sche	edule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization
Doberman Pinscher Club of America

Employer identification number

38-6147299

Part	Contributors (see instructions). Use duplicate co	oples of Part I if additional space is	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Nestle Purina PetCare Company  Checkerboard Square  St. Louis, MO 63164	\$ 28,061	Person X Payroll Concash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DPC of Greater Milwaukee PO Box 180456 Delafield, WI 53018	\$ 7,000	Person X Payroll Concash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Occupation (Complete Part II if there is a noncash contribution.)

Name of organization Employer identification number Doberman Pinscher Club of America 38-6147299 Noncash Property (see instructions). Use duplicate copies of Part I if additional space is needed. Part II (a) No. (c) FMV (or estimate) (b)
Description of noncash property given from (d) Date received Part I (see instructions) None To Report (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$

Name of organization

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Employer identification number Doberman Pinscher Club of America 38-6147299 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift from (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### SCHEDULE C (Form 990 or 990-EZ)

#### Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part IV, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations; Complete Parts I-A and B. Do not complete Part I-C

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

-	otion ozi organizations. Con	ipicio i uri i ri omy.		1			
f the c	organization answered "Yes	" to Form 990, Part IV, line 4, or Fo	orm 990-EZ, Part VI, I	ine 47 (Lobbyi	ng Activities),	, then	
		that have filed Form 5768 (election u		1			
• Se	ction 501(c)(3) organizations	that have NOT filed Form 5768 (elec	tion under section 501	(h)): Complete	Part II-B, Do n	iot complete Part II-A	
f the c	organization answered "Yes	" to Form 990, Part IV, line 5 (Prox	y Tax) or Form 990-E	Z, Part V, line	35c (Proxy Ta	ax), then	
	ection 501(c)(4), (5), or (6) orga	inizations: Complete Part III.	:				
	of organization		:	1		ntification number	
	rman Pinscher Club of A		:		8-6147299		
Part	The second secon	e organization is exempt ur	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<del>-                                    </del>		organization.	
1	· · · · · · · · · · · · · · · · · · ·	he organization's direct and ind	• • •		in Part IV.		
2	•				▶ \$	)	
3	Volunteer hours						
Part	Complete if the	e organization is exempt ur	der section 501(	c \/ 3\			
1		excise tax incurred by the organ	AL - NOR AND		<b>▶</b> \$		
2		excise tax incurred by organizat					
3		ed a section 4955 tax, did it file f	the state of the s	1		Yes	No
3 4a	Was a correction made?		01111 4720 101 till3 y	cai;		Yes	No
b	If "Yes," describe in Part					[ 103 [	140
Part		e organization is exempt ur	der section 501/	c) except s	ection 501	(c)(3).	
1		ly expended by the filing organ				(0)(0)	
	activities			'.	> \$		0
2	Enter the amount of the	filing organization's funds cont	ributed to other ord	anizations fo	r section		
		vities			🕨 \$		0
3	Total exempt function of	expenditures. Add lines 1 and	2. Enter here and	on Form 1	120-POL,		
	line 17b	'			▶ \$		0
4	Did the filing organization	a file Form 1120-POL for this ye	ar?			Yes	No
5		ses and employer identification r		1		izations to which th	e filina
Ū		ents. For each organization listed					
	the amount of political co	ontributions received that were p	romptly and directly	delivered to	a separate p	olitical organization	n, such
	as a separate segregated	fund or a political action comm	ittee (PAC). If addition	nal space is i	needed, prov	ide information in P	art IV.
	(a) Name	(b) Address	(c) EIN	(d) Amoun	t paid from	(e) Amount of polit	ical
	(a) wante	(5), (6), (6)	(4) 2	filing org	anization's	contributions receive	d and
				funds. If no	ne, enter -0	promptly and direct delivered to a sepa	
						political organization	on. If
						none, enter -0-	
/4)							
(1)			:				
/ <b>^</b> )							
(2)							
/2)	ANALIST V V V V V V V V V V V V V V V V V V V	1.10000000					
(3)			:				
(4)	14 - 14 - 14 - 14 - 14 - 14 - 14 - 14 -		:				
(4)			<u> </u>				
/E)							
(5)							
(0)	AAAAAAAAAAAA AAAAA AAAAA AAAAA AAAAA AAAA						
(6)						1	

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

Schedule C (Form 990 or 990-EZ) 2012

d Grassroots nontaxable amount

Grassroots ceiling amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Sched	ule C (Form 990 or 990-EZ) 2012						Page 2
	II-A Complete if the organization section 501(h)).	-					
۱ (	heck ▶ ☐ if the filing organization belonation belonger in the filing organization belonger.	ongs to an affili ses, and share	ated group (and of excess lobby	list in ing ex	Part IV e penditure	ach affiliated grou es).	ıp member's
3 (	heck 🕨 🗌 if the filing organization che	cked box A and	d "limited contro	ıl" pro	visions a	pply.	
	Limits on Lobby					(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amounts pa	nid or incurred.)			organization's totals	group totals
1a	Total lobbying expenditures to influence	public opinion (gr	rass roots lobbying	g) .		0	A
b	Total lobbying expenditures to influence	a legislative body	(direct lobbying)			5,000	
C	Total lobbying expenditures (add lines 1a	and 1b)				5,000	
d						301,786	
е						306,786	
f	Lobbying nontaxable amount. Enter t	he amount fron	n the following	table	in both		
	columns.		-			61,357	
	If the amount on line 1e, column (a) or (b) is:	The lobbying no	ontaxable amount is	s:			
	Not over \$500,000	20% of the amou	unt on line 1e.				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15	5% of the excess ov	er \$500	),000.		
	Over \$1,000,000 but not over \$1,500,000		0% of the excess ov				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5°	% of the excess ove	r \$1,50	0,000.		
	Over \$17,000,000	\$1,000,000.					ليك خفيفية التروي الأوروزية الأنافية
ç				. ,		15,339	
ŀ	Subtract line 1g from line 1a. If zero or le	ss, enter -0-				0	
i	Subtract line 1f from line 1c. If zero or les					0	
j	If there is an amount other than zero reporting section 4911 tax for this year?			he or		file Form 4720	Yes No
	(Some organizations that ma columns below. S	de a section 501 See the instructi	ons for lines 2a t	ot hav hroug	e to comp h 2f on pa	plete all of the five ige 4.)	
	Lobbying	Expenditures D	uring 4-Year Ave	ragin	g Period	r	
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c)	2011	(d) 2012	(e) Total
28		67,716	67,744		57,681	61,362	254,503
k	Lobbying ceiling amount (150% of line 2a, column (e))						381,755
(	: Total lobbying expenditures	5,000	5,000		5,000	5,000	20,000

Schedule C (Form 990 or 990-EZ) 2012

0

15,341

63,626

95,439

0

14,420

0

16,936

0

16,929

0

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT find (election under section 501(h)).	led l	Form	5768
	nch "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(b)
	lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?			
d	Mailings to members, legislators, or the public?			Lord Million
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			A
i	Other activities?			
i	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part		1(5), (	or se	ction
rait	501(c)(6).	(-,,		
				Yes No
4	Were substantially all (90% or more) dues received nondeductible by members?			1
1	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
2	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3
3 Part	Complete if the organization is exempt under section 501(c)(4), section 501(c	1(5)	or se	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes."	₹ (b)	Part	III-A, line 3, is
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of		
а	Current year	•	2a	
b	Carryover from last year		2b	
c	Total		2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	,	3	
	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	the	149.6	
4	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	vina		
	and political expenditure next year?	, ,	4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
			1 -	
Pan Comp	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; o, complete this part for any additional information.	Part I	I-A; a	ind Part II-B, line
The	e mission of the legislative committee is stated below. During fiscal year ending Septemb	er 30	, 201	3
a con	tribution to the National Animal Interest Alliance (NAIA) of \$5,000 was made. NAIA's mis	sion	is to	promote
anim	al welfare worldwide. Their website is www.naiaonline.org.			
~				
				rm 000 or 000 E7\ 201

Part IV Supplemental Information (continued)		
DPCA Legislative Committee Mission - Our mission is to become the lea	ding voi	e for educating the public,
as well as civic, community and political leaders, about the importance	of reaso	nable laws and regulations that
promote responsible animal ownership and preserve the human-anima	l bond; ¡	particularly where the welfare
of the Doberman Pinscher is concerned. To accomplish our mission we	are com	mitted to:
(1) Educating the public as well as civic, community and political leader	s and pr	oviding resources and
information about the historic importance of the Doberman Pinscho	er in the	United States and the crucial
role that working dogs play today;	: :	
(2) Support reasonable and humane animal welfare laws that promote	the righ	t to own dogs and encourage
responsible ownership practices;	· ·	
(3) Oppose legislative efforts that would restrict the rights of responsib	le dog o	wners;
(4) Actively create societal and legislative awareness that dogs must no	t be disc	riminated against based upon
their breed.	:	
		······································
***************************************		
	. <del></del>	
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	·	
	: -	
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	:	
	:	
######################################		Schedule C (Form 990 or 990-EZ) 2012

#### SCHEDULE D (Form 990)

#### Supplemental Financial Statements

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Employer identification number

	rman Pinscher Club of America		38-6147299
Pai	Organizations Maintaining Dono	or Advised Funds or Other Simil	ar Funds or Accounts. Complete if the
	organization answered "Yes" to Fo	orm 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		VA (1)
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and	donor advisors in writing that the as	sets held in donor advised
	funds are the organization's property, subject		
6	Did the organization inform all grantees, dor	nors, and donor advisors in writing th	at grant funds can be used
	only for charitable purposes and not for the	benefit of the donor or donor advis-	or, or for any other purpose
	conferring impermissible private benefit?		Yes No
	Conservation Easements. Comp	lete if the organization answered	Yes" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held to	by the organization (check all that app	ıly).
	Protection of natural habitat		ation of an historically important land area
	Preservation of open space	Preserv	ation of a certified historic structure
2		tion hold a qualified consequely	sufficient and the state of the
-	Complete lines 2a through 2d if the organizate easement on the last day of the tax year.	tion held a qualified conservation con	tribution in the form of a conservation
	one on the fact day of the tax year.	·	
а	Total number of conservation easements .		Held at the End of the Tax Year
b	Total acreage restricted by conservation eas	emente	
c	Number of conservation easements on a cer	tified historic structure included in (a)	2b
d	Number of conservation easements include	ed in (c) acquired after 8/17/06 and	d not on a
	historic structure listed in the National Regist		! !
3	Number of conservation easements modified		
	tax year ►	, , , , , , , , , , , , , , , , , , , ,	organization during the
4	Number of states where property subject to	conservation easement is located >	
5	Does the organization have a written poli	cy regarding the periodic monitoring	ig, inspection, handling of
	violations, and enforcement of the conservat	ion easements it holds?	· · · · · · · · · · · · · · · · · · ·
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conse	vation easements during the year
	<b></b>		
7	Amount of expenses incurred in monitoring, i	inspecting, and enforcing conservation	n easements during the year
	<b>\$</b>		
8	Does each conservation easement reported	on line 2(d) above satisfy the requirer	nents of section 170(h)(4)(B)
_	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization rep	ports conservation easements in its re	evenue and expense statement, and
	balance sheet, and include, if applicable, the organization's accounting for conservation ea		in's financial statements that describes the
Part			o or Other Circiles Assets
ندلند	Complete if the organization answer		
1a			t in its revenue statement and balance sheet
, -	works of art, historical treasures, or other s	similar assets held for public exhibit	on, education, or research in furtherance of
	public service, provide, in Part XIII, the text o		
b		- 1	in its revenue statement and balance sheet
	works of art, historical treasures, or other s	similar assets held for public exhibit	on, education, or research in furtherance of
	public service, provide the following amounts		
	(i) Revenues included in Form 990, Part VIII,	line 1	\$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works		
	following amounts required to be reported un	nder SFAS 116 (ASC 958) relating to t	nese items:
а	Revenues included in Form 990, Part VIII, line	e1	<u>• \$</u>
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

a term	Ulf Organizations Maintaining (	Collections of Ar	t, Historical I	reasures	, or Oth	ner Similar Ass	ets (conti	nued) –
3	Using the organization's acquisition, accollection items (check all that apply):	ccession, and othe	r records, chec	k any of th	ie follow	ing that are a sig	nificant us	e of its
а	☐ Public exhibition		d 🗌 Loan	or exchan	ae proar	ams		
b	Scholarly research		e  Other	1				
С	Preservation for future generations						=	
4	Provide a description of the organization	on's collections and	d evolain how t	nov further	the ora:	anization's evemi	nt nurnase	in Part
7	XIII.	on a concentra and	a explaint now to	ley turtiler	the orga	arnzanon s exem	or purpose	ni i cirt
5		مام میشمومی برم فتوناه،		biatariadi t		au athau aimilas		
5	During the year, did the organization s assets to be sold to raise funds rather t							[
Part				- 1				
FEIG	The state of the s	-	~	anizauon	answer	ed tes lo roi	111 990, Pa	art iv,
	line 9, or reported an amount Is the organization an agent, trustee,			z oontribu	tions or	other aposts not		
1a	included on Form 990, Part X?							f=1
				1			Yes	i i No
b	If "Yes," explain the arrangement in Par	t XIII and complete	the following ta	able:	Γ	Λ		
					-	<del> </del>	nount	
C	Beginning balance			- 1	1c			
d	Additions during the year		and the second s	1	1d			
е	Distributions during the year				1e		, ,	
f	Ending balance			1	1f			
2a	Did the organization include an amount	on Form 990, Part	X, line 21?	. , , .			Yes	☐ No
b	If "Yes," explain the arrangement in Par							
Pari	V Endowment Funds. Comple	te if the organizat	ion answered				10.	
		(a) Current year	(b) Prior year	(c) Two yea	rs back	(d) Three years back		ırs back
1a	Beginning of year balance	92,733	92,733	Ç	2,733	92,733	!	92,733
b	Contributions							
С	Net investment earnings, gains, and				en met mekerrer teknik til til til skrivet til	27 - 22 - 22 - 22 - 22 - 22 - 22 - 22 -		
	losses	2,048	1,494		1,334	1,447		1,556
d	Grants or scholarships	2,048	1,494		1,334	1,447		1,556
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses	to the body of the Port of the Armer Service and the Service Service and the Service S	-					
g	End of year balance	92,733	92,733		2,733	92,733		92,733
2	Provide the estimated percentage of th	, ,		CORRECT TO STATE OF THE STATE O			1	
a	Board designated or quasi-endowment	•		,				
b		8 %						
c	Temporarily restricted endowment ▶	0 %						
·	The percentages in lines 2a, 2b, and 2c		26					
За	Are there endowment funds not in the			at are held	and adr	ministered for the	}	
oa	organization by:	posocosion or the	organization the		arra aar	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ye	s No
	·						3a(i)	X
	(i) unrelated organizations						3a(ii)	X
	(11)		· ·	ula D2			3b	
b	If "Yes" to 3a(ii), are the related organiz						30	
4	Describe in Part XIII the intended uses							
Part		2			T		/.D. D	
	Description of property	(a) Cost or othe (investmen		or other basis ther)	de	Accumulated preciation	(d) Book va	aiue
1a	Land				المائدة المستعدد			
b	Buildings							
С	Leasehold improvements							
d	Equipment		7,249			5,651		1,598
е	Other		-					
Total.	Add lines 1a through 1e. (Column (d) m	ust equal Form 990	, Part X, columr	n (B), line 1	0(c).) .			1,598
	**************************************							

Part VII	Investments – Other Securities	. See Form 990, Part X.	line 12.		Ligo
I	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation: Cost or end-of-year market value	
	al derivatives	V			
	-held equity interests		1		
(3) Other		ALL THULST			
(A) Publ	icly traded securities	127,957	Historic co	st	
(B)					
(C)				A STATE OF THE STA	· · · · · · · · · · · · · · · · · · ·
(D)		77.0710			
(E)		· · · · · · · · · · · · · · · · · · ·			
(F)		TOTAL			
(G) (H)					
(H) (İ)					
	All moved and E 200 B				
Part VIII	(b) must equal Form 990, Part X, col. (B) line 12.)	127,957			
rait viii	Investments – Program Related (a) Description of investment type		line 13.		
	(a) Description of investment type	(b) Book value		(c) Method of valuation: Cost or end-of-year market value	
(1)		**************************************		Cost of Cho of year market value	
(2)	*****				
(3)	TOTAL			ANNUAL MANAGEMENT OF THE PROPERTY OF THE PROPE	
(4)			<u> </u>		
(5)			:		
(6)				- VAII.	
(7)					
(8)					
(9)				The second secon	
(10)				VVANAL HALLA	
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 13.) ▶	1000	1704-1913-447		
Part IX	Other Assets. See Form 990, Pa	TO THE STATE OF TH			** Springs of the last and the
	(a)	Description	:	(b) Book val	lue
(1)					
(2)					
(3)	- Washington Control of the Control				
(4)				:	
(5)		* TOP FACE ALL TOP AND ALL THE			
(6)	The state of the s	179.89		· · · · · · · · · · · · · · · · · · ·	
(7) (8)	Anvest				
(9)		- Alvariant and a second a second and a second a second and a second a second and a second and a second and a	····		
(10)		71ATA		MARIAN CONTRACTOR CONT	
	mn (b) must equal Form 990, Part X, co	I (B) line 15 )	:		
Part X	Other Liabilities. See Form 990,	Part X. line 25.			
1.	(a) Description of liability	(b) Book value			Patricia de la composición dela composición de la composición dela composición de la composición dela composición dela composición dela composición de la composición dela composición del
(1) Federal	income taxes	1011-1011-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
(2)	. *				
(3)		- Companies - Comp			
(4)		0			
(5)					
(6)		100000000000000000000000000000000000000			
(7)					
(8)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
(9)					
(10)					
(11)					
	b) must equal Form 990, Part X, col. (B) line 25.) ▶				
2. FIN 48 (AS	C 740) Footnote. In Part XIII, provide the te	xt of the footnote to the orga	nization's fina	ncial statements that reports the organ	nization's
liability for un	certain tax positions under FIN 48 (ASC 74	0). Check here if the text of the	ne footnote ha	s been provided in Part XIII	

		,					
chedu	le D (Form 990) 2012						
	XI Reconciliation of Revenue per Audited Financial Stateme	nnta l	AZEL	Dave		D-1	Page 4
1	Total revenue, gains, and other support per audited financial statements						urn
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	. ,	.   .			. 1	
a	Net unrealized gains on investments	2a	.				
b	Donated services and use of facilities	2b	$\vdash$				
C	Recoveries of prior year grants				~~1	-	
d	Other (Describe in Part XIII.)	2c			<del>.</del>		
-		2d	Щ.				
e	Add lines 2a through 2d		.   -	• •		. 2e	
3	Subtract line 2e from line 1		.   •			. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
a	Investment expenses not included on Form 990, Part VIII, line 7b	1	-			<u>—                                    </u>	
b	Other (Describe in Part XIII.)	4b	<u> </u>				
C E	Add lines <b>4a</b> and <b>4b</b>		1			. 4c	
5 Part						1	-4
1 1	Total expenses and losses per audited financial statements		-		*	• -	eturn
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		.   .			. 1	
a	Donated services and use of facilities	2a	.				
b	Prior year adjustments	2b	-				1
C	Other losses	2c	<del>  </del>	***************************************			
ď	Other (Describe in Part XIII.)	2d	$\vdash\vdash$				
e	Add lines 2a through 2d					. 2e	
3	Subtract line 2e from line 1					3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i .	i   .			.	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIII.)	4b	-				
C	Add lines 4a and 4b					. 4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line					<b>⊢</b> —	
art.							
elektria milember test etc	lete this part to provide the descriptions required for Part II, lines 3, 5, and	9: Par	rt III. I	ines 1	a and 4	 I: Part I\	V. lines 1b and 2b:
	line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b						
	ation.			,		•	•
			1				Marketin Marketin A
							and the second section of the section of the second section of the section of the second section of the section of th
							The state of the s
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			<b>T</b>				
							LL A. P.M. a. 5 11. P 11 11 11 11 11 11 11 11 11 11 11 11 11 11.
		_					Sahadula D (Earm 990) 2012

#### **SCHEDULE G** (Form 990 or 990-EZ) Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

► Attach to Form 990 or Form 990-EZ. ► See separate instructions Internal Revenue Service Name of the organization Employer identification number Doberman Pinscher Club of America 38-6147299 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. ■ Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations C X Special fundraising events d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (or retained by) (i) Name and address of individual (or retained by) fundraiser listed in (iv) Gross receipts (ii) Activity custody or control of contributions? or entity (fundraiser) from activity organization col. (i) Yes No 1 2 3 4 5 6 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing Registration not required by any states.

Part li

P	art II	Fundraising Events. Cor	mplete if the organizati	on answered "Yes" to F	orm 990, Part IV, lin	e 18, or reported more
		than \$15,000 of fundraisir gross receipts greater tha	n \$5,000.	and gross income on r	orm 990-EZ, lines 1	and 6b. List events with
			(a) Event #1 Annual Convention	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
ē.			(event type)	(event type)	(total number)	cof. (c))
Revenue	1	Gross receipts	141,317		VA1-1-	141,317
ш	2 3	Less: Contributions Gross income (line 1 minus	20,100			20,100
	J	line 2)	121,217			121,217
	4	Cash prizes			NAVA-	0
	5	Noncash prizes			- 100	0
enses	6	Rent/facility costs	10000L			0
Direct Expenses	7	Food and beverages			1,444,12	0
Dire	8	Entertainment				0
	9	Other direct expenses .	38,950	·		38,950
	10 11	Direct expense summary. Ad Net income summary. Combi	d lines 4 through 9 in co ne line 3, column (d), a	olumn (d)		( 38,950) 82,267
Pa	rt III	Gaming. Complete if the	organization answer			reported more
enue		than \$15,000 on Form 99	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			WATER COMMENTS	
Se	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
Ξ	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	Yes % No	
	7	Direct expense summary. Add	d lines 2 through 5 in co	ılumn (d) ,		( )
	8	Net gaming income summary	. Combine line 1, colum	in d, and line 7	<b>.</b> ▶	
	a Ist	ter the state(s) in which the org he organization licensed to op No," explain:	erate gaming activities i			Yes No
10: 		ere any of the organization's ga Yes," explain:		suspended or terminate		
					Schedu	ile G (Form 990 or 990-EZ) 2012

Schedu	ule G (Form 990 or 990-EZ) 2012					Page 🕻
11 12	Does the organization operate gaming activities with nonmembers is the organization a grantor, beneficiary or trustee of a trust or	a member of a	partnership or othe	r entity	Yes	
13	formed to administer charitable gaming? Indicate the percentage of gaming activity operated in:	•			☐ Yes	☐ No
a b	The organization's facility		,	13a		%
14	Enter the name and address of the person who prepares the organic records:	inization's gamin	g/special events boo	13b ks and		%
	Name ►					
	Address ►				×	
15a	Does the organization have a contract with a third party from revenue?	n whom the org	anization receives (		["] <b>v</b>	/  7 <b>k</b> ≠-
b	If "Yes," enter the amount of gaming revenue received by the organount of gaming revenue retained by the third party ► \$	anization 🕨 💲	and		[] Yes	∐ No
·	Name	:				
	Address ►					
16	Gaming manager information:	· · · · · · · · · · · · · · · · · · ·				
	Name ►	: : 	***	*** ** ** ** ** ** ** ** ** ** ** ** **		
	Gaming manager compensation ▶ \$	· ·				
	Description of services provided ▶	· · · · · · · · · · · · · · · · · · ·				
	☐ Director/officer ☐ Employee ☐ Inc	dependent contra	 actor 			
17 a	Mandatory distributions: Is the organization required under state law to make charitable retain the state gaming license?				□ v	[] N.
b	Enter the amount of distributions required under state law to be of spent in the organization's own exempt activities during the tax ye	listributed to othe	1		Yes	∐ No
Part	Supplemental Information. Complete this part to pro- columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, part to provide any additional information (see instructi	15c, 16, and 1				nis
		:				
	***************************************					
		· · · · · · · · · · · · · · · · · · ·		ak of Million and also also decides to a		
		:	***			
		:				
				* *** ** ** ** ** ** ** ** ** **		
			Schedu	le G (Form	n 990 or 990	)-EZ) 201
			1			,

## SCHEDULEI (Form 990)

Name of the organization

Part

Department of the Treasury Internal Revenue Service

or government

€

3

9

Part

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

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

OMB No. 1545-0047

Open to Public Inspection Епрloyer identification number

**%** □ Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, (h) Purpose of grant or assistance Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 38-6147299 (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance (d) Amount of cash grant (c) IRC section General Information on Grants and Assistance the selection criteria used to award the grants or assistance? if applicable (b) EIN Doberman Pinscher Club of America f (a) Name and address of organization

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

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

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

Schedule I (Form 990) (2012)

Schedule 1 (F	Schedule I (Form 990) (2012)  Edit   Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22	dividuals in the U	Jnited States. Con	plete if the organiz	ation answered "Yes" to F	Page 2 orm 990, Part IV, line 22.
	(a) Type of grant or assistance (b) Number of recipients	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV	Supplemental Information. Complete this part to information.		ide the information	required in Part I, I	provide the information required in Part I, line 2, Part III, column (b), and any other additional	and any other additional
Grants	Grants and assistance of less than \$ 5,000 to any one organizastion were provided to 10 small Doberman rescue groups and 2 grants to research organization	any one organizas	tion were provide	d to 10 small Dobe	rman rescue groups and	2 grants to research organization
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						Schedule I (Form 990) (2012)

#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Department of the Treasury Internal Revenue Service 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.

Open to Public

Inspection

Name of the organization Employer Identification number Doberman Pinscher Club of America 38-6147299 PART III, LINE 1: Excerpted from DPCAs Constitution: ARTICLE 1, SECTION 2. The objects of the Club shall be: 1. To promote the public's knowledge and appreciation of dogs in general and Doberman Pinschers in parlicular: 2. To produce, publish, and distribute to the general public educational materials about the proper care, treatment, breeding, health, development and training of Doberman Pinschers: 3. To support and promote study and research on the history, character, breeding, genetics and particular health problems of the Doberman Pinscher; 4. To establish a National Data Base of resource materials about the Doberman Pinscher: 5. To further understanding of the disease, defects, injuries and other ailments that afflict dogs in general and the Doberman Pinscher in particular: 6. To acknowledge and advance the critical role of an AKC recognized parent club in providing education, health research and support of rescue and reduction of overpopulation for the benefit of the general public, purebred dogs and Doberman Pinschers in particular; 7. To conduct activities including sporting events, sanctioned matches, specialty shows, obedience and tracking trials, and other such activities and events as may be held under the rules of the American Kennel Club, in furtherance of the ---above purposes; _____ 8. To otherwise preserve and protect the Doberman Pinscher and to do all things possible to bring its natural qualities to perfect; . 9. To urge members and breeders to accept the standard of the breed as approved by the American Kennel Club as the only standard of excellence by _____ which the Doberman Pinscher shall be judged.

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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2012

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Doberman Pinscher Club of America

Employer identification number

38-6147299

PART VI, LINES 6 TO 7b:

The Club is a not-for-profit corporation under Michigan having no shareholders. Membership is explained below:

**BY-LAWS** 

ARTICLE 1: Membership

SECTION 1. Eligibility. There shall be four (4) types of membership:

- (a) Active Membership Open to all persons eighteen years of age and older who are in good standing with the American Kennel Club and who subscribe to the purposes of this club. Only active members in good standing shall be allowed to vote and hold any office or board.
- (b) Chapter Club A local Doberman Pinscher Specialty Club, wishing to become a local Chapter Club must have ten (10) or more members and must have received recognition from the American Kennel Club to hold B-Sanctioned events. It shall expressly agree to incur no indebtedness on the part of the Doberman Pinscher Club of America.
- (c) Junior Membership Open to all persons not less than ten years of age nor older than eighteen years of age who otherwise meet the requirements for active membership. Junior members shall pay dues, but not vote, nor hold office.
- (d) Honorary Persons who in the opinion of the Board of Directors are worthy of recognition may be conferred the title of Honorary member. Honorary members shall not pay dues, may not vote nor hold office.

A candidate for club membership shall file its application with the Recording Secretary, together with a copy of its By-Laws, a list of its officers, directors, members and their addresses. Such application must be accompanied by one year's dues. It must be approved by a majority of the Board of Directors.

SECTION 2. Dues. Dues for active domestic membership are currently set at \$25.00 per year. Dues for those active members residing outside of the United States are currently set at \$35.00 in U. S. funds per year (includes \$10.00 postage surcharge). Chapter Club Membership dues are currently set at \$50.00 per year. Dues for junior membership shall be 50% of active membership dues. Dues may be adjusted from time to time by the Board of Directors by a 2/3-majority vote. However, dues increases shall not exceed \$5.00 per year per active member and \$10.00 per Chapter Club since last increased. Dues shall not exceed \$50.00 per year for active members and \$100.00 per year for Chapter Clubs. Increases in dues shall not occur more frequently than once in a two-year period. Dues shall be payable on or before the 1st day of January of each year. Persons having their membership approved in October, November or December are considered fully paid members for the following year. No member may vote whose dues are not paid for the current year. During the month of November, the Treasurer shall send to each member a statement of his dues for the ensuing year.

Membership effective date - Persons having their membership approved in October, November or December are considered to have an effective membership date of January 1, following. In the period between their membership approval and January 1, they may exercise all privileges of members except that of voting.

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

2012

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OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Name of the organization	Employer identification number
Doberman Pinscher Club of America	38-6147299
PART VI, LINES 6 TO 7b:	
The Club is a not-for-profit corporation under Michigan having no shareholder	ers. Membership is explained below:

SECTION 3. Election to membership. Each applicant for membership shall apply on a form as approved by the Board of Directors and which shall provide that the applicant agrees to abide by these Constitution and By-Laws, the Doberman Pinscher Club of America's Code of Ethics Club. The application for Active Membership shall state the name, applicant and it shall carry the endorsement of two members. Accompanying the application, the prospective member shall submit dues payment for the current year. Applications shall be submitted to the membership chairperson who shall process them in accordance with these By-Laws. Applicants may be elected at any meeting of the Board Of Directors or by written vote of the Directors by mail. Affirmative votes of 2/3 of the directors present at a meeting of the Board or 2/3 of the entire Board voting by mail shall be required to elect an applicant. An application for Active Membership which has received a negative vote by the Board may not be resubmitted to the Board prior to the endorsers at the next meeting of the Club, and the club may elect such applicant by favorable vote of 75% of the members present.

SECTION 4. Rights and Duties of Members:

- (a) Members have the right to propose and to petition the Board of Directors, Officers and Committee Chairpersons;
- (b) Members may propose an action to be voted on by the Board of Directors by petition. The Petition must be submitted in the form of a motion and be signed by a minimum of five (5) percent of active members in good standing;
- (c) All Officers and delegates of Chapter Clubs shall be DPCA members at the time of their election to office, but if not, they shall apply for DPCA membership within 30 days of their election.

SECTION 5. Termination of Membership. Membership may be terminated:

- (a) by resignation. Any member in good standing may resign from the Club upon written notice to the Membership Secretary, but no member may resign when in debt to the Club. Dues obligations are considered a debt to the Club and they become incurred on the first day of each calendar year,
- (b) by lapsing. A membership will be considered as lapsed and automatically terminated if such member's dues remain unpaid 31 days after the first day of the calendar year. In no case may a person be entitled to vote at any Club meeting or by mail whose dues are unpaid as of the date of that meeting, or mailing;
- (c) by expulsion. A membership may be terminated by expulsion as provided in Article VI of these By-Laws.



Department of Treasury Internal Revenue Service Ogden UT 84201

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DOBERMAN PINSCHER CLUB OF AMERICA 3050 SENNA DR STE A MATTHEWS NC 28105-6726

Notice	CP211A			
Tax period	September 30, 2013			
Notice date	July 7, 2014			
Employer ID number	38-6147299			
To contact us	Phone 1-877-829-5500			
	FAX 801-620-5555			

Page 1 of 1



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Important information about your September 30, 2013 Form 990

# We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your September 30, 2013 Form 990.

Your new due date is August 15, 2014.

## What you need to do

File your September 30, 2013 Form 990 by August 15, 2014. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

#### Additional information

- Visit www.irs.gov/cp211a.
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.



Department of Treasury Internal Revenue Service Ogden UT 84201

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DOBERMAN PINSCHER CLUB OF AMERICA 3050 SENNA DR STE A MATTHEWS NC 28105-6726

CP211A		
September 30, 2013		
April 7, 2014		
38-6147299		
Phone 1-877-829-5500		
FAX 801-620-5670		

Page 1 of 1



035603

Important information about your September 30, 2013 Form 990

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