Form 990-EZ

Department of the Treasury

Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-1150 2012

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

For the 2012 calendar year, or tax year beginning , and ending C Name of organization D Employer identification number Check if applicable: Address change Color Breed Council Inc 75-2501093 Name change Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number Initial return P. O. BOX 161995 817-222-6422 Terminated City or town, state or country, and ZiP + 4 F Group Exemption Amended return TX 76161-0995 Fort Worth Number > Application pending Check ▶ X if the organization is not Accounting Method: Cash X Accrual Other (specify) Website: ▶ www.colorbreedcouncil.com required to attach Schedule B (Form 990, 990-EZ, or 990-PF). Tax-exempt status (check only one) — |X| 501(c)(3) | 501(c)() | 4947(a)(1) or___ 527 Check ▶ | if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts, If gross receipts are \$200,000 or more, or if total assets (Part II, 70,552 line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I X Check if the organization used Schedule O to respond to any question in this Part I 2,500 1 Contributions, gifts, grants, and similar amounts received 61,915 Program service revenue including government fees and contracts 2 2 Membership dues and assessments 3 3 657 4 4 Investment income Gross amount from sale of assets other than inventory 5a Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Gaming and fundraising events 6 Gross income from gaming (attach Schedule G if greater than \$15,000) Gross income from fundraising events (not including \$____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) Less: direct expenses from gaming and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract Gross sales of inventory, less returns and allowances 7a 7b Less: cost of goods sold b Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7с C 5,480 8 Other revenue (describe in Schedule O) 8 70,552 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 Grants and similar amounts paid (list in Schedule O) 10 10 11 Benefits paid to or for members 11 12 Salaries, other compensation, and employee benefits 12 895 Professional fees and other payments to independent contractors 13 13 1,710 14 Occupancy, rent, utilities, and maintenance 14 1,367 Printing, publications, postage, and shipping 15 15 67,259 16 Other expenses (describe in Schedule O) 16 71,231 Total expenses. Add lines 10 through 16 17 17 -679 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 Vet Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 94,221 end-of-year figure reported on prior year's return) 19 -3,630 Other changes in net assets or fund balances (explain in Schedule O) 20 89,912 21 Net assets or fund balances at end of year. Combine lines 18 through 20.

Form 990-EZ (2012)

J	Part II Balance Sheets (see the instructions for I Check if the organization used Schedule O t	•	guestion in this Part II .			X
	3		** - * - * - * - 1	inning of year		(B) End of year
22	Cash, savings, and investments			145,513	22	137,602
	Land and buildings		I	0	23	
	Other assets (describe in Schedule O)			3,183	24	3,401
	· T.1-11		I	148,696	25	141,003
	Total liabilities (describe in Schedule O)			54,475	26	51,091
27	Net assets or fund balances (line 27 of column (B) must agr	ee with line 21)		94,221	27	89,912
	Part III Statement of Program Service Accom				21	Expenses
	Check if the organization used Schedule O				/Doc	uired for section
		to respond to any t	question in this Fart in		,	•
	hat is the organization's primary exempt purpose?					c)(3) and 501(c)(4)
	See Schedule O				-	nizations and section
	escribe the organization's program service accomplishments for e	_	• -			7(a)(1) trusts; optional
	measured by expenses. In a clear and concise manner, describ-		ed, the number of		for o	thers.)
pe	ersons benefited, and other relevant information for each program	ı title.				
28			.,			
	Approved judges attended for continuing edu	cation,	<pre></pre>			
	Judge applicants attended for initial certi	fication.				
	(Grants \$) If this amount includes	foreign grants, chec	k here	>	28a	71,231
29						
	(Grants \$) If this amount includes				29a	
				12.70	2.54	
30						
	(Grants \$) If this amount includes	foreign grants, chec	k here		30a	
31						
	(Grants \$) If this amount includes	foreign grants, chec	k here		31a	
Section.	2 Total program service expenses (add lines 28a through 31a) <u>.</u>	4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	32	71,231
	Part IV List of Officers, Directors, Trustees, and Key I Check if the organization used Schedule O to resp	Employees List each	one even if not compens in this Part IV	ated (see the ins	tructions	s for Part IV)
	Officers if the organization accarded an extension	(b) Average	(c) Reportable	(d) Heath ben	efits,	
	(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC)	contributions to e benefit plans,	mployee and	(e) Estimated amount of other compensation
		devoted to position	(If not paid, enter -0-)	deferred compe		30,101 20,11,101,103,101
	Sid Hutchcraft					
	President	2.00	0		0	0
	Darrell Bilke					
٠.	Vice Pres	2.00	0		0	0
	Terri Green			-		
	Director	2.00	0		0	0
_	Billy Smith					
	Treasurer	2.00	0		0	l o
_	Steve Taylor					
٠.	Secretary	2.00	0		0	0
_	Deanna O'Keefe	2.00	<u> </u>			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0		0	0
_	Director	2.00	V			
	Joyse Banister	.,				
	Director	2.00	0		0	0
	Christy Scott		_		_	_
	Director	2.00	0		0	0
,	,					
• •	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•••				
		• •				

Form 990-EZ (2012)

P	Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O (see instructions)	34		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	25.		x
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a 35b	ļ	
D	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	350		\vdash
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		x
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	336		1
30	the state of the second of the state of the	36		x
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a			
b	Did the organization file Form 1120-POL for this year?	37b	renderander	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9	_		
b	Gross receipts, included on line 9, for public use of club facilities	_		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			.,
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c			
_	reimbursed by the organization All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
е	transaction? If "Yes," complete Form 8886-T	40e	000000000	X
41	List the states with which a copy of this return is filed None	100	1 .	
42a		7-83	4-2	742
724	P O Box 161995			
		161		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country: ▶	.		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			- V
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		X
	If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			
43	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-EZ in field of Form 1041 — Check field			
	and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			113
44a		44a	000000000000000000000000000000000000000	X
b	completed instead of Form 990-EZ Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
D	completed instead of Form 990-EZ	44b	A GREGO CO	X
С	Did the organization receive any payments for indoor tanning services during the year?	_		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d	ļ	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		x
45b	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," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b	****************	X

Form 9	90-EZ (2012	Colo	r Breed	Council	Inc		75-25	01093			F	Page 4
					campaign activities c					4	Yes	No X
Par	tVI S	Section 501(Ill section 501 0 and 51	(c)(3) organ (c)(3) organiz	i zations only zations must ans	swer questions 47-	-49b and 5	2, and com	olete the t	ables for line	:S	- 1 .	
		** *			*** · · · · · · · · · · · · · · · · · ·				.,,,,,,,,,,,,,,		Yes	No
,	year? If "Ye	s," complete So	hedule C, Part	II	section 501(h) electio					4		х
48 49a	is the orgar Did the orga	iization a schoo anization make	l as described i any transfers to	in section 170(b)(1 o an exempt non-cl)(A)(ii)? If "Yes," com haritable related orga	iplete Sched	ule E			49	Эа	X
				ction 527 organiza live highest compo	tion? Insated employees (c				and key	49) as	
	•		-		pensation from the or							
		(a) Name and titl			(b) Average hours per week devoted to position	(c) Re	portable ensation 2/1099-MISC)	(d) Hea	Ith benefits, ns to employee plans, and compensation		ated amo ompensa	
Noi	ne											
				. , ,							1	
	,			· · · · · · · · · · · · · · · · · · ·	.,			de de la constante de la const				
					.,							
51	Complete th	er of other empi nis table for the f compensation	organization's 1	five highest compe	ensated independent none, enter "None."		who each rec	eived more	than			
				contractor paid mor			(b) Typ	e of service		(c) Com	pensation	1
Non	ie			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	< > > . < 1 > > > > < < > < . < . < . < . < . < . <	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,							
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,							
		,	• > • • • • > > > • • • • • • • • • • •									
52	Did the orga	anization compl	ete Schedule A	ctors each recelvir (? Note : All section (completed <u>Sched</u>	n 501(c)(3) organizati		7(a)(1)		.	• X y	′es _	No
Under p	penalties of porrect, and co	perjury, I declare omplete. Declarat	that I have exam ion of preparer (nined this return, incl other than officer) is	uding accompanying so based on all information	chedules and on of which pr	statements, ar eparer has any	nd to the besty knowledge	t of my knowled	lge and be	lief, it is	
Sign Here			itchcraf	t		Pi	resider	ite it				
	Drints	Type or print name Type preparer's name			Preparer's signature			Date			TIN	
Paid		. , ,			. R. Parr, Jr.				Check '25/13 self-er	if	000806	50
Prepa		R. Parr, Jr. sname ▶		·····		P.C.		1 03/	Firm's EiN		1253	
Use C	S	s address >	PO Box	54869	1-4869				Phone no. 8	17-78	W-	
May th	he IRS disc	uss this return v		er shown above? S						► X		No
										Form	990-EZ	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

| 2012

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury internal Revenue Service Name of the organization

Color Breed Council Inc

Employer Identification number 75-2501093

P	art I	Reas	on for Public Charity	Status (All organizations	must co	mplete t	this pa	rt.) See	instr	uctions	3.					
The	orgar	nization is not a	private foundation becaus	e it is: (For lines 1 through 11, che	ck only or	ne box.)										
1		A church, cor	vention of churches, or ass	oclation of churches described in	section 1	70(b)(1)(A)(i).									
2		A school desc	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)												
3				ce organization described in sect	ion 170(b)	(1)(A)(iii)).									
4	П	,	. ,	d in conjunction with a hospital de)(A)(iii).	Enter th	ne hospi	tal's na	ıme,				
		city, and state	-	•			() (•						
5		-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	of a college or university owned or	operated	by a gove	ernmenta	l unit de	scribed	in		* * * * * * * *				
_		-	b)(1)(A)(iv). (Complete Par	-	•	, ,										
6	\Box			overnmental unit described in se c	tion 170/	h)(1)(A)(v	n.									
7			· · · · · · · · · · · · · · · · · · ·	substantial part of its support from				n the ger	eral nu	blic						
•		-	section 170(b)(1)(A)(vi). (C	, ,,		inonica, an	,,, 4,,	1 (110 90)	,							
8				I 70(b)(1)(A)(vi). (Complete Part I	13											
9	X	=) more than 33 1/3% of its suppo		ntributions	membe	ership fe	es and	aross						
J		=		pt functions—subject to certain e												
		support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses														
10		acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)														
11	H	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the														
• •	Ш	=	= '	ed organizations described in sec						tion						
		509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated														
е				anization is not controlled directly							, ·	J				
ŭ	ш			•		-										
			_		•		other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1)									
	or section 509(a)(2).															
f		If the organiza		rmination from the IRS that it is a	Type I. Ty	ne II. or T	vpe III s	upporting	1							
f			ation received a written dete	rmination from the IRS that it is a	Type I, Ty	pe II, or T	Type III s	upporting	3							
		organization,	ation received a written dete				Type III s	upporting			, . ,	,				
f g		organization, Since August	ation received a written dete check this box 17, 2006, has the organiza	rmination from the IRS that it is a			Type III s	upporting	3		, , , , , , , ,	,				
		organization, Since August following per	ation received a written dete check this box 17, 2006, has the organiza sons?	tion accepted any gift or contribut	on from a	ny of the			3			,	Yes	No		
		organization, Since August following per- (i) A person	ation received a written dete check this box 17, 2006, has the organiza sons? who directly or indirectly co	tion accepted any gift or contribut	on from an	ny of the	ed in (ii) a	and			, . , , .	11g(i)	Yes	No		
		organization, Since August following person (i) A person (iii) below	ation received a written detecheck this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the	tion accepted any gift or contribut ontrols, either alone or together w supported organization?	on from ar	ny of the	ed in (ii) a	and				11g(i) 11g(ii)	Yes	No		
		organization, Since August following pers (i) A person (ii) below (ii) A family	ation received a written detecheck this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person descri	tion accepted any gift or contribution ontrols, either alone or together wi supported organization? ped in (i) above?	on from an	ny of the	ed in (ii) a	and				11g(i) 11g(ii) 11g(iii)	Yes	No		
		organization, Since August following persor (ii) A persor (iii) below (iii) A family (iii) A 35% c	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describentrolled entity of a person of	tion accepted any gift or contribution ontrols, either alone or together wi supported organization? oed in (i) above? described in (i) or (ii) above?	on from an	ny of the	ed in (ii) a	and				11g(ii)	Yes	No		
g	i) Nam	organization, Since August following persor (ii) A persor (iii) below (iii) A family (iii) A 35% c	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describentrolled entity of a person of	tion accepted any gift or contribution ontrols, either alone or together wi supported organization? ped in (i) above?	on from a	ny of the	ed in (ii) a	and				11g(ii)				
g		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? Described organization(s). (iii) Type of organization (described on lines 1–9	on from all th persons (iv) Is the cincol. (I) Ii	ny of the s describe	(v) Did)	and rou notify nization in	(vi) organizai	Is the		11g(ii) 11g(iii)	of mone			
g		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	on from all th persons (iv) Is the cincol. (I) Ii	ny of the	ed in (ii) a	and	(vi) organizat (I) organi	Is the		11g(ii) 11g(iii) Amount o	of mone			
g		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? Described organization(s). (iii) Type of organization (described on lines 1–9	on from all th persons (iv) Is the cincol. (I) Ii	ny of the s describe	(v) Did y the organ	and	(vi) organizat (I) organi	Is the ion in col. ized in the		11g(ii) 11g(iii) Amount o	of mone			
g h		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			
g h		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			
g <u>h</u> ((A)		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			
g <u>h</u> ((A)		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			
g h (A)		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			
g h (A)		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			
g h (A) (B) (C)		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			
(A) (B) (C)		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the check that is the controlled entity of a person of the properties of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the controlled entity of the controlled entity of a person of the controlled entity of a person of the co	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			
(A) (B) (C)		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the controlled entity of a person of the politowing information about the controlled entity of a person of the controlled entity of the controlled entity of the controlled entity of a person of the controlled entity of th	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			
g		organization, Since August following per (i) A persor (ii) belov (ii) A family (iii) A 35% co Provide the foliographics	ation received a written detected this box 17, 2006, has the organizations? who directly or indirectly cov, the governing body of the member of a person describing the properties of the politowing information about the controlled entity of a person of the politowing information about the controlled entity of a person of the controlled entity of the controlled entity of the controlled entity of a person of the controlled entity of th	ontrols, either alone or together wisupported organization? Ded in (i) above? Described in (i) or (ii) above? The supported organization(s). (described on lines 1–9 above or IRC section	(iv) Is the cincol (i) ligoverning	organization sted in your document?	(v) Did y the organ	rou notify nization in of your port?	(vi) organizat (I) organi U.	Is the don in col. zed in the S.?		11g(ii) 11g(iii) Amount o	of mone			

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2011 Schedule A, Part II, line 14 15 15 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization b. 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test-2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions

18

Schedule A (Form 990 or 990-EZ) 2012 Color Breed Council Inc

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

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

Sec	tion A. Public Support					·	
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,500	2,500	2,500	2,500	2,500	12,500
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	60,662	78,265	78,369	77,575	67,395	362,266
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						, , , , , , , , , , , , , , , , , , ,
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	63,162	80,765	80,869	80,075	69,895	374,766
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						374,766
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	63,162	80,765	80,869	80,075	69,895	374,766
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	476	7	12	618	657	1,770
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	170			0.00		
С	Add lines 10a and 10b	476	7	12	618	657	1,770
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,					T	
	and 12.)	63,638				70,552	376,536
14	First five years. If the Form 990 is for the organization, check this box and stop here	organization's first,	second, third, fourt				>
Sec	tion C. Computation of Public S						
15	Public support percentage for 2012 (line 8,	, column (f) divided l	by line 13, column (f))		15	99.53%
16	Public support percentage from 2011 School						99.25%
Sec	tion D. Computation of Investme	ent Income Per	centage				
17	Investment income percentage for 2012 (li	ine 10c, column (f) d	livided by line 13, o	olumn (f))			%%
18	Investment income percentage from 2011				.,	18	1%_
19a	33 1/3% support tests—2012. If the orga		ck the box on line 1	4, and line 15 is m	ore than 33 1/3%, a	and line	, promote a
	17 is not more than 33 1/3%, check this bo						> X
b	33 1/3% support tests—2011. If the orga						. —
	line 18 is not more than 33 1/3%, check th						, >
20	Private foundation If the organization did	i not check a hoy or	iline 14, 19a, or 19	b. check this box a	nd see instructions		▶

Schedule A (Fo	rm 990 or 990-EZ) 2012	Color B	reed Co	uncil	Inc	7	5-2501093	Page 4
Part IV	Supplemental Inf Part II, line 17a or instructions).	ormation. Con	plete this p	part to pro	vide the explana	tions required	by Part II, line 10);
***************************************					***************************************		.,	
			, , ,					
*************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• • • • • • • • • • • • • • • • • • • •			.,		······································	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			.,		*******************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• • • • • • • • • • • • • • • • • • • •
		,				.,		
						*******	,	
			************			• • • • • • • • • • • • • • • • • • • •		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
• • • • • • • • • • • • • • • • • • • •								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
• • • • • • • • • • • • • • • • • • • •	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***********					,
• • • • • • • • • • • • • • • • • • • •							***************************************	
		,						
,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	* * * * * * * * * * * * * *			*********		
							•••••	.,,
						**************	***************************************	
		••••	,					

	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		*************					
								.,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,					
		•••••						
,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					,		
***************************************				4 • • • • • • • • • • • •		*****		

••••••								

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012

OMB No. 1545-0047

Open to Public Inspection

Color Breed Council Inc

Employer identification number 75-2501093

Color Breed Counci	LI Inc		75-2501093
Form 990-EZ, Part I, Line 8 -	- Other Reve	nue	
Description		Amount	
Room Rebate	\$	5,430	
Returned Check Fees	\$	50	
	Total \$	5,480	
Form 990-EZ, Part I, Line 16	- Other Exp	enses	
Description		Amount	
Expenses			
Supplies	\$	1,777	
Travel	\$	6,702	
Vending & Catering	\$	21,887	······································
Liability insurance	\$	300	
Awards	\$	500	
Bank Service Charges	\$	1,420	
Contract Labor-Instructor	\$	32,981	
Per Diem	\$	1,885	
Other	\$	-193	
	Total \$	67,259	
Form 990-EZ, Part I, Line 20	- Other Cha	nges in Net As	ssets or Fund Balances
Description		.,	Amount
Description			

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

Department of the Treasury Internal Revenue Service

► See separate instructions.

► Attach to your tax return.

Identifying number Name(s) shown on return Color Breed Council Inc 75-2501093 Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) 2 2 2,000,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1, If zero or less, enter -0-. If married filing separately, see instructions . . . (b) Cost (business use only) (a) Description of property Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2013, Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service 2,355 during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 829 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 0 17 17 MACRS deductions for assets placed in service in tax years beginning before 2012 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (f) Method (g) Depreciation deduction (e) Convention (a) Classification of property (business/investment use period only-see instructions) 19a 3-year property 1,921 200DB 384 5.0 HY 5-year property 200DB 434 62 7.0 HY 7-year property d 10-year property 15-year property 20-year property 25 yrs. S/L 25-year property S/L Residential rental 27.5 yrs. MM property MM S/L 27.5 yrs. MM S/L 39 yrs. Nonresidential real property ММ S/L Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs. 12-year S/L 40 yrs. S/L MM 40-year Summary (See instructions.) Part IV Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 3,630 and on the appropriate lines of your return. Partnerships and S corporations—see instructions. For assets shown above and placed in service during the current year, enter the 23 23 portion of the basis attributable to section 263A costs

Form 4562 (2012)

For Paperwork Reduction Act Notice, see separate instructions.

1079 Color Breed Council Inc 75-2501093

FYE: 12/31/2012

Federal Asset Report Form 990, Page 1

Asset	П	Description	Date I <u>n Service</u>	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
	GDS Property: Equipment		9/30/12 =	3,842 3,842	X	1,921 1,921	5 HY 200DB	0 0	2,305 2,305
	GDS Property: Equipment		12/31/12	868 868	X .	434 434		0	496 496
1 2		Sold/Scrapped: 3/31/12 Sold/Scrapped: 9/30/12 Other Depreciation ACRS and Other Deprec	2/01/09 8/18/09 10/01/11 	3,798 1,412 1,231 6,441 6,441		3,798 1,412 1,231 6,441		3,692 1,099 103 4,894 4,894	106 313 410 829
Grand Totals Less: Dispositions and Transfers Less: Start-up/Org Expense Net Grand Totals		rs -	11,151 5,210 0 5,941		8,796 5,210 0 3,586		4,894 4,791 0 103	3,630 419 0 3,211	

1079 Color Breed Council Inc 75-2501093

FYE: 12/31/2012

AMT Asset Report Form 990, Page 1

Asset	De	escription	Date I <u>n Service</u>	Cost	Bus Sec. 179		Basis for Depr	Per	Conv Meth	Prior	Current
	OS Property: nipment		9/30/12	3,842 3,842		X .	1,921 1,921	5	HY 200DB	0 0	2,305 2,305
	OS Property: uipment		12/31/12	868 868		X	434	7	HY 200DB	0	496 496
Prior MA 3 Equ	CRS: nipment		10/01/11	1,231 1,231		X	0	5	MQ200DB	1,231	0
	rojectors aptops	Sold/Scrapped: 3/31/12 Sold/Scrapped: 9/30/12 Other Depreciation	2/01/09 8/18/09	3,798 1,412 5,210			3,798 1,412 5,210		MO S/L MO S/L	3,692 1,099 4,791	106 313 419
	Total ACRS and Other Depreciation		5,210		;	5,210			4,791	419	
Grand Totals Less: Dispositions and Transfers Net Grand Totals		11,151 5,210 5,941			7,565 5,210 2,355			6,022 4,791 1,231	3,220 419 2,801		

1079 Color Breed Council Inc

75-2501093

Bonus Depreciation Report

Page 1

FYE: 12/31/2012

Asset	Property Description	Date In Service	Tax Cost	Bus <u>Pct</u>	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: I	[₹] orm 990, Page 1							
	ipment ipment	9/30/12 12/31/12	3,842 868		0 0	1,921 434	0	1,921 434
		Form 990, Page 1	4,710		0	2,355	0	2,355
		Grand Total	4,710		0	2,355	0	2,355

1079 Color Breed Council Inc

75-2501093

Depreciation Adjustment Report All Business Activities

FYE: 12/31/2012

Form	<u>Unit</u>	<u>Asset</u>		Description	Tax	AMT	AMT Adjustments/ <u>Preferences</u>
MACR	S Adjus	stments:					
Page 1 Page 1	1	4 5	Equipment Equipment		2,305 496 2,801	2,305 496 2,801	0 0 0

1079 Color Breed Council Inc 75-2501093 Future Depreciation Report FYE: 12/31/13

FYE: 12/31/2012

Form 990, Page 1

<u>Asset</u>	Description	Date In Service	Cost	Tax	AMT
Prior N	AACRS:				
4 5	Equipment Equipment	9/30/12 12/31/12	3,842 868	615 106	615 106
			4,710	721	721
Other I	Depreciation:				
3	Equipment	10/01/11	1,231	410	0
	Total Other Depreciation		1,231	410 _	0
	Total ACRS and Other Depreciation		1,231	410	0
	Grand Totals		5,941	1,131	721

					·	
Page 1		Gain / Loss	0			
	ther	Depreciation	\$ 3,798 \$ 1,412 \$			
	Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Other	Cost & Expense	\$ 3,798			
Federal Statements	of Assets Other	Sale Price	\$ \&		·	
ederal S	5c - Sale	Date Sold	3/31/12 9/30/12			
Ť	Z, Part I, Line	Date Acquired	2/01/098/18/09			
Souncil Inc	Form 990-E	Description Whom Sold				
1079 Color Breed Council Inc 75-2501093 FYE: 12/31/2012		How Received	4 Projectors Purchase 4 Laptops Purchase Total			

1079 Color Breed Council Inc 75-2501093 FYE: 12/31/2012	Federal Statements	Page 2
	Schedule A, Part III, Line 1(e)	
	Description	Amount
Sponsorship Income-OKC Total		2,500
	Schedule A, Part III, Line 2(e)	
	Description	Amount
Seminar Fee Income Returned Check Fees Room Rebate		61,
Total	w	67,395
	Schedule A, Part III, Line 10a(e)	
	Description	Amount
Interest Total	w w	657

Forms 990 / 990-EZ Return Summary

For calendar year 2012, or tax year beginning

, and ending

75-2501093

Net Asset / Fund Balance at Begin	ning of Year		_	94,221
Revenue				•
Contributions		2,500		
Program service revenue		61,915		
Investment income		657		
Capital gain / loss	 			
Special events:		1 1 10000		
Gross revenue				
Direct expenses				
Net income				
Other income		5,480		
Total revenue			70,552	
Expenses				
Program services				
Management and general	 			
Fundraising		111888811111 - T. 11 -		
Total expenses			71,231	
			11,231	-679
Excess / (deficit)				<u> </u>
Other changes				-3,630
Reconciliation of F	Revenue		Reconciliation of E	xpenses
Reconciliation of F			Reconciliation of E	
otal revenue per financial statements		Total expenses per	Reconciliation of E	
otal revenue per financial statements ess:		Total expenses per Less:	r financial statements	
otal revenue per financial statements ess: Unrealized gains		Total expenses per Less: Donated servic	r financial statements ces	
otal revenue per financial statements ess: Unrealized gains Donated services		Total expenses per Less: Donated servic Prior year adju	r financial statements ces	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries		Total expenses per Less: Donated servic Prior year adju Losses	r financial statements ces	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other		Total expenses per Less: Donated servic Prior year adju Losses Other	r financial statements ces	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other lus:		Total expenses per Less: Donated servic Prior year adju Losses Other Plus:	r financial statements ces stments	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other lus: Investment expenses		Total expenses per Less: Donated servic Prior year adju Losses Other Plus: Investment exp	r financial statements ces stments	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other lus:		Total expenses per Less: Donated service Prior year adjutesses Other Plus: Investment exp	r financial statements ces stments	
fotal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other Plus: Investment expenses Other		Total expenses per Less: Donated service Prior year adjutesses Other Plus: Investment exp	r financial statements ces stments censes	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other Plus: Investment expenses Other		Total expenses per Less: Donated service Prior year adjutesses Other Plus: Investment exp	r financial statements ces stments censes	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other lus: Investment expenses Other		Total expenses per Less: Donated service Prior year adjuted Losses Other Plus: Investment exported Total expenses	r financial statements ces stments censes	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other lus: Investment expenses Other		Total expenses per Less: Donated service Prior year adjutesses Other Plus: Investment exporter Total expenses Balance Sheet Ending 141,003	r financial statements ces stments censes enses per return	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other llus: Investment expenses Other Total revenue per return	Beginning 148,696	Total expenses per Less: Donated service Prior year adjutesses Other Plus: Investment exporter Total expenses Balance Sheet Ending 141,003	r financial statements ces stments censes enses per return	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other Plus: Investment expenses Other Total revenue per return Assets	Beginning 148,696 54,475	Total expenses per Less: Donated service Prior year adjutesses Other Plus: Investment exported Total expenses	r financial statements ces stments censes enses per return Differences	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other lus: Investment expenses Other Total revenue per return Assets Liabilities	Beginning 148,696	Total expenses per Less: Donated service Prior year adjutesses Other Plus: Investment exporter Total expenses Balance Sheet Ending 141,003 51,091	r financial statements ces stments censes enses per return	
Total revenue per financial statements ess: Unrealized gains Donated services Recoveries Other Plus: Investment expenses Other Total revenue per return Assets Liabilities	Beginning 148,696 54,475	Total expenses per Less: Donated service Prior year adjuted Losses Other Plus: Investment exported Total expenses Balance Sheet Ending 141,003 51,091 89,912	r financial statements ces stments censes enses per return Differences	
fotal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other Plus: Investment expenses Other Total revenue per return Assets Liabilities	Beginning 148,696 54,475 94,221	Total expenses per Less: Donated service Prior year adjutesses Other Plus: Investment exported the Total expenses Plus: Investment exported the Ending 141,003 51,091 89,912	r financial statements ces stments censes enses per return Differences	
otal revenue per financial statements ess: Unrealized gains Donated services Recoveries Other lus: Investment expenses Other Total revenue per return Assets Liabilities	Beginning 148,696 54,475 94,221	Total expenses per Less: Donated service Prior year adjuted Losses Other Plus: Investment exported Total expenses Balance Sheet Ending 141,003 51,091 89,912	r financial statements ces stments censes enses per return Differences	