

Form **990-EZ**

Short Form

Return of Organization Exempt From Income Tax

OMB No 1545-1150

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

2013

Open to Public Inspection

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning 01/01, 2013, and ending 12/31, 20 13

B Check if applicable

- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

C Name of organization

Saluki Club of America Inc

Number and street (or P O box, if mail is not delivered to street address)

3582 Bryce St

City or town, state or province, country, and ZIP or foreign postal code

Cocoa, FL 32926

Room/suite

D Employer identification number

24-6025076

E Telephone number

321-433-8131

F Group Exemption Number

G Accounting Method Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ <http://www.salukiclub.org>

J Tax-exempt status (check only one) - 501(c)(3) 501(c) (7) ◀ (insert no) 4947(a)(1) or 527

K Form of organization Corporation Trust Association Other

L 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, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ

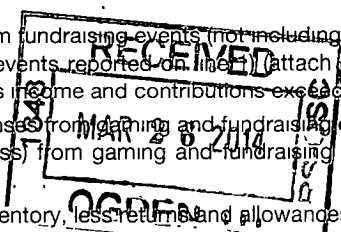
\$ 82,184

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21			
Revenue	1	Contributions, gifts, grants, and similar amounts received		1,343																												
	2	Program service revenue including government fees and contracts		72,165																												
	3	Membership dues and assessments		8,676																												
	4	Investment income		0																												
	5a	Gross amount from sale of assets other than inventory	5a	0																												
	b	Less: cost or other basis and sales expenses	5b	0																												
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0																												
	6	Gaming and fundraising events																														
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0																												
	b	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)	6b	0																												
c	Less: direct expenses from gaming and fundraising events	6c	0																													
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	0																													
7a	Gross sales of inventory, less returns and allowances	7a	0																													
b	Less: cost of goods sold	7b	0																													
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0																													
8	Other revenue (describe in Schedule O)	8	0																													
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	82,184																													
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	0																												
	11	Benefits paid to or for members	11	0																												
	12	Salaries, other compensation, and employee benefits	12	0																												
	13	Professional fees and other payments to independent contractors	13	0																												
	14	Occupancy, rent, utilities, and maintenance	14	5,158																												
	15	Printing, publications, postage, and shipping	15	22,721																												
	16	Other expenses (describe in Schedule O) <u>See Schedule O, Statement 1</u>	16	45,197																												
17	Total expenses. Add lines 10 through 16	17	73,076																													
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	9,108																												
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	35,142																												
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	0																												
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	44,250																												

SCANNED APR 01 2014



Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	35,142	44,250
23 Land and buildings	0	0
24 Other assets (describe in Schedule O)	0	0
25 Total assets	35,142	44,250
26 Total liabilities (describe in Schedule O)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	35,142	44,250

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? See Schedule O, Statement 2

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 In order to fulfill it's objectives, the SCOA holds 3 to 4 events each year. The largest of this is our National Specialty. At this event, SCOA holds educational seminars, exhibitions of Salukis from the desert, costume (Continued on Schedule O, Statement 3) (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	0
29 _____ (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30 _____ (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	0
32 Total program service expenses (add lines 28a through 31a)	32	0

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Jay Kappmeier Board Member	10	0	0	0
Gary Roush President	10	0	0	0
Debbie Felicano Recording Secretary	0	0	0	0
Jane Taylor Corresponding Secretary	10	0	0	0
Katie Souder Treasurer	0	0	0	0
Kevin Carlson Board Member	10	0	0	0
Catherine Comroe Board Member	10	0	0	0
Brian Duggan Board Member	10 00	0	0	0
Linda Scanlon Vice President	10 00	0	0	0
Sharon Furlong Board Member	10 00	0	0	0
Monica Stoner AKC Delegate	10	0	0	0

Part V 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

		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		✓
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)		✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		✓
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
c	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		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		
b	Did the organization file Form 1120-POL for this year?		✓
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?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9		0
b	Gross receipts, included on line 9, for public use of club facilities 39b 0		0
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		
c	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 ▶		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		✓
41	List the states with which a copy of this return is filed ▶		
42a	The organization's books are in care of ▶ <u>Katie Souder</u> Telephone no ▶ <u>321-433-8131</u> Located at ▶ <u>3582 Bryce St, Cocoa, FL 32926</u> ZIP + 4 ▶ <u>32926</u>		
b	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)? 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.	Yes	No
42b			✓
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? . If "Yes," enter the name of the foreign country. ▶		✓
42c			✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
c	Did the organization receive any payments for indoor tanning services during the year?		✓
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			
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		✓
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)		✓

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	✓

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization a section 527 organization?	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans and deferred compensation	(e) Estimated amount of other compensation
None				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving more than \$100,000 of compensation from the organization ▶ _____

52 Did the organization complete Schedule A? **Note** All section 501(c)(3) nonexempt charitable trusts must attach a completed Schedule A.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information furnished to preparer.

Sign Here
 ▶ Katie Souder
 Signature of officer
 ▶ Katie Souder, Treasurer
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name: _____ Preparer's signature: _____
 Firm's name: ▶ _____
 Firm's address: ▶ _____

May the IRS discuss this return with the preparer shown above? See instructions.

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

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

Saluki Club of America Inc

Employer identification number

24-6025076

Area with horizontal dashed lines for supplemental information.

Other Expenses Structured Explanation

Description	Amount
Dues	88
Ballot Tallying	76
Advertising	25
Agility Expense	829
AKC Delegate Expense	486
Bank Charges	890
Central Regional	1,160
Charitable Donations	250
Medallions	912
Corp Filing	50
Eastern Regional	4,012
Friend of the Saluki	144
Fururity	1,765
Genetics	394
Humane Purse	750
Insurance	490
Internet Expense	1,284
Lure Coursing	1,254
National Specialty	19,730
Office	90
Public Education	447
Rally	351
Supported Entries	415
State of Conn Corp Tax	256
Versatility	374
Fundraising Expense	2,891
Western Regional	5,784
Total	45,197

Primary Exempt Purpose

Primary Exempt Purpose

The Saluki Club of America, Inc (SCOA) is recognized by the America Kennel Club(AKC) as the Parent Club for the Saluki, which is a breed of dog. Objects of the club are set forth in Section 2 of Constitution, sections as follows: The object of the Club shall be a) further the advancement of pure-bred Salukis & do all possible to bring their natural qualities to perfection, b) encourage the organization of independent local Saluki Specialty Clubs in those localities where there are sufficient fanciers of the breed to meet the requirements of the AKC, c) promulgate the Standard of the Breed as approved by the AKC as the only Standard of excellence by which Salukis shall be judged, d) do all in its power to protect and advance the best interests of the breed and encourage sportsmanlike competition at dog shows & other activities approved by or regulated by the Club or AKC, e) conduct functions under guidelines of AKC. The purpose is the protection, preservation & advancement of the Saluki.

First Program Service Accomplishments Description

Description

exhibitions, in addition to a pure-bred show and lure coursing to highlight the qualities of the breed. This is a 5 day event with dinners and health testings. It is a well attended event with the purpose to provide a forum for the education of Saluki fanciers on the history, form, function and health concerns. SCOA also holds 2 -3 smaller events in the East, West and Middle parts of the states.