EXTENDED TO NOVEMBER 15, 2018

Form **990**

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open to Public Inspection

Α	For t	ne 2017 calendar year, or tax year beginning	and	lending		
В	Check applica	C Name of organization			D Employer identi	fication number
	Add	@ THOROUGHBRED KETIKEME	NT FOUNDATION, I	NC.		
_	Nan chai	ge Doing business as			13-	3132741
	Initia	Number and street (or P.O. box if mail is not d	elivered to street address)	Room/suite	E Telephone numb	er
	Fina	POST OFFICE BOX 834	<u> </u>			-226-0028
_	term	City or town, state or province, country, and			G Gross receipts \$	4,201,351.
Ļ	⊒retui		12866		H(a) Is this a group	
	App tion pend	F Name and address of principal officer: Offi			for subordinate	es? Yes X No
_		PO BOX 834, SARATOGA SI			H(b) Are all subordinates	included? Yes No
) (insert no.) 4947(a)(1)	or 527	If "No," attach	a list. (see instructions)
		ite: WWW.TRFINC.ORG			H(c) Group exempti	
			ssociation Other	L Year o	of formation: 1982	M State of legal domicile; NY
Pi	art I		200			
Çe	1	Briefly describe the organization's mission or mos				HOROUGHBRED
Activities & Governance		HORSES AND RE-ENTRY ORIEN				
Veri	2	Check this box if the organization disco		sea or more	1	*
Ĝ	3	Number of voting members of the governing body	(Part VI, line Ia)	900 I	3	15
•ઇ	4	Number of independent voting members of the		Υ	4	15
ţį	5	Total number of individuals employed in calendar	year 2017 (Part V, line 2a)		5	29
ξį	6	Total number of volunteers (estimate if necessary)	·		6	0
Ao		Total unrelated business revenue from Part VIII, co				
-	D	Net unrelated business taxable income from Form	1990-1, line 34			
		Contributions and grants (Part VIII line 1h)		Prior Year 2,803,436.	Current Year	
Revenue	8	Contributions and grants (Part VIII, line 1h)		2,003,430.		
Ver						
Re	10	Investment income (Part VIII, column (A), lines 3, 4 Other revenue (Part VIII, column (A), lines 5, 6d, 8d			296,814.	
	12	Total revenue - add lines 8 through 11 (must equa			242,802. 3,343,052.	
_	13	Grants and similar amounts paid (Part IX, column				
	14	Benefits paid to or for members (Part IX, column (0.	
"	15	Salaries, other compensation, employee benefits (965,312.	
Expenses		Professional fundraising fees (Part IX, column (A),			0.	799,300.
ber		Total fundraising expenses (Part IX, column (D), lin		77		0.
Ä		Other expenses (Part IX, column (A), lines 11a-11d			1,910,984.	1,770,333.
		Total expenses. Add lines 13-17 (must equal Part l			2,876,296.	
		Revenue less expenses. Subtract line 18 from line			466,756.	
Ses		Tievende 1000 expenses. Odelitaet iine 10 from iine	12		inning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			10,030,350.	
Ass	21-	Total liabilities (Part X, line 26)			2,490,123.	
E.E.	22	Net assets or fond balances. Subtract line 21 from	line 20		7,540,227.	
	rt II	Signature Block			,,010,00,0	3/100/0101
Unde	er pena	lities of perjury, I declare that I have examined this purpose	Irrelaction necessary in oracle dules	and statemer	nts, and to the best of m	y knowledge and belief, it is
true,	corre	t, and complete. Declaration of preparer (other that	(f) is based on all information of whi	preparer h	as any knowledge.	
)
Sign	1	Signature of officer			Date OL	100
Here	9	JOHN ROCHE, CFO			414	/18
		Type or print name and title		7-		
		Print/Type preparer's name	Preparer's signature	Da	if L	PTIN
Paid			AUSTIN M. SHEHEE		8/14/18 self-employ	
Prep		Firm's name SHEHEEN HANCOCK	& GODWIN LLP CPA	S	Firm's EIN	57-0522539
Use (Only	Firm's address PO DRAWER 428				
		CAMDEN, SC 29021	- 0		Phone no. 80	3-432-1424
May	the II	RS discuss this return with the preparer shown abo	ve? (see instructions)			X Vec No

	Form 990 (2017) THOROUGHBRED RETIREMENT FOUNDATION, INC. 13-3132741 Part III Statement of Program Service Accomplishments	Page 2
-		
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	Х
	RESCUE AND ADOPTION OF UNWANTED THOROUGHBRED HORSES AND RE-ENTRY	
	ORIENTED PROGRAM FOR INMATES.	
	ONTENTED INCOMM FOR IMPAIED.	
2	2 Did the organization undertake any significant program services during the year which were not listed on the	
		X No
	If "Yes," describe these new services on Schedule O.	
3	3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes	X No
	If "Yes," describe these changes on Schedule O.	
4	4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	3.
	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	4a (Code:) (Expenses \$ 1,814,325. including grants of \$) (Revenue \$)
	VOCATIONAL TRAINING PROGRAM IN HORSE CARE FOR INMATES. EARLY IN THE	
	THOROUGHBRED RETIREMENT FOUNDATION'S HISTORY MONIQUE S. KOEHLER,	
	FOUNDER AND CHAIRMAN OF THE BOARD, NEGOTIATED A MILESTONE AGREEMENT	
	WITH THE STATE OF NEW YORK DEPARTMENT OF CORRECTIONAL SERVICES. IN	
	EXCHANGE FOR LAND USE AND LABOR AT THE STATE'S WALKILL CORRECTIONAL	
	FACILITY, THE THOROUGHBRED RETIREMENT FOUNDATION WOULD DESIGN, STAF	F
	AND MAINTAIN A VOCATIONAL TRAINING PROGRAM IN EQUINE CARE AND	
	MANAGEMENT FOR INMATES. THIS UNIQUE PROGRAM HAS BEEN REPLICATED IN	
	KENTUCKY, FLORIDA, SOUTH CAROLINA, ILLINOIS, INDIANA, VIRGINIA,	
	MASSACHUSETTS AND MARYLAND. THIS IS A VOCATIONAL TRAINING PROGRAM I	N
	EQUINE CARE AND MANAGEMENT FOR INMATE-STUDENTS. THE GOAL OF THIS	
	PROGRAM IS TO TEACH INMATE-STUDENTS MARKETABLE SKILLS FOR EMPLOYMENT	T
4b	Hb (Code:) (Expenses \$) (Revenue \$))
_		
4c	C (Code:) (Expenses \$ including grants of \$) (Revenue \$))
1d	d Other program services (Describe in Schedule O.)	
TU	W	
le.	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses > 1,814,325.	
TC	T, OTA, 343.	

Form 990 (2017) THOROUGHBRED RETIREMENT FOUNDATION, INC. 13-3132741

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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	х	
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		Х
С	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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	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 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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			77
45	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 other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	45		Х
16		15		Λ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		41
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
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	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X

80 T 10

		9	Yes	
_	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
k 	, and the state of	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
-00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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			l
24a	Schedule J	23		X
248	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			
	0.4.4.4.4.4.4.1.1.1.1.1.1.1.1.1.1.1.1.1.			177
b		24a		X
c	POLICE CONTRACTOR CONT	24b		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		x
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		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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Х	
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
_	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			77
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		_X_
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Part II, III, or IV, and	33		
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	554		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	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? If "Yes," complete Schedule R, Part VI	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	x	

Form 990 (2017) THOROUGHBRED RETIREMENT FOUNDATION, INC. 13-3132741

Part V Statements Regarding Other IRS Filings and Tax Compliance

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	Check if Schedule O contains a response or note to any line in this Part V								
					Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	66		163	140			
b		-	0	1					
	Did the organization comply with backup withholding rules for reportable payments to vendors and	FA1:							
_	(gambling) winnings to prize winners?			1c	х				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a	29						
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	-		2b	х				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction								
За	Didd			За		X			
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	_		3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authorit	y over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial	accoun	t)?	4a		X			
b	If "Yes," enter the name of the foreign country:								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Account	s (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		*******	5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action?		5b		Х			
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he orgar	nization 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 contribu	tions or	gifts						
	were not tax deductible?			6b					
7	Organizations that may receive deductible contributions under section 170(c).								
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices pro	ovided to the payor?	7a	X				
				7b	X				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			_		37			
a.l	to file Form 8282?	1 1		7c		X			
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	7d)	70		х			
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7e 7f		X			
g	If the organization received a contribution of qualified intellectual property, did the organization file F		9 as required?	7g		- 22			
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		410//// 10000.	***					
_				8					
9	Sponsoring organizations maintaining donor advised funds.								
	Did the sponsoring organization make any taxable distributions under section 4966?			9a					
				9b					
0	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
1	Section 501(c)(12) organizations. Enter:	v 0							
а	Gross income from members or shareholders	11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
	Section 501(c)(29) qualified nonprofit health insurance issuers.		-						
а	Is the organization licensed to issue qualified health plans in more than one state?	•••••		13a	-				
	Note. See the instructions for additional information the organization must report on Schedule O.								
þ	Enter the amount of reserves the organization is required to maintain by the states in which the	461							
_	organization is licensed to issue qualified health plans	13b							
	Enter the amount of reserves on hand	13c		1/-		v			
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X			
	in 100, mad it med a form 720 to report these payments: if No, provide an explanation in Scheduli	 		14b					

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

_	Check if Schedule O contains a response or note to any line in this Part VI			X
Se	ction A. Governing Body and Management			-4.6
			Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year	15		
	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.			
k	in the state of th	15		
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		X
6	Did the organization have members or stockholders?	6		X
7a				
	more members of the governing body?	. 7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	. 7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	. 8a	X	
b	Each committee with authority to act on behalf of the governing body?		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	. 9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
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	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
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	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
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	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY, MD, FL, ND, NJ, VA, SC, IA, I	N, NE	IL,	AL
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availabl	е	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d financ	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	KYLIE BISSELL - ASSISTANT CONTROLLER - 518-226-0028			
	PO BOX 834, SARATOGA SPRINGS, NY 12866			_

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Earm	വവ	(2017)

THOROUGHBRED RETIREMENT FOUNDATION, INC.

13-3132741

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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.

(A)	(B)	(B) (C) Average Position						(D)	(E)	(F)
Name and Title	Average		not c	check	more	than		Reportable	Reportable	Estimated
	hours per	box	k, unle	ess pe	erson	is bot	h an	compensation	compensation	amount of
	week	1	T		director/trustee)			from	from related	other
	(list any hours for	Individual trustee or director				_		the organization	organizations	compensation
	related	96 01 0	stee			satec		(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	truste	Institutional trustee		yee	mper		(** 27 1033-141100)		and related
	below	dual	ution	±-	Key employee	stco	a			organizations
	line)	indiv	Instit	Officer	Key e	Highest compensated employee	72 E			J
(1) LESLIE PRIGGEN	0.50									
DIRECTOR		X						0.	0.	0.
(2) ERIN BIRKENHAUER	1.00									
DIRECTOR		X						0.	0.	0.
(3) CARL DOMINO	1.00									
SECRETARY & DIRECTOR		X		Х				0.	0.	0.
(4) PATRICK MACKAY	2.00									
CHAIRMAN & PRESIDENT & DIRECTOR		X		X				0.	0.	0.
(5) LEONARD HALE	30.00									
DIRECTOR		X						0.	0.	0.
(6) ROBERT MASIELLO	1.00									
DIRECTOR		X						0.	0.	0.
(7) SUZIE O'CAIN	1.00									
DIRECTOR		X						0.	0.	0.
(8) DR. NAT MESSER, DVM	0.50									
DIRECTOR		X						0.	0.	0.
(9) RICHARD MIGLIORE	0.50									
DIRECTOR		X						0.	0.	0.
(10) DR. WILLIAM MOYER, DVM	0.50									
DIRECTOR		Х		_			_	0.	0.	0.
(11) PAMELA BLATZ-MURFF	0.50									
TREASURER & DIRECTOR		X	_	Х			-	0.	0.	0.
(12) MAGGIE WOLFENDALE-MORLEY	1.00									
DIRECTOR		X	_	_		_	_	0.	0.	0.
(13) STEPHANIE BROTHERS NIXON	1.00									
DIRECTOR		Х				_		0.	0.	0.
(14) DONALD PLACE	1.00									
DIRECTOR	1	Х	_	_		-	_	0.	0.	0.
(15) PAUL SAYLOR	1.00									
DIRECTOR		Х	_				_	0.	0.	0.
			\dashv	-	-	+	-			
		- 1	- 1	2.6	- 1	- 1				

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

THOROUGHBRED RETIREMENT FOUNDATION, INC. Form 990 (2017) 13-3132741 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenue excluded from tax under Related or Total revenue Unrelated exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1f 1,682,976, 9 Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f 1 682 976 **Business Code** f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 187, 207 187,207. Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 587,167. 1 500 000 b Less: cost or other basis and sales expenses 129 200. 1,718,202. c Gain or (loss) 457 967. -218 202. d Net gain or (loss) 239 765 239.765 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a 135,017. b Less: direct expenses _____b 29 431, c Net income or (loss) from fundraising events 105.586 105,586. 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold _____ b c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a MISCELLANEOUS 115210 108,984. 108,984 b

108,984

348 749

2 324 518

d All other revenue

Total revenue. See instructions.

e Total. Add lines 11a-11d

292,793.

	tion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	CO1 FAE	400 407	00 401	100 507
7	Other salaries and wages	681,545.	408,487.	80,491.	192,567
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	CO 040	22 221	7 200	10 F30
9	Other employee benefits	60,042.	33,221.	7,289.	19,532
10	Payroll taxes	57,773.	33,029.	7,458.	17,286
11	Fees for services (non-employees):				
а		26,912.	9,214.	17,698.	
b		93,788.	9,214.	93,788.	
	Accounting	93,100.		93,700.	
d					
e					
f					
g	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	39,524.	22,978.	37.	16,509
13	Office expenses	8,214.	2,319.	5,450.	445
14	Information technology	0/214.	2/313.	371301	110
15	Royalties				
16	Occupancy	39,617.	14,139.	11,615.	13,863
17		16,717.	6,839.	2,602.	7,276
18	Payments of travel or entertainment expenses	207727	0/0001	2/0020	.,
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	98,163.	8,518.	89,424.	221
21	Payments to affiliates		- 1	1	
22	Depreciation, depletion, and amortization	41,751.	41,751.		
23	Insurance	64,960.	31,708.	32,868.	384
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 0.)				
а	BOARD	660,107.	660,107.		
b	FEED, HAY AND STRAW	251,016.	251,016.		
С	BLACKSMITH	81,993.	81,993.		
d	VETERINARY AND DENTAL F	66,018.	66,018.		
е	All other expenses SEE SCH O	281,553.	142,988.	33,871.	104,694.
25	Total functional expenses. Add lines 1 through 24e	2,569,693.	1,814,325.	382,591.	372,777
26	Joint costs. Complete this line only if the organization		10		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2017)
Part X Balance Sheet

Part A	palance Sneet					
	Check if Schedule O contains a response or no	te to any	line in this Part X			
				(A) Beginning of year		(B) End of year
	Cash - non-interest-bearing			920,443.	1	951,768
2	Savings and temporary cash investments		2	ľ		
3	Pledges and grants receivable, net			97,548.	3	62,566
4	Accounts receivable, net			•	4	
	Loans and other receivables from current and f					
	trustees, key employees, and highest compens	ated emp	ployees. Complete			
	Part II of Schedule L				5	
6	Loans and other receivables from other disqual	fied pers	sons (as defined under			
	section 4958(f)(1)), persons described in section		· ·			
	employers and sponsoring organizations of sec					
	employees' beneficiary organizations (see instr)	,			6	
	Notes and loans receivable, net				7	
8	Inventories for sale or use	*************			8	
9	Prepaid expenses and deferred charges			2,222.	9	6,188
	Land, buildings, and equipment: cost or other	1		4,222.	9	0,100
	basis. Complete Part VI of Schedule D	102	1 470 592			
	Less: accumulated depreciation			286,552.	100	277,367
	nvestments - publicly traded securities			8,723,585.		9,396,292
12	nvestments - other securities. See Part IV, line	 1		0,123,303.		3,390,494
	nvestments - program-related. See Part IV, line				12	
	ntangible assets				13	
	Other assets. See Part IV, line 11			0.	14	EE 1/0
16 7	Total assets. Add lines 1 through 15 (must equa	al line 34		10,030,350.	15	55,148 10,749,329
	Accounts payable and accrued expenses	619,142.				
				019,142.		390,719
	Grants payable				18	
	Deferred revenue				19	
	ax-exempt bond liabilities Escrow or custodial account liability. Complete F				20	
	oans and other payables to current and former				21	
22 .	ey employees, highest compensated employee					
- 1	- · · · · · · · · · · · · · · · · · · ·					
1 00	Complete Part II of Schedule L				22	
	Secured mortgages and notes payable to unrela				23	
	Insecured notes and loans payable to unrelated				24	
	Other liabilities (including federal income tax, pay					
	earties, and other liabilities not included on lines	•		1 000 001		1 050 000
	Schedule D			1,870,981.	25	1,250,000.
	otal liabilities. Add lines 17 through 25			2,490,123.	26	1,640,719.
	Organizations that follow SFAS 117 (ASC 958)		here 📂 🔼 and			
C	omplete lines 27 through 29, and lines 33 and			4		
27 U	Unrestricted net assets			-1,339,000.	27	-254,094.
28 T	emporarily restricted net assets			1,879,227.	28	2,362,704.
29 P				7,000,000.	29	7,000,000.
0	Organizations that do not follow SFAS 117 (AS	SC 958),	check here			
а	nd complete lines 30 through 34.					
30 C	capital stock or trust principal, or current funds				30	
	aid-in or capital surplus, or land, building, or equ				31	
32 R	etained earnings, endowment, accumulated inc				32	
33 10	otal net assets or fund balances			7,540,227.	33	9,108,610.
34 To	otal liabilities and net assets/fund balances			10,030,350.	34	10,749,329.

	10 1990 (2017) THOROUGHBRED RETIREMENT FOUNDATION, INC.	<u> 13-31</u>	<u> 132741</u>	. Pa	age 12
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,32	4,5	518.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,56	9,6	593.
3	Revenue less expenses. Subtract line 2 from line 1	3	-24	5,1	175.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,54	0,2	227.
5	Net unrealized gains (losses) on investments	5	50	5,9	939.
6	Donated services and use of facilities	6		- 0	
7	Investment expenses	7			
8	Prior period adjustments	8	-19	2,3	381.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,50	0,0	00.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	9,10	8,6	10.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were 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 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 audited on a separate				
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
	Act and OMB Circular A-133?	•	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ed audit			
	or audite explain why in Schodulo O and describe appretone taken to undergo auch audite		0.5		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number THOROUGHBRED RETIREMENT FOUNDATION. 13-3132741 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in 7 X section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). IV Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)

Schedule A (Form 990 or 990-EZ) 2017 THOROUGHBRED RETIREMENT FOUNDATION, INC. 13-3132741 Page 2 Part II 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.)

Se	ction A. Public Support		<u> </u>				
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and				1/	107	377.53
	membership fees received. (Do not						
	include any "unusual grants.")	2325507.	2239259.	2397128.	2803436.	1640224.	11405554.
2	Tax revenues levied for the organ-						
	ization'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	2325507.	2239259.	2397128.	2803436.	1640224.	11405554.
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						11405554.
	ction B. Total Support						TIAODODA.
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 4	2325507.	2239259.	2397128.	2803436.		11405554.
	Gross income from interest,			205,1201	20031301	1010221	11403334.
·	dividends, payments received on						
	securities loans, rents, royalties,		1				
	and income from similar sources	191 437	183,111.	180 720	179 947	185 907	921 122
q	Net income from unrelated business	131/13/1	103,111.	100,720.	エリンリンモー・	103,307.	741,122.
Ŭ	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	18,279.	79 400	135,638.		219 202	15,115.
11	Total support. Add lines 7 through 10	10,215.	75,400.	100,000.			12341791.
	Gross receipts from related activities,	etc (eee inetructio	ne)			12	12341/31.
	First five years. If the Form 990 is for	•		fourth or fifth to			
10	organization, check this box and stop	-			•	. , . ,	P
Sec	tion C. Computation of Public		centage				
	Public support percentage for 2017 (lin			lump (fl)		14	92.41 %
	Public support percentage from 2016					15	93.24 %
	33 1/3% support test - 2017. If the or						
	stop here. The organization qualifies a	-				•	
	33 1/3% support test - 2016. If the or						
	and stop here. The organization qualif						IS DOX
	10% -facts-and-circumstances test						or more
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" t						
	10% -facts-and-circumstances test						
	more, and if the organization meets the						1070 OI
	organization meets the "facts-and-circu						
	Private foundation. If the organization						
	THE ORGANIZATION	and not offect a D	on on mile 15, 10a	100, 17d, 01 1/D,	CHOCK THIS DOX SU	u see instructions	·····

Schedule A (Form 990 or 990-EZ) 2017 THOROUGHBRED RETIREMENT FOUNDATION, INC.13-3132741 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and					1.7	1.7.
	membership fees received. (Do not						
	include any "unusual grants.")						
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						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
	Tax revenues levied for the organ-						
4	ization'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						
	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						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6	3-7	(-/	(4)	(4) - 3 · 5	(0) 2511	(i) i otai
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	ne organization's	first, second, third	I, fourth, or fifth tax	x year as a section	n 501(c)(3) organiz	ation,
	check this box and stop here						
Sec	tion C. Computation of Public	Support Per	centage				
	Public support percentage for 2017 (lin-			olumn (f))		15	%
	Public support percentage from 2016 S						%
	tion D. Computation of Invest					10	70
	Investment income percentage for 201			a 13 column (fl)		17	%
	Investment income percentage from 20					18	
	33 1/3% support tests - 2017. If the or			n line 14 and line			7 is not
	more than 33 1/3%, check this box and						
	33 1/3% support tests - 2016. If the or						
	line 18 is not more than 33 1/3%, check						
20	Private foundation. If the organization	did not check a h	ox on line 14 19a	or 19b, check this	s hax and eee ins	atructione	
_	The state of the s		I I I I I I I I I I I I I I I I		UN WIIU 300 III	ALACTIONS.	

Schedule A (Form 990 or 990-EZ) 2017 THOROUGHBRED RETIREMENT FOUNDATION, INC.13-3132741 Page 4

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Ye	s	No
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activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer (a) and (b) below.					
3 Parent of Supported Organizations. Answer (a) and (b) below.		* *	26		
		4	ZU		
		Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
trustees of each of the currented argenizations? Provide details in B. 114			20		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			od		-
		of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2017 THOROUGHBRED RETIREMENT FOUNDATION, INC. 13-3132741 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 3 Add lines 1 through 3 4 4 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035 6 Recoveries of prior-year distributions 7 7 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 4 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2017

7

Schedule A (Form 990 or 990-EZ) 2017 THOROUGHBRED RETIREMENT FOUNDATION, INC.13-3132741 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) 5 6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2017 from Section C, line 6 10 Line 8 amount divided by line 9 amount (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2017 Amount for 2017 Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions. Excess distributions carryover, if any, to 2017 а **b** From 2013 c From 2014 d From 2015 e From 2016 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2017 from Section D. line 7: a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2018. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2013 b Excess from 2014

Schedule A (Form 990 or 990-EZ) 2017

c Excess from 2015
 d Excess from 2016
 e Excess from 2017

Schedule A	(Form 990 or 990 EZ) 2017 THOROUGHBRED RETIREMENT FOUNDATION, INC.13-3132741 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
-	
1	
=========	

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.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

Employer identification number

	THOROUGHBRED RETIREMENT FOUNDATION, INC. 13-3132741							
Organization type (check one):								
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.							
denoral flate								
	rion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or ny one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.							
Special Rules								
sections 509(a)(* any one contribu	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from utor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; EZ, line 1. Complete Parts I and II.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.								
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \ \$								
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

THOROUGHBRED RETIREMENT FOUNDATION, INC.

13-3132741

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GEOFFREY C HUGHES FOUNDATION 80 PINE STREET NEW YORK, NY 10005	\$ 50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE JOCKEY CLUB 40 E 52ND ST, STE 1500 NEW YORK, NY 10022	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	SOPHIE STENBECK PO BOX 834 SARATOGA SPRINGS, NY 12866	\$ 101,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	THOROUGHBRED AFTERCARE ALLIANCE 821 CORPORATE DR LEXINGTON, KY 40503	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	ESTATE OF EDITH MARIENHOFF 166 EAST PARK AVE LONG BEACH, NY 11561	\$105,683.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	HOUGHTON, ESTATE OF ELIZABETH BUCKINGHAM FARM CHESTERTOWN, MD 21620	\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THOROUGHBRED RETIREMENT FOUNDATION, INC.

13-3132741

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	RTS FAMILY FOUNDATION PO BOX 425 SARATOGA SPRINGS, NY 12866	\$ 60,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	EVANS, ROBERT 100 FIRST STAMFORD PLACE STAMFORD, CT 06902	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	KLARMAN, SETH PO BOX 171733 BOSTON, MA 02117	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THOROUGHBRED RETIREMENT FOUNDATION, INC.

13-3132741

(a) No. (b) FMV (or estimate) Description of noncash property given (c) FMV (or estimate) Date received	Part II	Noncash Property (see instructions). Use duplicate copies of	Part II if additional space is needed.	
(a) No. from Part I (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Description of noncash property given (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.)	No. from		FMV (or estimate)	
No. from Part I (a)			\$	
(a) No. from Part I (a) No. (b) Description of noncash property given (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. (b) Description of noncash property given (a) No. (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. (c) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (f) Date received (g) FMV (or estimate) (See instructions.) (h) Date received (c) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (f) Date received (f) D	No. from		FMV (or estimate)	
No. from Description of noncash property given See instructions.) (a) No. (b) FMV (or estimate) (see instructions.) (a) No. (b) FMV (or estimate) (see instructions.) (b) FMV (or estimate) (see instructions.) (c) FMV (or estimate) (see instructions.) (d) Date received (a) No. (b) FMV (or estimate) (see instructions.) (d) Date received (a) No. (c) FMV (or estimate) (see instructions.) (d) Date received (a) No. (b) FMV (or estimate) (see instructions.) (d) Date received (e) FMV (or estimate) (see instructions.) (f) Date received (g) Date received			\$	
(a) No. (b) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (b) Co FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. (b) FMV (or estimate) (See instructions.) (a) No. (c) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.)	No. from		FMV (or estimate)	
No. from Description of noncash property given (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (d) Date received (d) Date received (e) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (a) No. (c) FMV (or estimate) (See instructions.) (d) Date received (e) FMV (or estimate) (See instructions.)			\$	
(a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.)	No. from		FMV (or estimate)	
No. from Description of noncash property given (a) No. from Description of noncash property given (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Description of noncash property given Part I Description of noncash property given (b) FMV (or estimate) (See instructions.)			\$	
(a) No. (b) (from Part I (c) FMV (or estimate) (See instructions.) Date received	No. from		FMV (or estimate)	
No. (b) from Description of noncash property given Part I (C) FMV (or estimate) (See instructions.) Date received			\$	
	No. from		FMV (or estimate)	
			\$	

Name of organization Employer identification number THOROUGHBRED RETIREMENT FOUNDATION, INC.

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. once.)

\$\$\\$ \\$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose 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 (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 (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

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

Employer identification number

	THOROUGHBRED RETIREMENT FOUNDATION, INC.	13-3132741
Pa	organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of 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 assets held in donor advised fun	ds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used or	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confer	
-	impermissible private benefit?	Yes No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education) Preservation of a historically	•
	Protection of natural habitat Preservation of a certified hi	storic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	
	day of the tax year.	Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	ization during the tax
4	Number of states where preparty subject to concernation accordant is located.	
4 5	Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
5		Yes No
6	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservations.	
U	The state of the s	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea	saments during the year
•	\$ \$	sements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B	N(i)
•	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statem	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the org	·
	conservation easements.	
Pai	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement an	d balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	oublic service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and bath	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public sen	vice, provide the following amounts
	relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, μ	provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
	Revenue included on Form 990, Part VIII, line 1	> \$
b	Assets included in Form 990, Part X	▶ \$

	edule D (Form 990) 2017 THOROUG	GHBRED RETI	REMENT FOU	UNDATION,	INC.	13-31	327	11	Page 2
_	- Januario Ividilitatili	Collections of A	rt, Historical T	reasures, or O	ther Simi	lar Asse	tsicon	tinued	1)
3	Using the organization's acquisition, acces	sion, and other recor	ds, check any of the	e following that are	a significant	use of its	collecti	on ite	ms
	(check all that apply):								
a		•		change programs					
ŀ	,	•	Other						
C	_								
4	Provide a description of the organization's	collections and expla	in how they further	the organization's e	exempt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit						_		
	to be sold to raise funds rather than to be n	naintained as part of	the organization's c	ollection?			Yes		No
Pa	ert IV Escrow and Custodial Arrai	ngements. Compl	ete if the organization	on answered "Yes"	on Form 99	0, Part IV,	line 9, c	or	
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custoo						_		_
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XII	and complete the fo	ollowing table:						
							Amour	nt	
С	Beginning balance			***************************************	1c				
d	Additions during the year	***************************************	***************************************	***************************************	1d				
е	Distributions during the year				1e				
f	Ending balance				1f		_		
	Did the organization include an amount on F						Yes		No
	If "Yes," explain the arrangement in Part XIII								
Pa	rt V Endowment Funds. Complete	if the organization an	swered "Yes" on Fo						
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Fou	r years	back
	Beginning of year balance	8,658,441.	8,169,696.	8,692,379	. 8,4	70,975.	7	393	857.
b	Contributions		150,000.	100,000					
	Net investment earnings, gains, and losses	1,146,467.	150,755.	-173,616	. 6	59,028.	1	241	370.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	442,204.	187,990.	449,067	. 4	37,624.		164	252.
f	Administrative expenses								
g	End of year balance	9 362 704.	8,658,441.	8,169,696	. 8,6	92,379.	8	470	975.
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a)) held as:					
а	Board designated or quasi-endowment		_%						
	Permanent endowment	%							
С	Temporarily restricted endowment	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
3a	Are there endowment funds not in the posse	ssion of the organiza	ition that are held ar	nd administered for	the organiz	ation			
	by:							Yes	No
	(i) unrelated organizations			***************************************			3a(i)		X
	(ii) related organizations	************************					3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		wment funds.						
Par	t VI Land, Buildings, and Equipm	ent.							
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part 3	X, line 10.				
	Description of property	(a) Cost or ot	her (b) Cost	or other (c)	Accumulated) b	d) Bool	value	9
		basis (investm	ent) basis (other) d	epreciation				
1a	Land								
b	Buildings		1,10	2,641.	896,59	3.	20	5,0	48.
	Leasehold improvements								
d	Equipment		35:	2,691.	270,00	12.	82	2,6	89.
	Other			5,260.	26,63		-13	L,3'	70.
otal	Add lines 1a through 1e. (Column (d) must e	qual Form 990 Part	Column (R) line 1/	201		_		7 3	

Schedule D (Form 990) 2017

	A 111	RETIREMENT				1 age
Part VII Investments - Othe		_				
Complete if the organizat (a) Description of security or category (inc	tion answered "Yes" or					
(4) Financial desirables		(b) Book value	(c) Method of Vali	Jation: Cost	or end-of-year market	ralue
 Closely-held equity interests Other 						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
otal. (Col. (b) must equal Form 990, Part X	C. cal. (B) line 12.)					
Part VIII Investments - Prog						
Complete if the organizati		Form 990. Part IV. line	11c. See Form 990. Pa	rt X line 13		
(a) Description of investi	ment	(b) Book value			or end-of-year market v	alue
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(a)						
(8)						
(9) otal. (Col. (b) must equal Form 990, Part X	, col. (B) line 13.)					
(9) otal. (Col. (b) must equal Form 990, Part X	on answered "Yes" on	Form 990, Part IV, line 1 scription	1d. See Form 990, Pal	rt X, line 15.	(b) Book val	Je
(9) otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization	on answered "Yes" on		1d. See Form 990, Pal	rt X, line 15.	(b) Book val	ıe
(9) otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2)	on answered "Yes" on		1d. See Form 990, Pai	rt X, line 15.	(b) Book val	Je
(9) otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3)	on answered "Yes" on		1d. See Form 990, Pai	rt X, line 15.	(b) Book val	Je
(9) otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4)	on answered "Yes" on		1d. See Form 990, Pal	rt X, line 15.	(b) Book val	ie
(9) Otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5)	on answered "Yes" on		1d. See Form 990, Pal	rt X, line 15.	(b) Book val	Je
(9) ptal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5)	on answered "Yes" on		1d. See Form 990, Pai	rt X, line 15.	(b) Book val	ie
(9) ptal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7)	on answered "Yes" on		1d. See Form 990, Pai	rt X, line 15.	(b) Book val	ie
(9) otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7)	on answered "Yes" on		1d. See Form 990, Par	rt X, line 15.	(b) Book val	ie Ie
(9) otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7)	on answered "Yes" on (a) Des	scription		rt X, line 15.	(b) Book val	Je
(9) otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990	on answered "Yes" on (a) Des	scription 5.)				ıe
(9) otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990 Part X Other Liabilities.	on answered "Yes" on (a) Des (a) Part X, col. (B) line 18	5.) Form 990, Part IV, line 1				Je
(9) Dtal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) Dtal. (Column (b) must equal Form 990 Part X Other Liabilities. Complete if the organization (a) Proprieties	on answered "Yes" on (a) Des (a) Part X, col. (B) line 18	5.) Form 990, Part IV, line 1	1e or 11f. See Form 99			Je
(9) otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990 Part X Other Liabilities. Complete if the organization (a) Description (1) Federal income taxes	on answered "Yes" on (a) Des (a) Part X, col. (B) line 18	5.)	1e or 11f. See Form 99			Je
(9) Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) Part X Other Liabilities. Complete if the organization (a) Description (1) Federal income taxes	on answered "Yes" on (a) Des (b) Part X, col. (B) line 15 (c) answered "Yes" on (d) on of liability	5.)	1e or 11f. See Form 99 b) Book value			Je
(9) Ital. (Col. (b) must equal Form 990, Part X Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) Ital. (Column (b) must equal Form 990 Part X Other Liabilities. Complete if the organization (a) Description (1) Federal income taxes (2) NOTE PAYABLE – N	on answered "Yes" on (a) Des (b) Part X, col. (B) line 15 (c) answered "Yes" on (d) on of liability	5.)	1e or 11f. See Form 99 b) Book value			ıe
(9) Otal. (Col. (b) must equal Form 990, Part X Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990 Otal. (Column (b) must equal Form 990 Otal (a) Description (a) Description (1) Federal income taxes (2) NOTE PAYABLE – Notation (3)	on answered "Yes" on (a) Des (b) Part X, col. (B) line 15 (c) answered "Yes" on (d) on of liability	5.)	1e or 11f. See Form 99 b) Book value			Je
(9) Otal. (Col. (b) must equal Form 990, Part X Part IX Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990 Part X Other Liabilities. Complete if the organization (a) Description (1) Federal income taxes (2) NOTE PAYABLE — Notation (3) (4)	on answered "Yes" on (a) Des (b) Part X, col. (B) line 15 (c) answered "Yes" on (d) on of liability	5.)	1e or 11f. See Form 99 b) Book value			Je
(9) Otal. (Col. (b) must equal Form 990, Part X Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990 Ota	on answered "Yes" on (a) Des (b) Part X, col. (B) line 15 (c) answered "Yes" on (d) on of liability	5.)	1e or 11f. See Form 99 b) Book value			Je
(9) Otal. (Col. (b) must equal Form 990, Part X Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal Form 990 Part X Other Liabilities. Complete if the organization (a) Description (1) Federal income taxes (2) NOTE PAYABLE - N (3) (4) (5) (6)	on answered "Yes" on (a) Des (b) Part X, col. (B) line 15 (c) answered "Yes" on (d) on of liability	5.)	1e or 11f. See Form 99 b) Book value			Je 9th
(9) otal. (Col. (b) must equal Form 990, Part X Other Assets. Complete if the organization (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990 Part X Other Liabilities. Complete if the organization (a) Description (1) Federal income taxes (2) NOTE PAYABLE — N (3) (4) (5) (6) (7)	on answered "Yes" on (a) Des (b) Part X, col. (B) line 15 (c) answered "Yes" on (d) on of liability	5.)	1e or 11f. See Form 99 b) Book value			Je

Schedule D (Form 990) 2017

-	edule D (Form 990) 2017 THOROUGHBRED RETIREMENT FO	CTACKUC	ION, INC.	13-	3132741 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With	n Revenue per i	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12				
1	Total revenue, gains, and other support per audited financial statements			1	2,919,183
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	9 9			
а	• • • • • • • • • • • • • • • • • • • •	2a	505,939		
b	***************************************	2b	88,726.		
С	,	2c			
d					
е				2e	594,665
3	Subtract line 2e from line 1	· · · · · · · · · · · · · · · · · · ·		3	2,324,518.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	7 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b			1	
b	Other (Describe in Part XIII.)				•
C	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	4 - \0/°11		5	2,324,518.
га	Reconciliation of Expenses per Audited Financial Staten		n Expenses per	Ketu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				0 650 440
1	Total expenses and losses per audited financial statements			1	2,658,419.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	0 - 0	00 706		
a	Donated services and use of facilities		88,726.		
b	Prior year adjustments				
C .	Other losses				
d	Other (Describe in Part XIII.)				00 506
	Add lines 2a through 2d			2e	88,726.
3	Subtract line 2e from line 1	•••••	•••••	3	2,569,693.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)				•
_	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) t XIII Supplemental Information.			5	2,569,693.
		0.7.12 - 41	10, 5, 11, 11		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part			i; Part)	K, line 2; Part XI,
1165	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	iitionai intorn	nation.		
ZΔC	T V, LINE 4:				
. AI	I V, DING 4.				
ה	ORGANIZATION MAY EXPEND ANNUALLY AN AMOU	איים או∩יי	FYCEFDING	e T to	TE DEDCENT
	ONCANTUALION MAI EAREND ANNOADDI AN AMOU	141 1401	EVCEEDING	LIV	E PERCENI
म्	THE FAIR MARKET VALUE OF THE ENDOWMENT FU	NDC A	C DETERMIN	ע רוים	MMITAT.T.V
_	THE THE PROPERTY OF THE DROWNING TO	NDO, A	O DETERMIN	א עם	MINONIIII,
SOL	ELY FOR THE CARE AND MAINTENANCE OF RETIR	т тно	ROUGHBRED .	RACE	HORSES
		<u> </u>		.u.c.	HORDED.
PAR	T X, LINE 2:				
HE	FINANCIAL ACCOUNTING STANDARDS BOARD ISS	IED NEI	W GUITDANCE	בווא ב) }
		011D 1111	COLDINGE	11111	
ACC	OUNTING FOR UNCERTAINTY IN INCOME TAXES.	א איר	NOTTACINIC	ADOP	TED THIS
				1001	120 11110
IEW	GUIDANCE FOR THE YEAR ENDED DECEMBER 31,	2010.	MANAGEME	NT E	VALUATED
HE	FOUNDATIONOS TAX POSITION AND CONCLUDED	THAT TH	HE FOUNDAT	ION	HAD TAKEN
Ю	UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUS	STMENT	ידק קאיי סיי	אור בו	TAT.
		~ ======	10 1111 1 11	AUTAC	TUT
	MENENES TO COMPLY WITH THE PROVINCE OF			ALTIAC	TUTI

Schedule D (Form 990) 2017

732054 10-09-17

Schedule D	(Form 990) 2017	THOROUGHBRED	RETIREMENT	FOUNDATION,	INC.13-3132741	Page 5
Part XIII	(Form 990) 2017 Supplemental Info	rmation (continued)				
				= = =		

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest instructions.

Inspection Employer identification number

Name of the organization		10. 0	io idic	oc mod dottorior		Employer ide	entification number
THOROUG	SHBRED RETIREMENT	FOUN	IDA'	TION, INC.		13-3132	
	Complete if the organization ans						
 1 Indicate whether the organization rai a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the 	e Solici f Solici g Speci or oral agreement with any individu Part VII) or entity in connection with viduals or entities (fundraisers) pur	tation of tation of al fundra al (inclu profess	non-g goveralsing ding d	government grants rnment grants events officers, directors, tru fundraising services	stees, ?	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		stody from activity		(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
						-	
		1					
S List all states in which the organization or licensing.	n is registered or licensed to solicit		utions	or has been notified	litis e	kempt from re	gistration

Schedule G (Form 990 or 990-EZ) 2017 THOROUGHBRED RETIREMENT FOUNDATION, INC.13-3132741 Page 2

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events SPECIAL NONE (add col. (a) through EVENTS col. (c)) (event type) (event type) (total number) Revenue Gross receipts 135,017. 135,017. 2 Less: Contributions Gross income (line 1 minus line 2) 135,017. 135,017. Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages 8 Entertainment 29,431. Other direct expenses 29,431. 10 Direct expense summary. Add lines 4 through 9 in column (d) 29,431. 11 Net income summary. Subtract line 10 from line 3, column (d) 105,586. Part III | Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Direct Expenses Noncash prizes 4 Rent/facility costs Other direct expenses Yes Yes No No 6 Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain:

Sch	nedule G (Form 990 or 990-EZ) 2017 THOROUGHBRED RETIREMENT FOUNDATION, INC. 13-3	3132	741	. Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	∟ No
	Indicate the percentage of garning activity conducted in:	1	F	
	a The organization's facility	13a		% %
	an outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records:	13b		
14	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🔲	Yes	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party > \$			
C	e If "Yes," enter name and address of the third party:			
	Name			
	Address >			
16	Gaming manager information:			
	Name Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	. 📖 ነ	Yes	∟ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year 🕨 \$		2b 10	h 15h
Га	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, line 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	165 5, 5	9D, 1C	D, 13D,
	130, 10, and 17b, as applicable. Also provide any additional mormation. See metadations.			
_				
_				

Schedule 6	G (Form 990 or 990-EZ)	THOROUGHBRED	RETIREMENT	FOUNDATION,	INC.13-3132741	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Infor	mation (continued)				77
		(

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

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

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization Employer identification number THOROUGHBRED RETIREMENT FOUNDATION, INC. 13-3132741 Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (d) Loan to or (a) Name of (b) Relationship (c) Purpose (e) Original (i) Written (f) Balance due (g) In by board or from the interested person with organization of loan principal amount default? agreement? organization? committee? To From Yes No Yes No Yes No Total Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (c) Amount of (e) Purpose of (b) Relationship between (d) Type of interested person and assistance assistance assistance the organization

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

Schedule L (Form 990 or 990-EZ) 2017

Schedule L (Form 990 or 990-EZ) 2017 THOROUGHBRED RETIREMENT FOUNDATION, INC.13-3132741 Page 2 Part IV | Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? No SOLVIT, LLC 50% OWNED BY SISTER 3,278.OUTSOURCED X Part V Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions) SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: SOLVIT, LLC (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: 50% OWNED BY SISTER OF THE DIRECTOR OF EXTERNAL AFFAIRS DIANA PIKULSKI (D) DESCRIPTION OF TRANSACTION: OUTSOURCED INFORMATION TECHNOLOGY, HERD DATA MANAGEMENT AND OTHER RELATED HERD MANAGEMENT SERVICES

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open To Public Inspection

Name of the organization

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Employer identification number 13-3132741

Pa	art I Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determ noncash contribution		nts
1	Art - Works of art	X			FMV		
2	Art - Historical treasures						
3	Art =Fractional interests						
4	Books and publications	X			FMV		
5	Clothing and household goods	X			FMV		
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles	X			FMV		
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other (GIFT CARDS AN)	Х	0		FMV		
26	Other (EQUINE GOODS)	X	0	0.	FMV		
27	Other ()						
28	Other (
29	Number of Forms 8283 received by the organization completed Form 828	_	-				
						Yes	No
30a	During the year, did the organization receive by						
	must hold for at least three years from the date						
	exempt purposes for the entire holding period?	· · · · · · · · · · · · · · · · · · ·			30a	-	X
	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p				tions? 31	-	X
32a	3	_					
	contributions?			••••••	32a		X
	If "Yes," describe in Part II.	-l		formulately and according			
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	tor which column (a) is chec	:kea,		
	describe in Part II.						

Schedule M	(Form 990) 2017	THOROUGHBRED	RETIREMENT	FOUNDATION,	INC.	13-3132741	Page 2
Part II	Supplemental is reporting in Part	Information. Provide I, column (b), the number ditional information.	the information require	ed by Part I, lines 30b.	32b, and 33	and whether the organiz	ation
1							
							17

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Employer identification number 13-3132741

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: UPON RELEASE FROM PRISON. THIS PROGRAM IS UNIQUE IN THAT IT SAVES THOROUGHBRED HORSES NO LONGER ABLE TO COMPETE ON THE RACETRACK FROM POSSIBLE NEGLECT, ABUSE AND SLAUGHTER AND MATCHES THEM WITH INMATE-STUDENTS ALSO SEEKING A SECOND CHANCE.

EQUINE RESCUE AND REHABILITATION. THE VAST MAJORITY OF THE GENERAL PUBLIC AND MANY RACING FANS ARE UNAWARE OF THE SAD FATE THAT AWAITS THOUSANDS OF THOROUGHBREDS EACH YEAR. THEY ASSUME EACH ANIMAL IS ASSURED A SAFE HUMANE RETIREMENT. UNFORTUNATELY, IT IS A PERCEPTION THAT DOES NOT REFLECT REALITY. REALITY IS THE THOROUGHBRED INDUSTRY, OUTSIDE THE CIRCUIT OF HIGH PROFILE, HIGH DOLLAR RACES, IS MADE UP LARGELY OF OWNERS WITH ONLY MODEST RESOURCES. CURRENT ECONOMICS DICTATE THAT AMONG ALL OWNERS, NO MATTER HOW RESPONSIBLE AND WELL INTENDED. ONLY A FEW MAINTAIN EVEN A SINGLE THOROUGHBRED ONCE IT IS UNABLE TO EARN ITS KEEP ON THE TRACK. REALITY IS A WORLD WHERE HORSEMEAT IS IN DEMAND IN MANY FOREIGN COUNTRIES AND THERE ARE SEVERAL SLAUGHTERHOUSES IN CANADA AND MEXICO HAPPY TO CREATE SUPPLY. THOROUGHBRED RETIREMENT FOUNDATION OFTEN HAS TO TRANSPORT HORSES IN DESPERATE NEED AND THEN PROVIDE EXTRA CARE TO GET THEM BACK TO HEALTH.

THOROUGHBRED RETRAINING AND ADOPTION PROGRAM. MANY OF THE HORSES RESCUED BY THE THOROUGHBRED RETIREMENT FOUNDATION OR RETIRED TO THE THOROUGHBRED RETIREMENT FOUNDATION ARE HEALTHY AND ABLE TO HAVE "SECOND CAREERS" AS PLEASURE OR SHOW-HORSES. THESE HORSES ARE EVALUATED AND

RETRAINED BY THOROUGHBRED RETIREMENT FOUNDATION EMPLOYEES SO THAT WE

Name of the organization

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Employer identification number 13-3132741

KNOW THE HORSE'S CAPABILITIES AND CAN PLACE THE HORSE IN A LONG TERM SUCCESSFUL ADOPTION.

FORM 990, PART VI, SECTION B, LINE 11B:

THE CHAIRMAN, CFO, TREASURER, AND THE EXTERNAL AFFAIRS DIRECTOR REVIEW THE FORM 990 INDIVIDUALLY. THE FOUR INDIVIDUALS HOLD A MEETING TO DISCUSS ANY QUESTIONS THAT THEY MAY HAVE. IF ANY CORRECTIONS OR CHANGES ARE NEEDED, THE ACCOUNTING FIRM ENGAGED TO PREPARE THE FORM 990 IS NOTIFIED. ALSO, THE EXECUTIVE COMMITTEE AND THE BOARD ALSO REVIEW THE AUDIT REPORT.

FORM 990, PART VI, SECTION B, LINE 12C:

THE FOUNDATION BOARD IS A GOVERNING BOARD THAT MEETS MONTHLY TO DISCUSS AND DECIDE ON ISSUES RELATED TO THE FOUNDATION, ITS POLICY, PERFORMANCE AND THE FOUNDATION STAFF.

FORM 990, PART VI, SECTION B, LINE 15:

ALL SALARIES ARE APPROVED BY THE BOARD AND SALARIED EMPLOYEES SERVING AS DIRECTORS ARE NOT PERMITTED TO VOTE WHEN IT RELATE TO COMPENSATION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

NY,MD,FL,ND,NJ,VA,SC,IA,IN,NE,IL,AL,AZ,AR,CA,GA,KS,MA,MI,MN,MO,OH,OK,OR,PA

TN,VT,WA,WV,WI,UT

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION'S FORM 990 IS AVAILABLE BY SUBMITTING A WRITTEN REQUEST TO THE ORGANIZATION'S MAIN OFFICE AND IS AVALIABLE ON GUIDESTAR'S WEBSITE.

FORM 990, PART VI, SECTION C, LINE 19:

Schedule O (Form 990 of 990-EZ) (2017)	raye z
Name of the organization THOROUGHBRED RETIREMENT FOUNDATION, INC.	Employer identification number 13-3132741
THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STAT	EMENTS ARE
AVAILABLE BY SUBMITING A WRITTEN REQUEST TO THE ORGANIZAT	!ION'S MAIN OFFICE.
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSE	:S:
PRINTING AND PUBLICATIONS:	
PROGRAM SERVICE EXPENSES	1,414.
MANAGEMENT AND GENERAL EXPENSES	305.
FUNDRAISING EXPENSES	45,226.
TOTAL EXPENSES	46,945.
REPAIRS AND MAINTENANCE:	
PROGRAM SERVICE EXPENSES	46,663.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	46,663.
CONTRACT LABOR:	
PROGRAM SERVICE EXPENSES	7,856.
MANAGEMENT AND GENERAL EXPENSES	12,493.
FUNDRAISING EXPENSES	24,449.
TOTAL EXPENSES	44,798.
POSTAGE AND FREIGHT:	
PROGRAM SERVICE EXPENSES	1,611.
MANAGEMENT AND GENERAL EXPENSES	2,211.
FUNDRAISING EXPENSES	24,590.
TOTAL EXPENSES	28,412.

Schedule O (Form 990 or 990-EZ) (2017) Name of the organization	Page 2 Employer identification number
THOROUGHBRED RETIREMENT FOUNDATION, INC.	
UTILITIES:	
PROGRAM SERVICE EXPENSES	21,628.
MANAGEMENT AND GENERAL EXPENSES	3,270.
FUNDRAISING EXPENSES	3,330.
TOTAL EXPENSES	28,228.
MEDICAL SUPPLIES:	
PROGRAM SERVICE EXPENSES	20,843.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	20,843.
SUPPLIES:	
PROGRAM SERVICE EXPENSES	11,961.
MANAGEMENT AND GENERAL EXPENSES	170.
FUNDRAISING EXPENSES	18.
TOTAL EXPENSES	12,149.
TELEPHONE:	
PROGRAM SERVICE EXPENSES	5,298.
MANAGEMENT AND GENERAL EXPENSES	3,110.
FUNDRAISING EXPENSES	3,675.
TOTAL EXPENSES	12,083.
TRAINING:	
PROGRAM SERVICE EXPENSES	9,576.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.

Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 990-EZ) (2017) Name of the organization	Page 2 Employer identification number
THOROUGHBRED RETIREMENT FOUNDATION, INC.	13-3132741
TOTAL EXPENSES	9,576.
BANK CHARGES:	
PROGRAM SERVICE EXPENSES	3,517.
MANAGEMENT AND GENERAL EXPENSES	4,467.
FUNDRAISING EXPENSES	99.
TOTAL EXPENSES	8,083.
TAXES AND LICENSES:	
PROGRAM SERVICE EXPENSES	3,319.
MANAGEMENT AND GENERAL EXPENSES	2,814.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	6,133.
INTERNET:	
PROGRAM SERVICE EXPENSES	3,381.
MANAGEMENT AND GENERAL EXPENSES	1,385.
FUNDRAISING EXPENSES	1,089.
TOTAL EXPENSES	5,855.
EQUIPMENT RENTAL:	
PROGRAM SERVICE EXPENSES	294.
MANAGEMENT AND GENERAL EXPENSES	2,480.
FUNDRAISING EXPENSES	1,956.
TOTAL EXPENSES	4,730.
TRANSPORTATION:	
PROGRAM SERVICE EXPENSES	4,632.
	redule O (Form 990 or 990-FZ) (2017)

FORM 990 PART XI LINE 2C: THE BOARD OF DIRECTORS IS RESPONSIBLE FOR

THE SELECTION OF THE INDEPENDENT ACCOUNTANTS AND THE OVERSIGHT OF THE

AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS. THESE

RESPONSBILITIES HAVE NOT CHANGED FROM THE PRIOR YEAR.

FORM 5	FORM 990 PAGE 10						066							
Asset No.	Description	Date Acquired	Method	Life	Oor> Noro	Unadjusted Cost Or Basis	Bus 8 % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS													
53	FENCING (WK)	09/04/04	SI	7.00	16	1,380.				1,380.	1,134.		0	1,134,
152	PENCING	05/31/06	SL	7.00	9 1	1,490.				1,490.	1,466.		0	1,466.
153	FENCING	06/21/06	SL	7.00	9	1,130.				1,130.	1,122.		0	1,122.
177	FENCE & BARN (WK)	01/01/95	SI	7.00	16	4,555.				4,555.	4,268.		0	4,268.
179	TURNOUT SHEDS (WK)	10/10/96	ST	7.00	9	15,233.				15,233.	10,614.		0	10,614.
181	FENCING (WK)	12/01/01	SI	7.00	16	1,436.				1,436.	920.		0	920.
186	BUILDING SUPPLIES (WK)	12/12/03	ZS	7.00	16	4,706.				4,706.	3,697.		° c	3,697.
187	FENCING (WK)	12/21/03	SL	7.00	16	4,132.				4,132.	3,186.		0	3,186.
က က လ	FENCING (WK)	07/31/07	SL	7.00	9	4,428.				4,428.	4,428.		0	4,428.
398	FENCES WALKILL	01/01/04	SI	7.00	16	10,809.				10,809.	6,812.		0	6,812.
408	FENCING (WK)	09/30/08	SI	7.00	16	11,487.				11,487.	11,487.		0	11,487.
423	FENCING - WALLKILL	02/28/09	SI	7.00	16	1,828.				1,828.	1,828.		0	1,828.
436	FENCING (WK)	10/31/11	SL	7.00	16	1,840.				1,840,	1,359.		263.	1,622.
441	FENCING (WK)	07/01/12	SL	7.00	16	3,339.				3,339.	2,147.		477.	2,624.
451	FENCING (WK)	10/31/14	SI	7.00	16	4,186.				4,186.	1,296.		598,	1,894,
						71,979.				71,979.	55,764.		1,338,	57,102.
	MACHINERY & EQUIPMENT													
728111 04-01-17	4-01-17													

(D) Asset disposed

^{*} ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM	FORM 990 PAGE 10						990							
Asset No.	Description	Date Acquired M	Method	Life	No E>	Unadjusted Cost Or Basis	Bus Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	51 EQUIPMENT (WK)	02/24/04 8	TS	5.00	16	2,550.				2,550.	1,587.		0.	1,587.
1	123 JT COVERALL	03/23/05	TS	5.00	19	1,069,				1,069.	1,069.		0.	1,069.
	AACHINERY & EQUIPMENT					3,619.				3,619.	2,656.		0	2,656.
	* 990 PAGE 10 TOTAL -					75,598.				75,598.	58,420.		1,338.	59,758.
	BUILDINGS													
H	129 SURVEY	8 50/80/10	SL	7.00	16	4,023.				4,023.	3,531.		0.	3,531.
ĭ	188 BUILDING SUPPLIES (FL)	01/26/99 8	SL	7.00	16	3,943.				3,943.	3,943.		.0	3,943.
H	193 LIMESTONE (FL)	11/09/99	SI	7.00	9	5,319,				5,319,	5,319.		0	5,319.
1,	195 LIMESTONE (FL)	11/29/99 8	SL	7.00	16	15,180.				15,180.	15,180.		0.	15,180.
125	197 BUILDING SUPPLIES (FL)	12/15/99 8	SL	7.00	16	2,460.				2,460.	2,460.		0	2,460.
2(204 BUILDING SUPPLIES (FL)	04/04/00 8	SL	7.00	16	3,120,				3,120.	1,480.		.0	1,480.
3(205 CEMENT (FL)	04/27/00 8	TS	7.00	16	1,889.				1,889.	930.		0	930.
2(206 CONSTRUCTION DRAWINGS (FL)	02/02/00	SL	7.00	16	2,500.				2,500.	1,231.		0	1,231.
36	207 ROOFING MATERIALS (FL)	05/11/00 8	SL	7.00	16	4,500.				4,500.	2,214,		0.	2,214.
23	210 CEMENT (FL)	05/23/00 8	SL	7.00	16	2,369.				2,369.	2,369.		0.	2,369.
21	211 ROOFING SUPPLIES (FL)	05/31/00 8	SL	7.00	9 년	4,616.				4,616.	4,616.		0	4,616.
21	212 ELECTRICAL SUPPLIES (FL)	06/01/00	SL	7.00	16	1,126.				1,126.	1,126.		0	1,126.
21	214 SANDFILL (FL)	00/50/90	SL	7.00	16	1,080.				1,080.	1,080.		0	1,080,
728111	728111 04-01-17				=	(D) - Asset disposed	osed		*	* ITC Salvaga	Don't comme	Letino C. Loiovo	0	0

(D) Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM	FORM 990 PAGE 10						066							
Asset No.	set o. Description	Date Acquired	Method	Life	C Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
N	217 BUILDING SUPPLIES (FL)	06/23/00	SL	7.00	16	2,260.				2,260.	2,260.		0	2,260.
(4	221 BUILDING SUPPLIES (FL)	08/16/00	SL	7.00	91	1,333.				1,333,	1,333.		0	1,333,
- 2	225 WINDOWS (FL)	08/25/00	SL	7.00	16	2,470.				2,470.	2,470.		•	2,470.
	227 LUMBER (FL)	09/01/00	TS (7.00	16	2,244.				2,244.	2,244.		0	2,244.
- 7	228 BUILDING SUPPLIES (FL)	00/10/60	SL	7.00	16	10,401.				10,401.	10,401.		.0	10,401.
Q	230 BUILDING SUPPLIES (FL)	09/11/00	SL	7.00	16	6,856.				6,856.	6,856.		0.	6,856.
7	231 BUILDING SUPPLIES (FL)	09/11/00	TS (7.00	16	1,830.				1,830.	1,830.		0.	1,830.
	234 BUILDING SUPPLIES (FL)	09/26/00	SI	7.00	16	4,115.				4,115.	4,115.		0	4,115.
- 7	237 WINDOWS (FL)	09/59/00	SL	7.00	16	1,740.				1,740.	1,740.		0	1,740.
	238 BUILDING SUPPLIES (FL)	09/29/00	SL	7.00	16	3,032.				3,032.	3,032.		0	3,032.
7	240 AIR CONDITIONER (FL)	10/31/00	SL	7.00	16	3,922.				3,922.	3,922.		0	3,922.
~	245 SEPTIC TANK (FL)	12/28/00	TS	7.00	16	3,300.				3,300.	3,300.		0	3,300.
- 2	251 ASPHALT 90 TONS (FL)	08/01/01	SL	7.00	19	3,150.				3,150.	3,150.		0	3,150.
CA	258 BUILDING SUPPLIES (FL)	01/01/02	SL	7.00	7.0	2,174.				2,174.	1,253.		0.	1,253,
73	259 BUILDING SUPPLIES (FL)	01/29/02	SI	7.00	16	1,239.				1,239.	727.		0.	727.
(4	263 BUILDING SUPPLIES (FL)	07/18/00	SI	7.00	16	15,035.				15,035.	15,035.		0	15,035.
7	264 BUILDING SUPPLIES (FL)	00/50/90	SL	7.00	16	3,777.				3,777.	3,777.		0	3,777.
m	363 FENCING (FL)	07/10/07 SL	SL	7.00	16	15,960.				15,960.	15,960.		0.	15,960.
72811	728111 04-01-17					(D) - Asset disposed	pesoc		*	TO CONTRACT				

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

	Fnding Accumulated Depreciation	0. 16,841.	0. 1,000.	0. 56,653.	0. 1,064.	0. 204,442.		0. 1,967.	1,468.	11,084.	1,250.	2,660.	975.	1,942.	1,899.	1,333.	4,500.	. 29,078.
	Current Year Deduction							0	0	0	0	0	0	0	0	0	0	0
	Current Sec 179 Expense																	
	Beginning Accumulated Depreciation	16,841	1,000.	56,653.	1,064.	204,442.		1,967	1,468.	11,084.	1,250.	2,660.	975.	1,942.	1,899.	1,333.	4,500.	29,078.
	Basis For Depreciation	16,841.	1,753.	56,653.	1,064.	213,274.		1,967.	1,785.	12,300.	1,250.	2,660.	1,000.	1,942.	1,899,	1,333.	4,500.	30,636.
	Reduction In Basis																	
	Section 179 Expense																	
066	Bus % Excl																	
	Unadjusted Cost Or Basis	16,841.	1,753.	56,653.	1,064,	213,274.		1,967.	1,785.	12,300.	1,250.	2,660.	1,000,	1,942,	1,899.	1,333.	4,500.	30,636.
	Ooc>	16	16	16	16			9 =	16	J 6	16	16	9	16	19	19	16	
	Life	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	5.00	7.00	7.00	5.00	7.00	5.00	
	Method	SL	SI	SI	SL			SL	SL	SL	SL	SL	SL	SL	SL	SL	SL	
	Date Acquired	12/19/07	01/01/04	09/24/08	01/31/08			10/05/00	09/01/04	20/90/60	01/12/06	90/50/90	08/08/06	11/18/99	09/03/03	03/13/07	12/31/09	
FORM 990 PAGE 10	Description	ROUNDPENS (FL)	FENCES FLORIDA	FENCING (FL)	FENCING (FL) * 990 PAGE 10 TOTAL	ILDINGS	MACHINERY & EQUIPMENT	BUILDING SUPPLIES	WATERERS(5)	TRACTOR/BUSH HOG	HARROW MACHINE TRACTOR	GOLF CART - WOMENS	SADDLES	DUMP TRUCK SERVICE (FL)	ROTARY MOWER (FL)	3 40 GAL WATERERS (FL)	MANURE SPREADER (FL)	MACHINERY & EQUIPMENT
DRM 99	Asset No.	368	399	410	415		pI	16	76 7	130	159	163	165	194 I	261 F	362	420 ×	4

728111 04-01-17

(D) - Asset disposed

-				066		,					
Date Acquired Method Life 0 1		So.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
01/31/15 SL 7.00		16	1,586.				1,586.	435.		227.	662
06/30/15 SL 7.00		91	1,800.				1,800.	386.		257.	643
			3,386.				3,386.	821.		484.	1,305,
			247,296.				247,296.	234,341.		484.	234,825
				Т							
08/15/05 SL 5.00		16	1,114.				1,114.	1,114.		0	1,114.
09/30/06 SL 7.00		91	1,306.				1,306.	1,284.		0	1,284
08/01/99 SL 7.00		16	1,620.				1,620.	1,161,		0	1,161,
09/01/99 SL 7.00		9 1	43,145.				43,145.	20,205.		0	20,205
01/06/00 SL 7.00		16	1,689.				1,689,	771.		0	771.
03/27/00 SL 7.00		16	36,938.				36,938.	18,169.		0	18,169,
05/05/00 SL 7.00		16	2,074.				2,074.	1,020.		0.	1,020
05/26/00 SL 7.00		16	1,369.				1,369.	682.		0,	682
07/18/00 SL 7.00		16	2,923.				2,923.	1,495.		0	1,495
07/18/00 SL 7.00		16	1,555.				1,555.	.606		0	606
08/16/00 SL 7.00		9 1	1,820.				1,820.	940.		0	940
09/08/00 SL 7.00	_	16	1,251.				1,251.	646.		0	646.
11/16/00 SL 7.00											

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FOR	FORM 990 PAGE 10						066							
& A	Asset No. Description	Date Acquired	Method	Life	Ooc>	Unadjusted Cost Or Basis	Bus Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
.,	284 FENCING (KY)	05/01/01	SL	7.00	16	1,613.				1,613.	901.		0	901.
. *	286 CONSTRUCTION MATERIALS (KY)	09/01/01	SL	7.00	16	1,131				1,131.	684.		0.	684.
V-1	396 BARN IMPROVEMENTS (KY)	12/31/05	SL	7.00	16	11,130.				11,130.	9,540.		0	9,540.
	BUILDINGS					112,273.				112,273.	60,385.		0.	60,385.
	MACHINERY & EQUIPMENT				_									
	125 SPREADER	09/26/05	SL	5.00	16	2,600.				2,600.	2,600.		0.	2,600.
.,,	REWIT IMPI	02/15/02	SL	5.00	16	1,200.				1,200.	931.		0	931.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT					3,800.				3,800.	3,531.		0.	3,531,
	* 990 PAGE 10 TOTAL				_	116,073.				116,073.	63,916.		.0	63,916
	BUILDINGS													
(4)	371 BARN RENOVATIONS - GOOCHLAND 10/24/07		SL	7.00	10	7,673.				7,673.	7,673.		0	7,673.
	BUILDINGS					7,673.				7,673.	7,673.		0.	7,673.
	MACHINERY & EQUIPMENT													
(F)	372 GOLF CART - GOOCHLAND	12/20/07	TS	5.00	16	3,100.				3,100.	3,100,		0	3 100.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT					3,100.				3,100.	3,100.		0	3,100.
	TRANSPORTATION EQUIPMENT													
m		02/04/03	SL	5.00	16	13,938.				13,938.	13,529.		0	13,529.
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT					13,938.				13,938,	13,529,		0	13.529
72811	728111 04-01-17					(D) - Asset disposed	peso		*	* ITC. Salvada	Ronie Comm	- Indiana		1

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

	Ending Accumulated Depreciation		3,500.	3,500.	0. 27,802.		0, 2,129.	0, 5,783.	0, 7,386.	0. 2,172.	0. 2,769.	0, 2,502.	0, 2,550,	0, 2,571.	0. 1,612.	0. 953.	491.	
	Current Year Deduction		1,200.	1,200.	1,200			J)	J	J	J	J	J	J	J	22	
	Current Sec 179 Expense																	
	Beginning Accumulated Depreciation		2,300.	2,300.	26,602.		2,129.	5,783.	7,386.	2,172.	2,769.	2,502.	2,550.	2,571.	1,612.	953.	469,	966 66
	Basis For Depreciation		6,000.	6,000.	30,711.		2,895.	7,435.	7,386.	2,741.	3,500.	3,113.	3,150.	3,150.	1,975.	1,142.	1,728,	32 851
	Reduction In Basis																	
	Section 179 Expense																	
066	Bus % Excl																	
	Unadjusted Cost Or Basis		6,000,	.000,9	30,711.		2,895.	7,435.	7,386.	2,741.	3,500.	3,113.	3,150.	3,150.	1,975.	1,142.	1,728.	32,851,
	Line No.		16				16	16	7 9	16	16	16	16	16	7 9	16	16	16
	Life		5.00				7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	77.00	7.00
	Method		SL				SI	TS.	TS	TS	TS	TS	SL	SL	Ts.	TS	SL	SL
	Date Acquired		01/31/15				08/25/03	01/21/04	03/11/04	04/28/04	05/11/04	05/26/04	07/09/04	08/02/04	08/02/04	10/18/04	11/08/04	09/27/05
FORM 990 PAGE 10	Description	OTHER	2001 FORD F-150 (VA)	* 990 PAGE 10 TOTAL OTHER	* 990 PAGE 10 TOTAL -	BUILDINGS	STATEMAN'S RIDGE	FENCING	AGRICOM BUILDINGS	AGRICOM BUILDINGS	ROOF	AGRICOM BUILDINGS	SHED	SHED	BLUE RIDGE EXCAVATING	WATER LINE	FENCING	IMPROVEMENTS
ORM 9	Asset No.		462				ю С	63	69	73	75	77	80	83	85	80	80	131

728111 04-01-17

(D) Asset disposed

					F		066		,					
Description Date Acquired	Date Acquired		Method	Life	Ooe>	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
GATES AND POSTS 12/31/05	12/31/(ZE	5.00	16	1,400.				1,400.	1,400.		0.	1,400.
10/31/06	10/31/0		SL	7.00	16	1,560.				1,560.	1,550.		0	1,550.
CONSULTANT (MP) 04/30/03	04/30/0		SL	7.00	16	5,000.				5,000.	3,436.		0.	3,436.
07/31/03	07/31/0		SL	7.00	1.6	95,764.				95,764.	70,238.		0	70,238.
JAMES ASLA (MP) 08/12/03	08/12/03		SI	7.00	16	1,335.				1,335.	996		0	996
ORANGE MADISON COOP (MP) 08/31/03	08/31/0		SI	7.00	9 1	14,919.				14,919.	10,964.		0	10,964.
CONSULTANT (MP) 08/29/03	08/29/03		SL	7.00	9	2,500.				2,500.	1,837.		0.	1,837.
RIDGE (MP) 09/07/03	09/01/03		SL	7.00	16	1,430,				1,430.	1,050.		0.	1,050.
09/30/03	09/30/03		TS	7.00	16	20,331.				20,331.	15,182.		0.	15,182.
CONSULTANT (MP) 09/30/03	09/30/03		TS.	7.00	16	2,500.				2,500.	1,867.		0.	1,867,
FARM PLAN (MP) 09/30/03	09/30/03		SI	7.00	16	2,149.				2,149.	1,605.		0	1,605.
STATEMAN'S RIDGE (MP) 10/22/03	10/22/03		SL	7.00	16	1,502.				1,502,	1,141.		0	1,141.
PAYNE (MP) 10/22/03	10/22/03		SI	7.00	16	3,887.				3,887.	3,035.		0.	3,035.
BANCE (MP) 10/28/03	10/28/0:		TS.	7.00	16	1,222.				1,222.	955.		0.	955
BANCE (MP) 10/31/03	10/31/0:		IS	7.00	16	2,500.				2,500.	1,911.		0	1,911.
11/06/03	11/06/0		SI	7.00	16	22,315.				22,315.	16,808,		0	16,808.
FARM PLAN (MP) 11/06/0	11/06/0			00.7	9 [1,672.				1,672.	1,259.		0	1,259.
EXCAVATING (MP) 11/13/0	11/13/0	m		7.00	16	9,400.				9,400.	7,080.		0.	7,080.
ING (MP) 11/13/03 SL 7.00 16 16 (MP) 11/13/03 SL 7.00 16 (D)	SL 7.00 16 SL 7.00 (D) - A	7.00 16 7.00 (D)	16 16 (D)		1,672. 9,400.	peso			*	1,672. 9,400. TC Salvade	1,672. 1,259. 0. 9,400. 7,080. 0. 0.	Project Davis	0 0.	2.

(D) Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 9	FORM 990 PAGE 10					-								
Asset No.	Description	Date Acquired	Method	Life	∩ o ∈ >	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
344	MONPELIER FOUNDATION (MP)	11/23/03	SL	7.00	16	2,113.				2,113.	1,641.		0	1,641,
345	EDGAR J. BANCE (MP)	11/30/03	SL	7.00	9 [2,500.				2,500.	1,940.		0	1,940.
347	FENCING (MP)	12/21/03	SL	7.00	16	14,287.				14,287.	11,021.		0	11,021.
348	GILBERT IMPROVEMENTS (MP)	12/31/03	SL	7.00	16	3,500.				3,500.	2,700.		0	2,700.
370	FENCING (MP)	10/31/07	SL	7.00	16	6,848.				6,848.	6,848.		0	6,848.
411	BUILDING SUPPLIES (MP)	07/31/08	SL	10,00	16	26,045.				26,045.	21,925.		2,605.	24,530.
428	WATERERS (MP)	05/15/10	SL	7.00	16	7,658.				7,658.	7,293.		365.	7,658.
429	FENCING (MP)	05/20/10	SE	7.00	16	21,056.				21,056.	19,803.		1,253.	21,056.
434	FENCING (MP)	12/01/11	SL	7.00	16	6,082.				6,082.	4,417.		869.	5,286.
439	FENCING (ME	09/30/12	SL	7.00	91	3,070.				3,070.	1,866.		439.	2,305.
	* 990 PAGE 10 TOTAL BUILDINGS					358,426.				358,426.	285,186.		5,553.	290,739.
	FURNITURE & FIXTURES													
67	CORRAL PANELS	02/21/04	SL	7.00	16	1,156.				1,156.	900.		0.	.006
71	OFFICE FURNITURE	03/24/04	SL	5.00	16	2,693.				2,693.	2,650.		0.	2,650.
142	SIGNAGE	12/31/05	SL	5.00	16	2,250.				2,250.	2,250.		0	2,250.
						6,099.				6,099.	5,800.		0.	5,800.
	MACHINERY & EQUIPMENT													
64	64 COMPUTER/PRINTER	01/31/04	SI	5.00	16	1,366.				1,366,	1.366		c	446

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 9	FORM 990 PAGE 10						066							
Asset No.	Description	Date Acquired	Method	Life	Oor>	Unadjusted Cost Or Basis	Bus Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
65	JOHN DEERE GATOR	02/13/04	SL	5.00	16	10,075.				10,075.	4,759.		0	4,759.
99	TRACTOR	02/11/04	SL	5.00	16	34,380.				34,380.	29,630.		0	29,630,
89	CUTTER 15'	03/05/04	SI	7.00	7 9	9,800.				9,800.	7,629.		0.	7,629,
78	PROP/EQUIPMENT	05/26/04	SE	7.00	9	3,800.				3,800.	3,052.		0	3,052.
140	HARROW	12/31/05	SI	5.00	16	4,000.				4,000.	4,000.		0.	4,000.
442	2004 GMC SIERRA (MP)	09/01/12	IIS	5,00	9	22,500.				22,500.	19,500.		3,000.	22,500.
445	JOHN DEERE (MP)	10/01/13	ល្អ	5.00	16	11,830.				11,830.	7,690.		2,366.	10,056.
447	CUB CADET MOWER (MP)	03/31/13	SL	5.00	16	1,200.				1,200.	900		240,	1,140,
448	KAWASAKI MULE	04/30/13	SL	5.00	16	8,375.				8,375.	6,142.		1,675.	7,817.
453	SADDLES (MP)	08/31/14	SI	7.00	16	5,395.				5,395.	1,799.		771.	2,570.
454	HA*	11/30/14	SI	5.00	16	1,739.				1,739.	725.		348.	1,073.
	MACHINERY & EQUIPMENT					114,460.				114,460.	87,192.		8,400.	95,592.
	ОТНЕR													
464	FENCING (MP)	09/30/15	SL	7.00	16	3,086.				3,086.	551.		441.	992.
467	DUMP CART - MONTPELIER	01/31/16	SI	5,00	16	5,600.				5,600.	1,027.		1,120.	2,147.
468	RUN IN SHED - MONTPELIER	03/31/17	SL	7.00	16	12,230.				12,230.			1,310.	1,310.
	* 990 PAGE 10 TOTAL OTHER					20,916.				20,916.	1,578.		2,871.	4,449.
	* 990 PAGE 10 TOTAL -					499,901.				499,901,	379,756.		16,824.	396,580.

728111 04-01-17

(D) - Asset disposed

PORM 9	FORM 990 PAGE 10						250							
Asset No.	Description	Date Acquired	Method	Life	O C > No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS													
93	FENCING	08/31/04	SE	7.00	19	42,784.				42,784.	31,607.		0	31,607.
94	PREFAB SHELL	10/31/04	SI	7.00	16	26,897.				26,897.	22,482.		•0	22,482.
96	AIR CONDITIONER	11/30/04	SI	5.00	70	1,534.				1,534.	1,534.		0	1,534.
133	FENCING	12/09/05	SI	7.00	16	28,341.				28,341.	26,081.		•	26,081.
171	HOOVER BUILDING SYSTEMS (SC)	90/30/90	SL	7.00	16	5,704.				5,704.	5,678.		0	5,678.
403	FENCING WATEREE	01/01/06	SL	7.00	16	1,484.				1,484.	1,272.		0	1,272.
414	RUN IN SHED (SC)	08/31/08	SI	7.00	16	11,700.				11,700.	11,697.		0	11,697.
417	417 WELL	01/31/09	SL	7.00	16	26,287.				26,287.	26,287.		0	26,287.
418	IRRIGATION SYSTEM	06/05/09	ST	7.00	16	25,028.				25,028.	24,728.		0	24,728.
	JOO FAGE					169,759.				169,759.	151,366.		0	151,366.
	MACHINERY & BQUIPMENT													
169	SPREADER (SC)	01/27/06	SI	2.00	16	1,500.				1,500.	1,500.		0	1,500.
170	JOHN DEERE TRACTOR (SC)	04/21/06	SL	5.00	16	17,217.				17,217.	17,217.		0.	17,217.
405	200 GAL SPRAYER	80/30/60	SL	5.00	16	2,055.				2,055.	2,055.		0.	2,055.
412	(SC)	05/07/08	TS	7.00	1 6	27,345.				27,345.	27,342.		0	27,342.
440	JOHN DEERE GATOR (SC)	10/22/12	SL	5.00	9 ==	4,888.				4,888,	4,075.		813.	4,888.
449	449 HORSE TRAILER (SC)	07/01/13	SI	5.00	19	5,000.				5,000.	3,500.		1,000.	4.500.

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 9	990 PAGE 10						066							
Asset No.	Description	Date Acquired	Method	Life	C Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 10 TOTAL MACHINERY & BQUIPMENT					58,005.				58,005.	55,689.		1,813.	57,502.
	TRANSPORTATION EQUIPMENT													
98	8 TRUCK	12/31/04	SL	5.00	16	2,800.				2,800.	2,800.		0	2,800.
413	20	01/01/09	SI	5.00	16	20,429				20,429.	20,429.		0.	20,429.
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT					23,229.				23,229.	23,229.		0	23,229.
	* 990 PAGE 10 TOTAL -					250,993.				250,993.	230,284.		1,813,	232,097.
	BUILDINGS													
374	0 *	11/12/07	SL	7.00	16	5,319,				5,319.	5,319.		0	5,319.
	BUILDINGS					5,319.				5,319.	5,319.		0.	5,319.
	* 990 PAGE 10 TOTAL -					5,319.				5,319,	5,319,		0.	5,319.
	MACHINERY & EQUIPMENT													
31	DP DISPLAY	12/21/03	TS ST	5.00	16	2,045.				2,045.	2,045.		0	2,045.
32	(D)BLACKBAUD (COMPUTERS)	12/31/03	SL	5.00	16	25,028.				25,028.	25,028.		0	25,028.
38	(D)COMPUTER	02/21/04	SL	5.00	16	1,584.				1,584.	1,584.		0	1,584.
45	(D)BUSINESS EQUIPMENT	11/11/04	SL	5.00	16	1,298.				1,298.	1,278.		0	1,278.
46	(D)COMPUTER (SK)	11/24/04	SL	5.00	16	1,427.				1,427.	1,427.		0	1,427.
49	(D)TELEPHONE	12/23/04	SL	5.00	16	1,298.				1,298.	1,298,		0	1,298.
50	50 (D)BLACKBAUD (COMPUTERS)	12/31/04	SI	5.00	16	7, 643.				7,643.	4,587.		0.	4,587.

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 9	FORM 990 PAGE 10						990							
Asset No.	Description	Date Acquired	Method	Life	No. No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
357	(D)COMPUTER & SOFTWARE	11/19/07	SL	5.00	16	1,202.				1,202.	1,202.		0	1,202.
404	EQUIPMENT NATIONAL	01/01/06	ΊS	5,00	16	2,876.				2,876.	2,876.		0	2,876.
406	SERVER	08/23/08	SL	5.00	16	2,319,				2,319.	2,319.		0	2,319.
407	(D)SCANNER	02/19/08	SL	5.00	16	2,550.				2,550.	2,550.		0	2,550.
432		01/01/10	SL	7.00	10	32,745,				32,745.	32,745.		0	32,745.
	" 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT					82,015.				82,015.	78,939.		0	78,939.
	TRANSPORTATION EQUIPMENT				-									
425	브 .	01/10/10	SL	5.00	16	17,975.				17,975.	17,975.		0.	17,975.
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT					17,975				17,975.	17,975		0	17,975.
	OTHER				-									
455	(2) DELL OPTIPLEX 3020 & OFFICE FURNITURE	03/31/15	SL	5.00	16	1,815.				1,815.	635,		363,	9886
456	(3) DELL OPTIPLEX 3020 COMPUTERS	03/31/15	S	5.00	16	1,801.				1,801.	630.		360.	990.
457	DELL LAPTOP	03/31/15	SL	5.00	16	1,571.				1,571.	550.		314,	864.
458	OFFICE FURNITURE	09/30/15	SL	7.00	16	.069				.069	124.		.66	223.
	* 990 PAGE 10 TOTAL OTHER					5,877.				5,877.	1,939.		1,136.	3,075.
	* 990 PAGE 10 TOTAL -					105,867,				105,867.	98,853.		1,136.	.686,66
	BUILDINGS													
27	27 FENCING	09/16/02	SI	7.00	16	1,689,				1,689,	1,328.		0	1,328.

728111 04-01-17

(D) - Asset disposed

FORM 5	FORM 990 PAGE 10			Ì	ł		990							
Asset No.	Description	Date Acquired	Method	Life	<u>اَ</u> كِّ (۱۹۵۶)	Line Unadjusted No. Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
36	FENCING	04/29/03	SL	7.00	16	1,039.				1,039.	770.		0	770.
145	FENCING	10/31/06	SL	7.00	16	2,420.				2,420.	2,404.		0	2,404.
146	FENCING	12/31/06	SI	7.00	16	2,848,				2,848.	2,848.		0.	2,848.
	* 990 PAGE 10 TOTAL BUILDINGS				-	7,996.				7,996.	7,350.		0	7,350.
	MACHINERY & EQUIPMENT													
376	ORTHOFLEX SADDLE	03/31/07	SL	5,00	16	1,800.				1,800.	1,800.		0.	1,800.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT				_	1,800.				1,800.	1,800.		0	1,800.
	* 990 PAGE 10 TOTAL -					9,796.				9,796.	9,150.		0	9,150.
	BUILDINGS				_									
409	BUILDING SUPPLIES (MD)	11/30/08	ST	10.00	16	16,999.				16,999.	13,742.		1,700.	15,442.
419	BUILDING SUPPLIES (MD)	60/30/60	SL	10.00	16	5 22,693.				22,693.	16,450		2,269.	18,719.
427	FENCING (MD)	04/15/10	TS	7.00		6 2,026.				2,026.	1,951.		72.	2,023.
433	HORSE SHELTER (MD)	08/17/11	SI	7.00	16	9,416.				9,416.	7,173.		1,345.	8,518.
443	STALL GATES AND WINDOWS	10/31/13	S	7.00	16	3,900.				3,900.	1,764.		557.	2,321.
452	FENCING (MD)	02/28/14	SL	7.00	16	3,900.				3,900.	1,578.		557,	2,135.
	" 990 FAGE IO TOTAL BUILDINGS					58,934.				58,934.	42,658.		6,500.	49,158.
	* 990 PAGE 10 TOTAL				_	58,934.				58,934.	42,658.		.002,5	49,158.
	BUILDINGS													
728111	758111 04-01-17													

728111 04-01-17

(D) - Asset disposed

Automatical Control	FORM 990	90 PAGE 10						066							
HORSE SHELTER - JAMES RIVER 17/07/08 EL 7.00 16 12,698. 12,698. 12,698. 12,698. 12,698. 12,698. 12,698. 17,000 16 7,334. 7,334. 7,334. 7,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,334. 0 7, 7,334. 1,335. 1,335. 1,335. 1,469. 13, 7,251. 1,249. 13, 7,251. 1,249. 13, 7,251. 1,249. 13, 7,251. 1,249. 1,469. 13, 7,251. 1,249. 1,24	Asset No.	Description	Date Acquired	Method	Life				ection 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
PERCING - JAMES RIVER 11/05/09 SL 7.00 16 7.334, 7.334, 7.334, 7.334, 7.334, 7.334, 7.334, 7.334, 7.334, 7.00 16 13.735, 7.255, 7.00 16 13.735, 7.255,	416	HORSE SHELTER	12/01/08		7.00	16	12,698.				12,698.	12,698.		0	12,698.
The color of the	421	FENCING	04/30/09		7.00	9	7,334.				7,334.	7,334.		0	7,334.
PENCING - JAMES RIVER	424	HORSE SHELTER -	11/05/09		7.00	16	-				,35	4,355.		0	4,355.
PRICING - JAMES RIVER 05/31/11 SL 7.00	430	FENCING -	09/30/10		7.00		13,725.				3,72	12,256.		1,469.	13,725.
**************************************	435	FENCING -	05/31/11		7.00	16	1,023.				1,023.	815.		146.	961,
# 900 PAGE 10 TOTAL BUILDINGS OTHERR COUNDPENS - JAMES RIVER O2/28/15 SL 7.00 16 3.000. STOOL STOOL STOOL SL 7.00 16 3.207. STOOL STOOL SL 7.00 16 3.207. STOOL STOOL SL 7.00 16 3.207. JAMES RIVER O4/30/15 SL 5.00 16 3.208. - JAMES RIVER O5/30/17 SL 5.00 16 2.414. PRACTOR - JAMES RIVER O6/30/17 SL 5.00 16 2.414. STOOL STOOL SL 7.00 16 2.414. STOOL STOOL SL 7.00 16 2.414. STOOL STOOL SL 7.00 16 2.414. STOOL SL 7.00 16 2.569. STOOL SL 7.00 1	450	BA	11/30/14		10.00	**	11,519.				11,519.	2,400.		1,152.	3,552,
POTHER COUNDERNS - JAMES RIVER 02/28/15 SL 7.00 16 3,000. 786. 3,000. 786. 429. 1, 2000. 5700. 786. 429. 1, 3000. 3000. 786. 429. 1, 3000. 3000. 786. 429. 1, 3000. 3000. 786. 429. 1, 3000. 786. 429. 1, 3000. 30		* 990 PAGE 10 TOTAL BUILDINGS					50,654.				, 65	39,858.		2,767.	42,625.
STONDDENS - JAMES RIVER O9/30/15 SL 7.00 16 3,207. TRACTOR - JAMES RIVER O6/30/15 SL 7.00 16 3,207. TRACTOR - JAMES RIVER O6/30/15 SL 5.00 16 3,208. TRACTOR - JAMES RIVER O6/30/17 SL 7.00 16 2,414. TRACTOR - JAMES RIVER O6/30/17 SL 7.00 16 2,414. TRACTOR - JAMES RIVER O6/30/17 SL 7.00 16 2,414. TRACTOR - JAMES RIVER O6/30/17 SL 7.00 16 21,000. * 990 PAGE 10 TOTAL OTHER * 990 PAGE 10 TOTAL OTHER * 990 PAGE 10 TOTAL		OTHER													
STONEDUST FOR MOUNDPENS - 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	461		02/28/15		7.00	9 =	3,000.				3,000.	786.		429.	1,215.
TRACTOR - JAMES RIVER - JAMES RIVER - JAMES RIVER 05/13/16 SL 5.00 16 12,066. 105/13/16 SL 5.00 16 12,066. 105/13/16 SL 5.00 16 12,066. 105/13/16 SL 5.00 16 2,414. 2015 JAMES RIVER 05/13/17 SL 5.00 16 2,414. 2015 JAMES RIVER * 990 PAGE 10 TOTAL OTHER * 990 PAGE 10 TOTAL - PA	463	STONEDUST FOR ROUNDPENS JAMES RIVER	09/30/15		7.00	10	-				3,207.	573.		458.	1,031.
2015 KUBOTA UTILITY VEHICLE - JAMES RIVER - JAMES RIVER 06/30/17 SL 7.00 16 2,414. 2,414. 2,414. 2,414. 12,066. 1,609. 2,413. 4, 2,414. 12,066. 1,609. 2,413. 4, 172. 2015 JD 4044M TRACTOR - 12/13/17 SL 5.00 16 21,000. * 990 PAGE 10 TOTAL OTHER * 990 PAGE 10 TOTAL - 95,549. * 990 PAGE 10 TOTAL - 7.00 16 3,596. 3,555. 413.896. 4,038. 41. 3	465		04/30/15		5.00		3,208.				3,208.	1,070.		642.	1,712.
FENCING - James RIVER 2015 JD 4044M TRACTOR - 12/13/17 SL 5.00 16 2,414. * 990 PAGE 10 TOTAL OTHER * 990 PAGE 10 TOTAL - * 995,549, 43,896, 7,231, 51, FILLER - * PENCING (NE) 01/25/10 SL 7.00 16 3,596, 3,555, 41, 3, 596.	466		05/13/16		5.00	16	12,066.				12,066.	1,609.		*	4,022.
2015 JD 4044M TRACTOR — 12/13/17 SL 5.00 16 21,000. 350.	465	FENCING - JAMES RIVER	06/30/17		7.00	16	2,414.				2,414.			172.	172.
0 TOTAL OTHER 0 TOTAL - 0 TOTAL - 0 TOTAL - 0 1/25/10 SL 7.00 16 3,596.	47(12/13/17	Z ST	5.00	19	21,000.				21,000.			350	350.
0 TOTAL - 95,549. 95,549. 7,231. 51, 01/25/10 SL 7.00 16 3,596. 3,596. 3,596. 3,555. 41. 3,		990 PAGE					89				4,89	4,038.		4,464.	8,502.
01/25/10 SL 7.00 16 3,596. 3,596. 3,555. 41. 3,		990 PAGE 10 TOTAL					-				5,549	43,		7,231.	51,127.
01/25/10 SL 7.00 16 3,596. 3,596. 3,596. 3,555.		BUILDINGS													
	426	FENCING (NE)	01/25/10	SL	7.00	16								41.	3,596.

728111 04-01-17

FORM	FORM 990 PAGE 10						990							
Asset No.	t Description	Date Acquired	Method	Life	C C C No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 10 TOTAL BUILDINGS					3,596.				3,596.	3,555.		41.	3,596.
	* 990 PAGE 10 TOTAL -					3,596.				3,596.	3,555.		41.	3,596.
	BUILDINGS													
44	444 FENCING (IL)	08/26/13	SL	7.00	16	23,386.				23,386.	11,137.		3,341.	14,478.
446	6 FENCING (IL)	10/16/13	SI	7.00	91	12,900.				12,900.	5,836.		1,843.	7,679.
	* 990 PAGE 10 TOTAL BUILDINGS					36,286.				36,286.	16,973.		5,184.	22,157.
	* 990 PAGE 10 TOTAL -					36,286.				36,286.	16,973.		5,184,	22,157.
	* GRAND TOTAL 990 PAGE 10 DEPR					1,535,919.					7		41,751.	1,255,474.
	CURRENT YEAR ACTIVITY													
	BEGINNING BALANCE					1,500,275.			0	1,500,275.	1,213,723.			1,253,642.
	ACQUISITIONS					35,644.			0	35,644.	0			1,832.
	DISPOSITIONS					65,324.			°	65,324.	62,248.			62,248.
	ENDING BALANCE					1,470,595.			0	1,470,595.	1,151,475.			1,193,226.
	ENDING ACCUM DEPR LESS DISPOSITIONS										1,193,226.)
	ENDING BOOK VALUE										277,369.			
728111	728111 04-01-17				-	I I I I I I I I I I I I I I I I I I I	Josed		*	* ITC. Salvade Bonus Commercial Revitalization Deduction	Ronie Comm	divod leicze	10 to	tion CO Zees

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

(Rev. January 2017)

Application for Automatic Extension of Time To File an **Exempt Organization Return**

Department of the Treasury Internal Revenue Service

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit

Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts

must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number Employer identification number (EIN) or Type or Name of exempt organization or other filer, see instructions. print THOROUGHBRED RETIREMENT FOUNDATION, 13-3132741 File by the Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your POST OFFICE BOX 834 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. SARATOGA SPRINGS, NY 12866 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 **Application** Return Return Application Code Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (other than individual) 09 Form 4720 (individual) 03 04 Form 5227 10 Form 990-PF Form 6069 11 05 Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) Form 8870 12 KYLIE BISSELL - ASSISTANT CONTROLLER The books are in the care of PO BOX 834 - SARATOGA SPRINGS, NY 12866 Fax No. > 518-226-0699 Telephone No. > 518-226-0028 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 . If it is for part of the group, check this box 🕨 . and attach a list with the names and EINs of all members the extension is for. NOVEMBER 15, 2018, to file the exempt organization return I request an automatic 6-month extension of time until for the organization named above. The extension is for the organization's return for: X calendar year 2017 or , and ending __ tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return ___ Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2017)

instructions.

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL -

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Asset No.	Description	Date Acquired Me	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	BUILDINGS											
53	53FENCING (WK)	090404SL		7.00	16	1,380.			1,380.	1,134.		0.
152	152FENCING	053106SL		7.00	16	1,490.			1,490.	1,466.		0
153	153FENCING	062106SL		7.00	16	1,130.			1,130.	1,122.		0.
177	177 FENCE & BARN (WK)	010195SL		7.00	16	4,555.			4,555.	4,268.		0
179	179TURNOUT SHEDS (WK)	101096SL		7.00	16	15,233.			15,233.	10,614.		0
181	181FENCING (WK)	120101SL		7.00	16	1,436.			1,436.	920.		0
186		121203SL		7.00	16	4,706.			4,706.	3,697.		0
187	187 FENCING (WK)	122103SL		7.00	16	4,132.			4,132.	3,186.		0.
358	358FENCING (WK)	073107SL		7.00	16	4,428.			4,428.	4,428.		0
398	398FENCES WALKILL	010104SL		7.00	16	10,809.			10,809.	6,812.		0
408	408FENCING (WK)	12800E60		7.00	16	11,487.			11,487.	11,487.		0.
423	423FENCING - WALLKILL	022809SL		7.00	16	1,828.			1,828.	1,828.		0
436	436FENCING (WK)	103111SL		7.00	16	1,840.			1,840.	1,359.		263.
441	441 FENCING (WK)	070112SL		7.00	16	3,339.			3,339.	2,147.		477.
451	451FENCING (WK)	103114SL		7.00	16	4,186.			4,186.	1,296.		598.
	INGS VERY &					71,979.		0	71,979.	55,764.		1,338.

^{728102 04-01-17}

2017 DEPRECIATION AND AMORTIZATION REPORT

— CURRENT YEAR FEDERAL —

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Asset No.	Description	Date Acquired N	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
51	51EQUIPMENT (WK)	022404SL		5.00	16	2,550.			2,550.	1,587.		0
123	FRALL	032305SL		5.00	16	1,069.			1,069.	1,069.		0
	ACHINERY & EC					3,619.		0	3,619.	2,656.		0
	- yyu PAGE IU TOTAL					75,598.		0	75,598.	58,420.		1,338.
	BUILDINGS											
129	129SURVEY	070805SL		7.00	16	4,023.			4,023.	3,531.		0
188		012699SL		7.00	16	3,943.			3,943.	3,943.		0
193	193LIMESTONE (FL)	110999SL		7.00	16	5,319.			5,319.	5,319.		0
195	195LIMESTONE (FL)	112999SL		7.00	16	15,180.			15,180.	15,180.		0
197		121599SL		7.00	1.6	2,460.			2,460.	2,460.		0
204		040400SL		7.00	16	3,120.			3,120.	1,480.		0
205	205CEMENT (FL)	042700SL		7.00	16	1,889.			1,889.	930.		0.
206	206DRAWINGS (FL)	05050SL		7.00	16	2,500.			2,500.	1,231.		0
207	(FL)	051100SL		7.00	16	4,500.			4,500.	2,214.		0
210	210CEMENT (FL)	052300SL		7.00	16	2,369.			2,369.	2,369.		0
211	211(FL)	053100SL		7.00	16	4,616.			4,616.	4,616.		0
212	212(FL)	060100SL		7.00	16	1,126.			1,126.	1,126.		0
214SA	214SANDFILL (FL)	060500SL		7.00	16	1,080.			1,080.	1,080.		0

728102 04-01-17

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL

INC.
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RETIREMENT
THOROUGHBRED
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Asset No.	Description	Date Acquired Method	ld Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
217		062300SL	7.00	16	2,260.			2,260.	2,260.	41	0
221	BULLDING SUPPLIES	081600SL	7.00	16	1,333.			1,333.	1,333.		0
225	225WINDOWS (FL)	082500SL	7.00	16	2,470.			2,470.	2,470.		0
227	227LUMBER (FL)	18007060	7.00	16	2,244.			2,244.	2,244.		0
228		18007060	7.00	16	10,401.			10,401.	10,401.		0
230		091100SL	7.00	16	6,856.			6,856.	6,856.		0
231		091100SL	7.00	16	1,830.			1,830.	1,830.		0
234	234(FL)	092600SL	7.00	16	4,115.			4,115.	4,115.		0
237	237WINDOWS (FL)	092900SL	7.00	16	1,740.			1,740.	1,740.		0.
238		092900SL	7.00	16	3,032.			3,032.	3,032.		0.
240	240(FL)	103100SL	7.00) 16	3,922.			3,922.	3,922.		0
245	245SEPTIC TANK (FL)	122800SL	7.00	0 16	3,300.			3,300.	3,300.		0.
251	•	080101SL	7.00	0 16	3,150.			3,150.	3,150.		0
258		010702SL	7.00	16	2,174.			2,174.	1,253.		0
259		012902SL	7.00) 16	1,239.			1,239.	727.		0
263	263(FL)	071800SL	7.00	0 16	15,035.			15,035.	15,035.		0
264		18005090	7.00) 16	3,777.			3,777.	3,777.		0
363FE	363FENCING (FL)	071007SL	7.00	0 16	15,960.			15,960.	15,960.		0

728102 04-01-17

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2017 DEPRECIATION AND AMORTIZATION REPORT

— CURRENT YEAR FEDERAL

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Asset No.	Description	Date Acquired Me	Method	Life	No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
368	368ROUNDPENS (FL)	121907SL		7.00	16	16,841.			16,841.	16,841.		0
399	399FENCES FLORIDA	010104SL		7.00	16	1,753.			1,753.	1,000.		0
410	410FENCING (FL)	092408SL		7.00	16	56,653.			56,653.	56,653.		0
415	(F)	013108SL		7.00	16	1,064.			1,064.	1,064.		0
	* 990 PAGE 10 TOTAL BUILDINGS MACHINERY & EOUIPMENT					213,274.		0	213,274.	204,442.		0
16	16BUILDING SUPPLIES	100500SL		7.00	16	1,967.			1,967.	1,967.		0
192	76WATERERS(5)	090104SL		7.00	16	1,785.			1,785.	1,468.		0
130	130TRACTOR/BUSH HOG	18509060		7.00	16	12,300.			12,300.	11,084.		0
159	HARROW MACHINE 159TRACTOR	011206SL		7.00	16	1,250.			1,250.	1,250.		0
163	163GOLF CART - WOMENS	18902090		5.00	16	2,660.			2,660.	2,660.		0
165	ES	18908080		7.00	16	1,000.			1,000.	975.		0
194	194(FL)	111899SL		7.00	16	1,942.			1,942.	1,942.		0
261	<u>~</u>	090302SL		5.00	16	1,899.			1,899.	1,899.		0
362		031307SL		7.00	16	1,333.			1,333.	1,333.		0
420	SPKEADE	123109SL		5.00	16	4,500.			4,500.	4,500.		0
	ASO FAGE IO TOTAL MACHINERY & EQUIPM					30,636.		0	30,636.	29,078.		0
	OTHER											
728102 04-01-17	14-17				<u>(</u>)	(D) - Asset disposed) II *	S, Section 179, Salv	vage, Bonus, Corr	mercial Revit	* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL -

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Current Year Deduction	227.	257.	484.	484.		0	0	0	0	0	0	0	0	0	0	0	0	C
Current Sec 179																		
Accumulated Depreciation	435.	386.	821.	234,341.		1,114.	1,284.	1,161.	20,205.	771.	18,169.	1,020.	682.	1,495.	.606	940.	646.	864.
Basis For Depreciation	1,586.	1,800.	3,386.	247,296.		1,114.	1,306.	1,620.	43,145.	1,689.	36,938.	2,074.	1,369.	2,923.	1,555.	1,820.	1,251.	1,595.
Reduction In Basis			0	0														
Bus % Excl																		
Unadjusted Cost Or Basis	1,586.	1,800.	3,386.	247,296.		1,114.	1,306.	1,620.	43,145.	1,689.	36,938.	2,074.	1,369.	2,923.	1,555.	1,820.	1,251.	1,595.
No.	16	16				16	16	16	16	16	16	16	16	16	16	16	16	16
Life	7.00	7.00				5.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00
Method	5SL	SL				$_{ m SI}$	SL	SL	9SL	SI	SL	SI	SL	SL	SL	SL	SL	SL
Date Acquired	013115	063015SL				081505SL	TS900860	080199SL	090199	010600SL	032700SL	0505081	052600SL	071800SL	071800SL	081600SL	18008060	111600SL
Description	TILE FOR CLASSROOM (FL)	ARNESS 990 PAGE 10 TOT	THER 990 PACE 10	100	BUILDINGS	126FENCING	158FENCING	268PADDOCK (KY)	269IMPROVEMENTS (KY)	271FENCING (KY)	273FENCING (KY)	274FENCING (KY)	(UN IN SHED (KY)	276FENCING (KY)	(UN IN SHED (KY)	UN IN SHED (KY)	(UN IN SHED (KY)	281FENCING (KY)
Asset No.	TILE 459(FL)	460H	0 *	i	_Щ_	126F	158F	268₽	269I	271F	273F	274F	275RUN	276F	277RUN	279RUN	280RUN	281FE

728102 04-01-17

(D) Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL -

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Current Year Deduction	0	0	0	0	0	0	0	0		0	0		0	0		0	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Current Sec 179																		rilativo Inioro
Accumulated Depreciation	901.	684.	9,540.	60,385.	2,600.	931.	3,531.	63,916.		7,673.	7,673.		3,100.	3,100.		13,529.		* ITC Section 179 Salvad Bonnus Commercial Davisacion 179
Basis For Depreciation	1,613.	1,131.	11,130.	112,273.	2,600.	1,200.	3,800.	116,073.		7,673.	7,673.		3,100.	3,100.		13,938.	938	Section 179 Salva
Reduction In Basis				0			0	0			0			0			0	*
Bus % Exci																		
Unadjusted Cost Or Basis	1,613.	1,131.	11,130.	112,273.	2,600.	1,200.	3,800.	116,073.		7,673.	7,673.		3,100.	3,100.		13,938.	13,938.	(D) Asset disposed
Line No.	16	16	16		16	16				16			16			16		(Q)
Life	7.00	7.00	7.00		5.00	5.00				7.00			2.00			5.00		
Method	댔	ĭ	ij		ĭŗ	ĭ				Ţ			J.			ij		
Date Acquired	050101SL	090101SL	123105SL		092605gL	021502SL				102407SL			122007SL			020403SL		
Description	284FENCING (KY)	286MATERIALS (KY)	_	LS LS	125SPREADER	290(KY)	ACHINERY &	704	BUILDINGS BARN RENOVATIONS -		TLDINGS CHINERY &	EQUIPMENT GOLF CART -	372GOOCHLAND	ACHINERY & EQ	EQUI PMENT	H	* 990 PAGE 10 TOTAL TRANSPORTATION EQU	1-17
Asset No.	284	286	396		125	290				371			372			325		728102 04-01-17

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL -

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Current Year Deduction	1,200.	1,200.	1,200.		0	0	0	0	0	0	0	0	0	0	22.	0	0
Current Sec 179																	
Accumulated Depreciation	2,300.	2,300.	26,602.		2,129.	5,783.	7,386.	2,172.	2,769.	2,502.	2,550.	2,571.	1,612.	953.	469.	29,996.	2,556.
Basis For Depreciation	6,000.	6,000.	30,711.		2,895.	7,435.	7,386.	2,741.	3,500.	3,113.	3,150.	3,150.	1,975.	1,142.	1,728.	32,851.	2,815.
Reduction in Basis		0	0														1
Bus % Excl																	
Unadjusted Cost Or Basis	6,000.	6,000.	30,711.		2,895.	7,435.	7,386.	2,741.	3,500.	3,113.	3,150.	3,150.	1,975.	1,142.	1,728.	32,851.	2,815.
No.	16				16	16	16	16	16	16	16	16	16	16	16	16	16
Life	5.00				7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	77.00	7.00	7.00
Method	뒤				ij	긙	H	ij	H	H	H	듼	긢	H	H	H	卢
Date Acquired	013115SL				082503SL	012104SL	031104SL	042804SL	051104SL	052604SL	070904SL	080204SL	080204SL	101804SL	110804SL	092705SL	102805SL
Description	OTHER 2001 FORD F-150 462(VA)	THER 990 PACE	75	BUILDINGS	35STATEMAN'S RIDGE	63FENCING	69AGRICOM BUILDINGS	73AGRICOM BUILDINGS	75ROOF	77AGRICOM BUILDINGS	80SHED	83SHED RITE RIDGE	85EXCAVATING	88WATER LINE	89FENCING	131IMPROVEMENTS	135 <u>IMPROVEMENTS</u>
Asset No.	462				3	63	69	73	75	77	08	8	8 21	80	89	131	135IM 728102 04-01-17

(D) - Asset disposed

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL --

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Asset No.	Date Acquired Me	Method	Life	Line o.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
143GATES AND POSTS	123105SL		5.00 1	91	1,400.			1,400.	1,400.		0
150PERMITS	103106SL		7.00	9	1,560.			1,560.	1,550.		0
326CONSULTANT (MP)	043003SL		7.00 1	9	5,000.			5,000.	3,436.		0
327 FENCING (MP)	073103SL		7.00	9	95,764.			95,764.	70,238.		0
328JF JAMES ASLA (MP)	081203SL		7.00	9	1,335.			1,335.	996		0
329(MP)	083103SL		7.00 1	9	14,919.			14,919.	10,964.		0
330CONSULTANT (MP)	082903SL		7.00	9	2,500.			2,500.	1,837.		0
332(MP)	090703SL		7.00 1	9	1,430.			1,430.	1,050.		0
333FENCING (MP)	093003SL		7.00	9 7	20,331.			20,331.	15,182.		0
334CONSULTANT (MP)	093003SL		7.00 1	9 7	2,500.			2,500.	1,867.		0
335FARM PLAN (MP)	093003SL		7.00 1	9	2,149.			2,149.	1,605.		0
337(MP)	102203SL		7.00 1	9	1,502.			1,502.	1,141.		0
338RUFFIN & PAYNE (MP	(MP) 102203SL		7.00	9	3,887.			3,887.	3,035.		0
339PETER C. BANCE (MP	(MP) 102803SL		7.00 1	9 7	1,222.			1,222.	955.		0
340EDGAR J. BANCE (MP	(MP) 103103SL		7.00 1	9 7	2,500.			2,500.	1,911.		0
341FENCING (MP)	110603SL		7.00 1	97	22,315.			22,315.	16,808.		0
342FARM PLAN (MP)	110603SL		7.00 1	9	1,672.			1,672.	1,259.		0
	111303EL		7.00 1	9	9,400.			9,400.	7,080.		0.
728102 04-01-17				ζ.	(D) . Asset disposed		*	0.000 1.20 Oct.		4	

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2017 DEPRECIATION AND AMORTIZATION REPORT

— CURREI

, INC.
FOUNDATION
RETIREMENT
THOROUGHBRED
FEDERAL -
ENT YEAR

Asset No.	Description	Date Acquired Met	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
MC 344FC	MONPELIER 344FOUNDATION (MP)	112303EL	7	7.00 1	9	2,113.			2,113.	1,641.		0
345EI	345EDGAR J. BANCE (MP)	(MP)113003SL	7	7.00 1	9	2,500.			2,500.	1,940.		0
347FE	347FENCING (MP)	122103SL		7.00 1	9	14,287.			14,287.	11,021.		0
348II	348IMPROVEMENTS (MP)	123103SL		7.00 1	9	3,500.			3,500.	2,700.		0
370FE	370FENCING (MP)	103107SL	7	7.00 1	ب	6,848.			6,848.	6,848.		0
411(MP)	BOILDING SUPPLIES (MP)	073108SL	Ä	10.001	9	26,045.			26,045.	21,925.		2,605.
428WZ	428WATERERS (MP)	051510SL		7.00 1	9	7,658.			7,658.	7,293.		365.
429FE	429FENCING (MP)	052010SL		7.00 1	9	21,056.			21,056.	19,803.		1,253.
434FE	434FENCING (MP)	120111SL		7.00	16	6,082.			6,082.	4,417.		869.
439FE	439FENCING (MP)	093012SL		7.00	16	3,070.			3,070.	1,866.		439.
HE F	TOTAL BUILDINGS FURNITURE &					358,426.		0	358,426.	285,186.		5,553.
92/20	67CORRAL PANELS	022104SL		7.00	16	1,156.			1,156.	900.		0.
710E	71OFFICE FURNITURE	032404SL		5.00	16	2,693.			2,693.	2,650.		0
14281	142SIGNAGE	123105SL		5.00	16	2,250.			2,250.	2,250.		0
FT MZ	- 43 43 - E					6,099.		0.	6,099.	5,800.		.0
64CC	64COMPUTER/PRINTER	013104SL		5.00	16	1,366.			1,366.	1,366.		0.

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(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2017 DEPRECIATION AND AMORTIZATION REPORT

— CURRENT YEAR FEDERAL —

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Asset No.	Description	Date Acquired M	Method	Life	No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
65JOHN DEERE	DEERE GATOR	021304SL		5.00	16	10,075.			10,075.	4,759.		0.
66TRACTOR	ror	021704SL		5.00	16	34,380.			34,380.	29,630.		0
68CUTTER	ir 15'	030504SL		7.00	16	9,800.			9,800.	7,629.		0
78PROP/	78PROP/EQUIPMENT	052604SL		7.00	16	3,800.			3,800.	3,052.		0
140HARROW	W CAREBDA	123105SL		5.00	16	4,000.			4,000.	4,000.		0
442(MP)		090112SL		5.00	16	22,500.			22,500.	19,500.		3,000.
445JOHN	445JOHN DEERE (MP)	100113SL		5.00	16	11,830.			11,830.	7,690.		2,366.
		033113SL		5.00	16	1,200.			1,200.	900.		240.
448KAWASAKI	AKI MULE	043013SL		5.00	16	8,375.			8,375.	6,142.		1,675.
453SADDLES (MP)	ES (MP)	083114SL		7.00	16	5,395.			5,395.	1,799.		771.
454HAY R	454HAY RACK (MP)	113014SL		5.00	16	1,739.			1,739.	725.		348.
MACHI	MACHINERY & EQUIPM					114,460.		0	114,460.	87,192.		8,400.
OTHER												
464FENCING (MP)	ING (MP)	093015SL		7.00	16	3,086.			3,086.	551.		441.
467MONTPELIER	MONTPELIER BIN IN SHED	013116SL		5.00	16	5,600.			5,600.	1,027.		1,120.
468MONTPELIER * 990 PAGE	ELIER PAGE 10 TOTAL	033117SL		7.00	16	12,230.			12,230.			1,310.
* 990	PAGE 10					20,916.		0	20,916.	1,578.		2,871.
						499,901.		0	499,901.	379,756.		16,824.

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2017 DEPRECIATION AND AMORTIZATION REPORT

— CURRENT YEAR FEDERAL —

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Asset No.	Description	Date Acquired Me	Method	Life	No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	BUILDINGS											
93	93FENCING	083104SL		7.00	16	42,784.			42,784.	31,607.		0
94	94PREFAB SHELL	103104SL		7.00	16	26,897.			26,897.	22,482.		0
96	96AIR CONDITIONER	113004SL		5.00	16	1,534.			1,534.	1,534.		0
133	133FENCING	120905SL		7.00	16	28,341.			28,341.	26,081.		0
171	171SYSTEMS (SC)	063006SL		7.00	16	5,704.			5,704.	5,678.		0
403	403FENCING WATEREE	010106SL		7.00	16	1,484.			1,484.	1,272.		0
414	414RUN IN SHED (SC)	083108SL		7.00	16	11,700.			11,700.	11,697.		0
417	417WELL	013109SL		7.00	16	26,287.			26,287.	26,287.		0
418	418IRRIGATION SYSTEM * 990 PAGE 10 TOWAL	18602090		7.00	16	25,028.			25,028.	24,728.		0
	- Kr					169,759.		.0	169,759.	151,366.		0
169	169SPREADER (SC)	012706SL		5.00	16	1,500.			1,500.	1,500.		0
170	170(SC)	042106SL		5.00	16	17,217.			17,217.	17,217.		0
405	405200 GAL SPRAYER	093008SL		5.00	16	2,055.			2,055.	2,055.		0
412	SEC INTERPLEMENTOR	050708SL		7.00	16	27,345.			27,345.	27,342.		0
440		102212SL	ഥ	5.00	16	4,888.			4,888.	4,075.		813.
449	449HORSE TRAILER (SC)	070113SL	-CJ	5.00	16	5,000.			5,000.	3,500.		1,000.

(D) - Asset disposed

^{*} ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2017 DEPRECIATION AND AMORTIZATION REPORT

— CURRENT YEAR FEDERAL —

THOROUGHBRED RETIREMENT FOUNDATION, INC.

Asset No.	Description	Date Acquired N	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
* 99 MACE TRAN	* 990 PAGE 10 TOTAL MACHINERY & EQUIPM TRANSPORTATION EQUIPMENT					58,005.		0	58,005.	55,689.		1,813.
98TRUCK	J.K	123104SL		2.00	16	2,800.			2,800.	2,800.		0
4132008	108 FORD F-150	010109SL		5.00	16	20,429.			20,429.	20,429.		0
ry.	TRANSPORTATION EQU * 990 PAGE 10 TOTAL					23,229.		0	23,229.	23,229.		0
1						250,993.		0	250,993.	230,284.		1,813.
BUIL	BUILDINGS		П									
374(D)RUN IN)RUN IN SHED (IA) 111207SL	111207SI		7.00	16	5,319.			5,319.	5,319.		0
BUIL *						5,319.		0	5,319.	5,319.		0
						5,319.		0	5,319.	5,319.		0
IDOI												
31DP L	31DP DISPLAY	122103SL		5.00	16	2,045.			2,045.	2,045.		0
32(COM	32(COMPUTERS)	123103SL		5.00	16	25,028.			25,028.	25,028.		0
38(D)C	38(D) COMPUTER	022104SL		5.00	16	1,584.			1,584.	1,584.		0
45EQUIPMENT	PMENT	111104SL		2.00	16	1,298.			1,298.	1,278.		0
46(D)C	46(D)COMPUTER (SK)	112404SL		5.00	16	1,427.			1,427.	1,427.		0
49(D)T	49(D)TELEPHONE	122304SL		2.00	16	1,298.			1,298.	1,298.		0
50 COM	COMPUTERS)	123104SL		5.00	16	7,643.			7,643.	4,587.		0.

(D) Asset disposed

 * TC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL -

Asset No.	Description	Date Acquired Me	Method	Life	No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
357	(D)COMPUTER & 357SOFTWARE	111907SL		5.00	16	1,202.			1,202.	1,202.		0.
404	404EQUIPMENT NATIONAL	010106SL		5.00	16	2,876.			2,876.	2,876.		0.
406	406SERVER	082308SL	, 21	00.	16	2,319.			2,319.	2,319.		0
407	407(D) SCANNER	021908SL		5.00	16	2,550.			2,550.	2,550.		0
432		010110SL		7.00	16	32,745.			32,745.	32,745.		0
	CHINERY & LANSPORTATION OF THE PROPERTY OF THE					82,015.		0	82,015.	78,939.		0.
425	425(D)07 HYUNDAI * 990 PAGE 10 TOTAL	010110SL		5.00	16	17,975.			17,975.	17,975.		0.
						17,975.		0	17,975.	17,975.		0
	OTHER											
455	4553020 & OFFICE FURNIO33115SL	033115SL		5.00	16	1,815.			1,815.	635.		363.
456	4563020 COMPUTERS	033115SL		2.00	16	1,801.			1,801.	630.		360.
457	457DELL LAPTOP	033115SL		2.00	16	1,571.			1,571.	550.		314.
458	458OFFICE FURNITURE	093015SL		7.00	16	.069			690.	124.		99.
	PAGE 10					5,877.		0	5,877.	1,939.		1,136.
						105,867.		0	105,867.	98,853.		1,136.
	BUILDINGS											
27	27FENCING	091602SL		7.00	16	1,689.			1,689.	1,328.		0

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2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL -

Asset No.	Description	Date Acquired Met	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Exci	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
36	36FENCING	042903SL		7.00 1	91	1,039.			1,039.	770.		0
14	145FENCING	103106SL		7.00 1	91	2,420.			2,420.	2,404.		0
146	146FENCING	123106SL		7.00 1	91	2,848.			2,848.	2,848.		0.
						7,996.		.0	7,996.	7,350.		0
376	O ₂	033107SL		5.00 1	16	1,800.			1,800.	1,800.		0
	MACHINERY & EQUIPM * 990 PACE 10 HOHAL					1,800.		0	1,800.	1,800.		0
						9,796.		0	9,796.	9,150.		0
	BUILDINGS BUILDING SHPPLIES											
405	409(MD) BITT.DING SHPPLIES	113008EL		10.001	16	16,999.			16,999.	13,742.		1,700.
415		18600860		10.001	9 7	22,693.			22,693.	16,450.		2,269.
427	427 FENCING (MD)	041510SL		7.00 1	16	2,026.			2,026.	1,951.		72.
433	433HORSE SHELTER (MD)	(MD)081711SL		7.00 1	16	9,416.			9,416.	7,173.		1,345.
443	443WINDOWS	103113SL		7.00	16	3,900.			3,900.	1,764.		557.
452	452FENCING (MD)	022814SL		7.00	16	3,900.			3,900.	1,578.		557.
	7 6					58,934.		0	58,934.	42,658.		6,500.
						58,934.		0	58,934.	42,658.		6,500.
	BUILDINGS											

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2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL --

Sec 179	_	0	0	0	9	9	2	7.		9	œ	2	'n	2	0	4.	-		1.
Proceedings Procession Pr	Current Year Deduction				٨,	14	7	, 7		42			4,		35	-	2		4
Postation Post Po	Current Sec 179																		
Passe Fundamental	Accumulated Depreciation	2,698	, 33	,355	2,256	15	,400	9,85		786.	-	, 07	609,		Ĭ	,038	3,896		3,555.
HORSE SHELTER	Basis For Depreciation	2,698	,334	,355	3,725	,023	1,519	,654		3,000.	,207	,208	2,066	,414	1,000	4,895	5,549		-
HORSE SHELTER	Reduction In Basis																		
HORSE SHELTER	Bus % Excl																		
HORSE SHELTER	Unadjusted Cost Or Basis	2,698	,334	,355	3,725	,023	1,519	0,65		-	2	, 20	2,06	,414	1,000	4,895	5,549		3,596.
HORSE SHELTER	No.						16								16				16
HORSE SHELTER - 1201088 GJAMES RIVER - 1105098 HORSE SHELTER - 1105098 HORSE SHELTER - 1105098 HORSE SHELTER - 1105098 HORSE SHELTER - 1105098 FENCING - JAMES 0930108 FENCING - JAMES 0531118 CHICL - JAMES RIVER 1130148 * 990 PAGE 10 TOTAL BUILDINGS - JAMES R0930158 CTHER ROUNDPENS - JAMES R0930158 STONEDUST FOR 3ROUNDPENS - JAMES R0930158 STONEDUST FOR 3ROUNDPENS - JAMES R0930158 STONEDUST FOR 3ROUNDPENS - JAMES R0930178 STONEDUST FOR 3ROUNDPENS - JAMES R0930178 STONEDUST FOR 3ROUNDFENS - JAMES R0930178 STONEDUST FOR 3ROUNDFENS - JAMES R0930178 STONEDUST FOR 301188 STON	Life	7.00	7.00	7.00	7.00	7.00	10.00			7.00	7.00	5.00	5.00	7.00	5.00				
HORSE SHELTER - GLAMES RIVER FENCING - JAMES TRIVER HORSE SHELTER - FENCING - JAMES SRIVER STONEDUST FOR STONES STONEDUST FOR STONES STONEDUST FOR STONES STON	Method	SI	SL	SL	SL	SL	SI			SL	SL	SL	SL	SL	SL				SL
HORSE SHELTER - GLAMES RIVER FENCING - JAMES TRIVER HORSE SHELTER - FENCING - JAMES SRIVER STONEDUST FOR STONES STONEDUST FOR STONES STONEDUST FOR STONES STON	Date Acquired	120108	043009	110509	093010	053111	113014			2	093015			063017	121317				012510
0 1 4 0 10 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Description	SH	ָלָּלָּלָּלָּלָּלָּלָּלָּלָּלָּלָּלָּלָּ	RIVE		ا ا	- JAMES F	1	1	Drich FO	- JAMES	RIVER	VEHICLE - JAMES RI		4044M - JAMES	FAGE 10	SOC FAGE TO	BUILDINGS	- 1
	Asset No.	416	421	424	430E	435E	450	-14	_ U 14	$\overline{\Box}$	(2)	465E	466	469F	4707			-14	426F

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2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL

, INC.
FOUNDATION
RETIREMENT
THOROUGHBRED
1

Current Year Deduction	41.	41.		3,341.	1,843.	5,184.	5,184.	41,751.							
Current Sec 179															
Accumulated Depreciation	3,555.	3,555.		11,137.	5,836.	16,973.	16,973.	1213723.		1213723.	0	62,248.	1151475.		
Basis For Depreciation	3,596.	3,596.		23,386.	12,900.	36,286.	36,286.	1535919.		1500275.	35,644.	65,324.	1470595.		
* Reduction In Basis	0	0				0	0	0		0	0	0	0		
Bus % Excl															
Unadjusted Cost Or Basis	3,596.	3,596.		23,386.	12,900.	36,286.	36,286.	1535919.		1500275.	35,644.	65,324.	1470595.		
No.				16	16										
Life				7.00	7.00										
Method															
Date Acquired				082613SL	101613SL										
Description	10		BUILDINGS	444FENCING (IL)	446FENCING (IL)	BUILDINGS	- 990 FAGE IO IOIAL	PAGE 10 DEPR	CURRENT YEAR ACTIVITY	BEGINNING BALANCE	ACQUISITIONS	DISPOSITIONS	ENDING BALANCE		
Asset No.			1-3	444	446										

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- NEXT YEAR FEDERAL -

No.	Acquired Me	Method Life	Unadjusted Cost Or Basis	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
BUILDINGS							
53FENCING (WK)	90404	7.0	,38		,38	,13	0
152FENCING	53106	7.0	,49		, 49	, 46	0
153FENCING	62106	7.0	, 13		, 13	,12	0
177FENCE & BARN (WK)	10195	7.0	, 55		, 55	26	0
179TURNOUT SHEDS (WK)	01096	7.0	,23		,23	,61	
WK)	120101SL	7	1,436.		1,436.		0
186BUILDING SUPPLIES (WK)	21203	7.0	, 70		, 70	69'	0
187FENCING (WK)	22103	7.0	,13		,13	18	
358FENCING (WK)	73107	7.0	, 42		,42	, 42	
398FENCES WALKILL	10104	7.0	, 80		,80	,81	
408FENCING (WK)	93008	7.0	1,48		1,48	, 48	
423FENCING - WALLKILL	22809	7.0	,82		,82	,82	
436FENCING (WK)	03111	7.0	,84		,84	,62	18
441FENCING (WK)	70112	7.0	,33		, 33	,62	477.
451FENCING (WK)	03114	7.0	, 18		, 18	,89	8
* 990 PAGE 10 TOTAL BUILDINGS			, 97		<u></u>	,10	93
MACHINERY & EQUIPMENT							
51EQUIPMENT (WK)	022404SL	5.00	550		2,550.	,587	0
JT COVERALL	323058	0.	, 06		690'	9	0
* 990 PAGE 10 TOTAL MACHINERY &							
EQUIPMENT			$^{\circ}$		3,619.	,656	0
* 990 PAGE 10 TOTAL -			, 59		, 598	59,758.	1,293.
BUILDINGS	1 0	1	(•	1	
	708058	1 .	, 0 ,		0,0	m ,	0
BUILDING SI	12677 2007 2007 2007 2007	7.0	4,04		, 94	46,	0
	109998	7.0	5,31		5,31	5,31	0
(FL)	12999S	7.0	, L		, 18	, 18	0
_	215998	7.0	, 46		,46	, 46	0
204BUILDING SUPPLIES (FL)	404008	7.0	, 12		, 12	, 48	0
년)	427008	7.0	88		,889	93	
06CONSTRUCTION DRAWI	505008	7.0	, 50		, 50	, 23	
ש	051100SL	7	4,500.		4,500.	2,214.	0
210CEMENT (FL)	523008	7.0	36		,36	,36	0

- NEXT YEAR FEDERAL -

THOROUGHBRED RETIREMENT FOUNDATION, INC.

	Acquired	Method	Life Cost Or Basis	Reduction In Basis	Depreciation	Depreciation	Depreciation
G	53100	L 7.	0 4,61		, 61	, 61	0
12ELECTRICA	100	7.	00 1,126	•	1,126.	1,126.	0
(FL)	60500	7.	0 1,08	•	,08	,08	0
7BUILDING SUPPLIES (62300	7.	0 2,26	•	, 26	,26	0
1BUILDING	81600	7.	0 1,33	•	, 33	, 33	0
WINDOWS	82500	7.	0 2,47	•	, 47	, 47	0
227LUMBER (FL)	90700	7.	0 2,24	•	, 24	,24	0
28BUILDING SUPPLIES (90700	7.	0 10,40	•	,40	, 40	0
OBUILDING SUPPLIES (91100	7.	0 6,85	•	,85	,85	0
SITUATION (91100	7.	0 1,83	•	,83	3	0
34BUILDING	92600	7.	0 4,11	•	,11	, 11	0
37WINDOWS (FL)	92900	7.	0 1,74	•	,74	, 74	0
띮	92900	7	0 3,03	•	,03	,03	0
0	03100	7.	0 3,92	•	,92	,92	0
SEPTIC TANK (FL)	22800	7.	0 3,30	•	,30	,30	0
51ASPHALT 90 TONS (FL	80101	7.	0 3,15	•	,15	, 15	0
58BUILDING SUPPLIES (10702	7	0 2,17	•	,17	,25	0
59BUILDING SUPPLIES (12902	7.	0 1,23	•	, 23	S	0
63BUILDING SUPPLIES (71800	•	0 15,0	•	15,035.	0	0
64BUILDING	60500	7	3,77	•	3,77		0
363FENCING (FL)	71007	7.	0 15,96	•	96,	96,	0
368ROUNDPENS (FL)	21907	7.	0 16,84		6,84	6,84	0
ᄺ	10104	7.	0 1,75	•	1,75	,00	0
FENCING	92408		0 56,65		, 65	, 65	0
r)	13108	L 7.	0 1,06	•	1,06	1,06	0
* 990 PAGE 10 TOTAL BUILDINGS MACHINERY & EQUIPMENT			ζ.	•	, 27	204,442.	0
16BUILDING SUPPLIES	00500	•	0 1,96		96	1.967.	0
76WATERERS(5)	90104	L 7.	0 1,78	•	,785	46	0
130TRACTOR/BUSH HOG	90605	L 7.	0 12,30		,300	08	0
159HARROW MACHINE TRACTOR	11206	L 7.	0 1,25	•	1,250	1,25	0
163GOLF CART - WOMENS	060506		00 2,660		099	,660	0
165SADDLES	80806	L 7.	0 1,00	•	00,	975	0
194DUMP TRUCK SERVICE (FL)	11899	L 7.	0 1,94	•	, 94	42	0.

- NEXT YEAR FEDERAL -

Asset No.	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
261ROTARY MOWER (FL)	090302	SL	5.00	1,899.		1,899.	899	0
3623 40 GAL WATERERS (FL)	31.50	3	0	3,		33	, 33	0
420MANURE SPREADER (FL) * 990 PAGE 10 TOTAT. WACHINERY &	2310	M	0	, 50		, 50	, 50	0
				30,636.		30,636.	29.078.	C
OTHER								
459TILE FOR CLASSROOM (FL)	013115	SL	7.00	, 58		, 58	9	N
IBROOI	6301	S	0	008'		,800	43	
* 990 PAGE 10 TOTAL OTHER				386		386	1,305.	484
* 990 PAGE 10 TOTAL -				,29		,296	,825	8
BUILDINGS								1
126FENCING	8150	S	0.	1,114.		11		0
158FENCING	9300	SL	0.	,30		,30	28	0
9	8019	SL	0	,62		,62	,16	0
269IMPROVEMENTS (KY)	9019	SL	0.	,14		,145	, 20	0
\forall	1060	SL	0.	, 68		,689	77	0
3FENCING	3270	SI	0.	,93		,938	9	0
274FENCING (KY)	5050	SL	0	, 07		,07	,02	0
S	052600	SI	7.00	1,369.		1,369.	682.	0
FENCING (KY)	7180	SL	0	,92		,92	9	0
7RUN IN SHED (7180	SL	0	, 55		, 55	0	0
NH	8160	SL	0	, 82		, 82	4	0
ORUN IN SI	9080	SL	0	, 25		, 25	4	0
FENCING	1160	SI	0	, 59		, 59	9	0
FENCING (KY)	5010	SL	0	,61		,61	0	0
6CONSTRUCTION MATER	9010	S	•	1,13		, 13	∞	0
MPROVEME	2310	SI	0	, 13		$^{\circ}$, 54	0
				2,27		2,27	∞	0
MACHINERY & EQUIPMENT								
125SPREADER	092605	SL	2.00	2,600.		2,600.	0	0
290PREWIT IMPLEMENTS (KY)	2150		0	, 20		,20	931.	0
* 990 PAGE 10 TOTAL MACHINERY &								
EQUIPMENT * OOO DACE 10 HORAT				3,800.		3,800.	3,5	00
THE TO				10'0T		/ n ' a T	Z T	0

^{*} ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL

L 5.00 7,673. 7,000. 3,100. 3,100. 3,100. 3,100. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,142. 1,1400. 1,560. 5,000. 5	Asset No.	otion	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
HIAND TAL MACHINERY & 3,100. TAL TRANSPORTATION (VA) (VA)	BUILDINGS BARN RENOVE	GOOCHLAND	02407	IS	0.	,673		,673	7,673.	000
HIAND TAL MACHINERY & 3,100. TAL MACHINERY & 3,100. QUIPMENT QUIPMENT TAL TRANSPORTATION (VA) TAL TRANSPORTATION (VA) TAL TRANSPORTATION TAL OTHER (VA) (VA) (VA) (VA) (VA) (VA) (VA) TAL OTHER (VA)	મ જ	BOILDINGS				0		, 0 / 3	٥,	0
QUIPMENT (VA) TAL TRANSPORTATION (VA) (SOLF CART -		22007		0.	,10		,10	3,100.	0
QUIPMENT (VA) TAL TRANSPORTATION (VA) TAL OTHER (SS 503SL 7.00 6,000. 6,000. 6,000. 7,386. 7,111. 30,711.	a					,100		,100	3,100.	0
TAL TRANSPORTATION (VA) (VA)	TRANSPORTATION EQUI	CPMENT	-	į						
(VA) TAL OTHER TAL OTHER TAL OTHER TAL OTHER TAL OTHER (SECONDARY CONDITIONS) TAL OTHER	3251997 FORD TRUCK (VA	A)	2040	T.S.	•	3,938		3,938	13,529.	0
TAL OTHER TAL OTHER O82503SL 7.00 082503SL 7.00 7,435 012104SL 7.00 7,435 031104SL 7.00 7,435 7,11 30,71	EQUIPMENT					3,938		3,938	13,529.	0
TAL OTHER O82503SL 7.00 2,895. 2,895 012104SL 7.00 7,386. 7,435 031104SL 7.00 7,386. 7,386 052604SL 7.00 2,741. 2,741. 2,741. 3,113 052604SL 7.00 3,113 3,113 3,113 052604SL 7.00 3,150 3,150 080204SL 7.00 3,150 3,150 080204SL 7.00 1,728 1,728 1,728 1,728 1,728 1,728 1,728 1,728 1,728 1,728 1,23105SL 7.00 1,560 05500 043003SL 7.00 5,000 055764 1,000 1,560 055764			1211	G.	-	000		0	0	c
TAL - 30,711.	ľ	•	1 7	1 2	•	000			7 00 0	200
SS 503SL 7.00 2,895. 2,895. 1,435. 1,435. 1,435. 1,435. 1,435. 1,435. 1,435. 1,435. 1,435. 1,435. 1,435. 1,435. 1,435. 1,435. 1,400. 1,400. 1,560. 1,	990 PAGE					0,711		0,711	27,802.	1,200.
SST 104SI 7.00 2,895. 7,435. 7,435. 13104SI 7.00 7,435. 7,435. 7,435. 1042L04SI 7.00 7,386. 7,435. 7,435. 1042L04SI 7.00 2,741. 2,741. 2,741. 13.86. 13.103. 113. 113. 113. 113. 113. 113.	BUILDINGS									
SSTITUTE TO STATE	S'N		8250	SL	0.	, 89		$\boldsymbol{\sigma}$,12	0
#S 031104SL 7.00 7,386. 7,386 042804SL 7.00 2,741. 2,741 #S 052604SL 7.00 3,113. 3,113 #S 070904SL 7.00 3,113. 3,113 #S 113 080204SL 7.00 3,150. 3,150 #S 113 080204SL 7.00 1,975 #S 110804SL 7.00 1,728 #S 110804SL 7.00 1,400 #S 1108106SL 7.00 1,560 #S 1108106SL 7.00 5,000 #S 1108106SL 7.00 6,000 #S 1108106SL 7.00 6,000 #S 1108106SL 7.00 6,000 #S 1108106SL 7.00 6,000	63FENCING		1210	SL	0	,43		,43	, 78	0
IS 042804SL 7.00 2,741. 2,741 051104SL 7.00 3,113. 3,500 052604SL 7.00 3,113. 3,113 070904SL 7.00 3,150. 3,1150 080204SL 7.00 1,975. 1,975 101804SL 7.00 1,142. 1,142 110804SL 7.00 1,728 11,142 11,0804SL 7.00 2,851 123105SL 7.00 1,400 1,400 1,400 1,400 1,500 043003SL 7.00 5,000 5,000 073103SL 7.00 5,000 5,000			3110	SL	0.	,38		,38	,38	0
F\$\text{is}\$ \[\text{051104SL} 7.00 3,500. 3,113. 1,142. 1,140.			4280	SL	0	,74		,74	-	0
FATING O52604SL O70904SL T.00 O80204SL O80204SL T.00 O80204SL T.00 O80204SL T.00 O80204SL T.00 O80204SL T.00 O1,975 O1,975 O1,878 O92705SL T.00 O2,815 O2,815 O4300SL T.00 O4300SL T.00 O5,000 O4300SL T.00 O7310SL T.00 O5,764			5110	SI	0	, 50		, 50	,76	0
ATING 070904SL 7.00 3,150. 3,150 3,150 080204SL 7.00 1,975 1,975 1,975 1,142 1,140 1			5260	SL	0	4		, 11	,50	0
ATING 080204SL 7.00 3.150. 3.150 0.080204SL 7.00 1.975. 1.975 1.97	80SHED		7090	SL	0	, 15		,15	, 55	0
ATING 080204SL 7.00 1,975. 1,975 1,975 1,975 1,142 1,142 1,142 1,142 1,142 1,142 1,142 1,142 1,142 1,142 1,142 1,142 1,142 1,728 1,7			8020	SL	0	, 15		,15	, 57	0
TOT804SL 7.00 1,142. 1,		ING	8020	SL	0	76,		,97	,61	0
TIUSUASE 7.00 1,728 32,851 092705SL 7.00 32,851 32,851 102805SL 7.00 2,815 2,815 1,400 1,400 1,560 1,560 043003SL 7.00 5,000 5,000 073103SL 7.00 95,764,95,764	88WATER LINE		0180	SI	000	, 14		, 14	003	0 0
FMENTS 102805SL 7.00 32,851. 32,851 102805SL 7.00 2,815. 2,815 123105SL 5.00 1,400. 1,400 1,560 043003SL 7.00 5,000. 5,000 073103SL 7.00 95,764. 95,764	89FENCING		1000 1000 1000	ב ב	0.6	1,72		1,72	49	22.
TEMENTS 102805SL 7.00 2,815. 2,815 1,400 1,23105SL 5.00 1,400. 1,560. 1,560 1,560 1,560 043003SL 7.00 5,000. 5,000 073103SL 7.00 95,764. 95,764	z		9270	SL	0	2,85		2,85	ത	0
123105SL 5.00 1,400. 1,400 1,03105SL 7.00 1,560. 1,560 1,560 043003SL 7.00 5,000. 5,000 073103SL 7.00 95,764. 95.764	135LEASEHOLD IMPROVEME	ENTS	0280	$_{ m SI}$	0	87		,81	, 55	0
103106SL 7.00 1,560. 1,56 0.043003SL 7.00 5,000. 5,000 0.73103SL 7.00 95.764. 95.76	143GATES AND POSTS		2310	SI	0	, 40		, 40	, 40	0
043003SL 7.00 5,000. 5,000 073103SL 7.00 95.764. 95.76	150PERMITS		0310	SI	0	, 56		, 56	, 55	0
07 31 03 SL 7.00 95.764.	326CONSULTANT (MP)		4300	SL	0	00,		00,	,43	0
	327FENCING (MP)		7310	SI	0	5,76		, 7	4	0
81203SL 7.00 1,335. 1,33			81.20		7.00	സ		,33	9	0.

- NEXT YEAR FEDERAL -

Asset No.	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
329ORANGE MADISON COOP (MP)	83103	ц	0	,91		,91	96'	0
330CONSULTANT (MP)	82903		0	, 50		,50	ω,	0
332STATEMAN'S RIDGE (MP)	90703		0	,43		,43	,05	0
333FENCING (MP)	93003		0	,33		,33	,18	0
334CONSULTANT (MP)	93003		0.	,50		,50	,86	0
335FARM PLAN (MP)	93003		0	, 14		,14	09	0
337STATEMAN'S RIDGE (MP)	02203		0.	, 50		,50	, 14	0
338RUFFIN & PAYNE (MP)	02203		0.	88		88	,03	0
339PETER C. BANCE (MP)	102803	SL 7	00.7	1,222.		1,222.	955.	0
340EDGAR J. BANCE (MP)	03103		0	2,50		, 50	,91	0
341FENCING (MP)	10603		0	,31		,31	,80	0
342FARM PLAN (MP)	10603		0	,67		19'	, 25	0
343GREG'S EXCAVATING (MP)	11303		0	,40		,40	,08	0
LER	12303		0	,11		,11	,64	0
345EDGAR J. BANCE (MP)	13003		0.	,50		,50	,94	0
	22103		0.	, 28		, 28	,02	0
	23103		0	, 50		, 50	70	0
$\ddot{}$	03107		00.	,84		,84	,84	0
	73108		0	,04		,04	, 53	1,515.
Ø	51510		0	7,65		, 65	9'	0
FENCING	52010		0	വ		2	, 05	0
	20111		0	,08		,08	28	$\boldsymbol{\sigma}$
439FENCING (MP)	93012		0	,07		0	3	439.
* 990 PAGE 10 TOTAL BUILDINGS				, 42		, 42	290,73	~
FURNITURE & FIXTURES								
67CORRAL PANELS	022104	SI	7.00	1,156.		1,156.		0
71OFFICE FURNITURE	32404	ч	0	, 69		, 69	2,65	0
142 SIGNAGE	23105	ц	0	, 25		,250	2,25	0
* 990 PAGE 10 TOTAL FURNITURE &								
				6,099.		6,099.	5,800.	0
α	013104	SL	2.00			1,366.		0
65JOHN DEERE GATOR	21304		0	_		,07	4,75	0
6 6 TRACTOR	21704		0	4,38		4,38	, 63	0

^{*} ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL -

CONTINUES CONT	Asset No.	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
OSIGO4SI 7.00 3,800. 4,000. 4,000. 4,000. 4,000. 2,000. 1	68CUTTER 15'	305	45	0	80		, 80	, 62	0
HINERY & 123105ST 5.00 4,000 4,000 22,500 12,500 10,0113SL 5.00 11,830 11,830 11,140 1	78PROP/EQUIPMENT	526	4 8	0	, 80		,800	,052	0
HINERY & 100112SL 5.00 11,830 11,830 10,056 10,056 10,056 10,056 11,830 10,056 11,830 11,830 10,056 11,830 10,056 11,830 11,830 11,830 10,056 11,830	140HARROW	231	5	0	4,000		,000	,000	0
HINGS 100113SI 100113SI 1003113SI 1003113SI 1003113SI 1000 11,200 11,200 11,200 11,200 11,400 11,400 11,739 11,730 11,739 11,730 11,731 11,730 11,731 11,7	GMC SIERRA	901	20	0	2,500		2,500	2,500	0
HINERY & 1,200 1,200 1,200 1,200 1,140 1,200 1,140 1,200 1,144 1,200 1,144 1,200 1,144 1,200 1,144 1,200 1,144 1,200 1,144 1,200 1,144 1,200 1,2		001	8	0	1,830		1,830	0,056	
HINERY & 13014SL 5.00 8,375. 8,375. 7,817 13014SL 7.00 5,395. 5,395. 5,395. 2,570 1,3014SL 5.00 1,739. 1,739. 1,073 1,07		331	<u>8</u>	0	,200		,200	1,140	9
HINERY & 113014SL 7.00 5,395. 1,739. 1,739. 1,073 HINERY & 113014SL 5.00 1,739. 1,739. 1,073 HINERY & 114,460. 1,739. 1,739. 1,073 O93015SL 7.00 3,086. 3,086. 2,147 O83104SL 7.00 12,230. 12,230. 1,310 O83104SL 7.00 42,784. 42,784. 31,607 O83104SL 7.00 26,897. 26,897. 22,482 I13004SL 7.00 26,287. 26,897. 22,482 I120905SL 7.00 11,700. 1,484. 1,272 O63006SL 7.00 26,287. 26,287. 26,287. 26,287 O63006SL 7.00 14,84. 1,272 O63006SL 7.00 26,287. 26,287. 26,287. 26,287 IDDINGS 012706SL 5.00 1,500. 1,500. 1,500. 1,500 O42106SL 5.00 1,7217. 17,217 O42106SL 5.00 2,345. 27,345. 26,288 HR (SC) 050708SL 7.00 2,345. 27,345. 27,345. 27,345.	448KAWASAKI MULE	430	<u>8</u>	0.	,37		,375	,817	558.
HINERY & 113014SL 5.00 1,739. 1,739. 1,073 HINERY & 114,460. 1,739. 1,073 OBSILISEL 7.00 3,086. 5,600. 2,147 OBSILO4SL 7.00 12,230. 12,230. 1,310 OBSILO4SL 7.00 20,916. 499,901. 396,580 OBSILO4SL 7.00 42,784. 42,784. 31,607 IN3104SL 7.00 26,897. 26,897. 22,482 IL30905SL 7.00 26,897. 26,897. 22,482 IL30905SL 7.00 28,341. 28,341. 26,081 OBSILOSSL 7.00 26,897. 26,28	453SADDLES (MP)	831	45	0	, 39		,395	,570	
HINERY & 114,460. 114,460. 114,460. 95,592	454HAY RACK (MP)	1130	48	0.	,73		,73	,073	4
114,460. 114,460. 114,460. 114,460. 95,592									
IBR (SC) 093015SL 7.00 3,086. 5,600. 2,147 IBR (SC) 083104SL 7.00 26,897. 26,287. 26,287 IDINGS 012706SL 7.00 25,028 26,287 26,287 IDINGS 012706SL 5.00 17,217 17,217 17,217 IDINGS 050708SL 7.00 27,345 27,345 27,345	EQUIPMENT OTHER				14,46		14,460	5,592	3,511.
IR (SC) 013116SL 5.00 5,600. 2,147 (SC) 083104SL 7.00 12,230. 12,230. 1,310 (SC) 083104SL 7.00 26,897. 26,897. 22,482 113004SL 7.00 28,341. 28,341. 26,081 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,272 013109SL 7.00 28,341. 28,341. 26,081 1,03104SL 7.00 11,484. 1,700. 11,484. 1,272 013109SL 7.00 11,700. 11,484. 1,700. 11,697 012706SL 7.00 12,028. 25,028. 24,728 1,500 17,217. 17,21	464FENCING (MP)	930	5	0	, 08		,08	σ	4
RR 033117SL 7.00 12,230. 12,230. 1,310 12,230. 1,310 12,230. 1,310 12,230. 1,310 12,230. 1,310 1	CART -	131	68	0	,600		,600	14	12
(SC) (SC) (SC) (SC) (SC) (SC) (SC) (SC)	IN SHED -	331	7	0.	2,230		2,230	,31	747
083104SL 7.00 42,784. 429,901. 396,580 103104SL 7.00 26,897. 26,897. 22,482 113004SL 7.00 28,341. 28,341. 26,081 1,534. 1,500. 11,700. 11,700. 11,700. 11,700. 11,700. 11,697. 26,287. 26,287. 26,287. 060509SL 7.00 25,028. 169,759. 151,366. 1,500. 042106SL 5.00 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 093008SL 5.00 27,345. 27,345. 27,345. 102212SL 5.00 4,888.	990 PAGE 10 TOTAL				0,916		0,916	, 44	,308
083104SL 7.00 42,784. 42,784. 31,607 103104SL 7.00 26,897. 26,897. 22,482 113004SL 7.00 26,897. 26,897. 22,482 120905SL 7.00 28,341. 28,341. 26,081 010106SL 7.00 1,484. 1,484. 1,272 013109SL 7.00 11,700. 11,697 013109SL 7.00 26,287.	990 PAGE 10				99,90		99,901	96,58	, 59
083104SL 7.00 42,784. 42,784. 31,607 103104SL 7.00 26,897. 26,897. 22,482 113004SL 7.00 26,897. 26,897. 22,482 1120905SL 7.00 28,341. 26,081 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,500. 11,700. 11,700. 11,700. 11,697 060509SL 7.00 25,028. 26,287. 26,287. 26,287. 169,759. 151,366. 1,500. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 102212SL 5.00 4,888. 4,888.	_								
103104SL 7.00 26,897. 26,897. 22,482 113004SL 5.00 1,534. 1,500. 1,484. 1,272 1,484. 1,272 1,484. 1,272 1,484. 1,272 1,484. 1,272 1,484. 1,272 1,484. 1,272 1,13109SL 7.00 26,287. 26,287. 26,287. 060509SL 7.00 25,028. 169,759. 151,366	93FENCING	831	45	0	2,78		2,78	1,60	0
113004SL 5.00 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,534. 1,20905SL 7.00 28,341. 5,704. 5,704. 5,704. 5,704. 5,678 1,272 083108SL 7.00 11,700. 11,700. 11,697 060509SL 7.00 25,028. 25,028. 24,728 060509SL 7.00 25,028. 169,759. 151,366 012706SL 5.00 17,217. 17,217. 17,217. 093008SL 5.00 2,055. 2,055. 102212SL 5.00 4,888. 4,888. 4,888.	94PREFAB SHELL	031	45	0	6,897		6,897	2,48	0
120905SL 7.00 28,341. 28,341. 26,081 063006SL 7.00 1,484. 1,484. 1,272 010106SL 7.00 11,484. 1,484. 1,272 083108SL 7.00 11,700. 11,700. 11,697 013109SL 7.00 26,287. 26,287. 26,287 26,2	96AIR CONDITIONER	130	45	0	1,53		, 53	, 53	
(SC) 063006SL 7.00 5,704. 5,678 1,484. 1,272 010106SL 7.00 11,484. 1,484. 1,272 083108SL 7.00 11,700. 11,700. 11,697 013109SL 7.00 26,287 26,2		209	5	0	8,341		8,341	6,08	
010106SL 7.00 1,484. 1,484. 1,272 083108SL 7.00 11,700. 26,287. 26,287 013109SL 7.00 25,028. 25,028. 24,728 060509SL 7.00 25,028. 25,028. 24,728 012706SL 5.00 1,500. 1,500. 1,500. 042106SL 5.00 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 17,217. 10,212SL 5.00 4,888. 4,888. 4,888	SYSTEMS	630	9	0	,704		,704	,678	
11,700	403FENCING WATEREE	101	8	0	1,484		,484	,272	
O13109SL 7.00 26,287. 26,287. 26,288 060509SL 7.00 25,028. 25,028. 24,72 25,028. 24,72 25,028. 24,72 25,028. 24,72 25,028. 24,72 25,028. 24,72 25,028. 24,72 25,028. 24,72 25,028. 24,72 25,028. 24,72 25,028. 25,028. 25,028. 25,028. 25,028. 25,028. 25,028. 25,028. 27,345.	414RUN IN SHED (SC)	831	8	0	1,700		1,700	1,697	0
LDINGS 060509SL 7.00 25,028. 25,028. 24,72 169,759. 151,36 012706SL 5.00 1,500. 1,500. 1,500. 1,500 093008SL 5.00 17,217. 17,217. 17,217. 10,2136. 27,345. 27,345. 27,345. 4,888. 4,88		131	<u>გ</u>	0	6,287		6,287	6,28	0
LDINGS 169,759. 169,759. 151,36 012706SL 5.00 1,500. 1,500 042106SL 5.00 17,217. 17,217. 093008SL 5.00 2,055. 2,055. 102212SL 5.00 4,888. 4,888.		090	<u>გ</u>	0	5,02		5,028	4,72	
012706SL 5.00 1,500. 1,500. 1,500. 1,500. 1,500. 1,500 042106SL 5.00 17,217. 1		-			69,75		69,759	51,36	
012706SL 5.00 1,500. 1,500. 1,500. 042106SL 5.00 17,217. 17,217. 17,217. 093008SL 5.00 2,055. 2,055. 2,055. 102212SL 5.00 4,888. 4,888.	MACHINERY & EQUIPMENT								
042106SL 5.00 17,217. 17,217. 17,217 093008SL 5.00 2,055. 2,055 3R (SC) 050708SL 7.00 27,345. 27,345 102212SL 5.00 4,888. 4,888.	169SPREADER (SC)	127	68	0.	,500		,500	,50	0
GAL SPRAYER 093008SL 5.00 2,055. 2,055. 2,055 5403 TRACTOR & LOADER (SC) 050708SL 7.00 27,345. 27,345. 27,34 N DEERE GATOR (SC) 102212SL 5.00 4,888. 4,888.	170JOHN DEERE TRACTOR (SC)	421	8	0.	7,217		7,217	7,21	0
5403 TRACTOR & LOADER (SC) 050708SL 7.00 27,345.	GAL SPRAYER	0860	8 2	0	2,055		2,055	2,05	0
OUOCHN DEERE GATOR (SC) 10 22 12 SL 5.00 4,888. 4,888. 4,888. 4,888.	5403 TRACTOR & LOADER	0507	8 S	0	7,345		7,345	7,34	0
	OJOHN DEERE GATOR (022	읭	이	88		88	88	0

⁽D) - Asset disposed

^{*} ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL

THOROUGHBRED RETIREMENT FOUNDATION, INC.

		Acquired		2	Cost Or Basis	Reduction In Basis	Depreciation	Depreciation	Depreciation
*	ORSE TRAILER (SC) 990 PAGE 10 TOTAL MACHINERY &	0701138	SL	5.00	5,000.		5,000.	4,500.	500.
田丘	ENT ORTATION				58,005.		58,005.	57,502.	500.
98TRUCK	RUCK	1231048	SI	5.00	2,800		2,800	2,800	0
4134008 * 990	990 PAGE 10 TOTAL TRANSPORTATION	A O T O T		•	7 7 7		, 42	, 42	0
田	ENT				23,229.		23,229.	3,22	0
* BU	* 990 PAGE 10 TOTAL – BUILDINGS				0,99		0,993	097	
	MACHINERY & EQUIPMENT	7			•				
3 IDP	31DP DISPLAY	22103		•	40,		, 04	40,	0
406SERVER	SOLFMENT MALLOMAN	0823086	SI	00.00	2,0/0.		319	3/0	
43200	EERE	10110			,745		74	4 4	00
*	990 PAGE 10 TOTAL MACHINERY &								
H F	EQUIPMENT FRANSPORTATION EQUIPMENT				39,985.		39,985.	39,985.	0
LO									
A R R DT.	(4) DELL OFTIFLES 3040 & OFFICE	2211			0		ç	(
455C(3	456(3) DELL OPTIPLEX 3020 COMPUTERS	15		5.00	1,801		8012	ω c	
457DE	i i	33115	SL		,57		,57	16	~
4580F	FURNITURE	93015			69		9	N	
* *	990 PAGE 10 TOTAL OTHER				5,877.		τυ r ∞ c	3,0	
BU	NGS				00'0		00'	, 00	, I.S
27FE	ENCING	91602		0.	, 68		, 68	1,328.	0
36FE	36FENCING	0429038	SI.	7.00	039		039	770	0
145FE	ENCING	03106		0.	, 42		,420	,404	
146FE		23106		0	,84		,848	848	
* :	H				66′		66′	,350	
3760R	MACHINEKY & EQUIPMENT ORTHOFLEX SADDLE	033107SL		5.00	1,800.		1,800.	1,800.	0

728103 04-01-17

- NEXT YEAR FEDERAL -

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	* 990 PAGE 10 TOTAL MACHINERY &								
	EQUIPMENT				1,800.		,800	,800	0
	* 990 PAGE 10 TOTAL -				, 79		964	9,150.	0
	BUILDINGS		Ī						
409	SUPPLIES	13008		0	,99		66'	, 44	, 55
419	419BUILDING SUPPLIES (MD)	0930098	SL	0	22,693.		22,693.	∞	2,269.
427	427FENCING (MD)	41510		0	,02		,02	,02	0
433	HORSE SHELTER (MD)	81711		0	,41		,41	,51	9
443	443STALL GATES AND WINDOWS	03113		0	,90		,90	,32	557.
452	_	22814		0	90	Ī	900	,13	S
	0				, 93		, 93	,15	ω
	* 990 PAGE 10 TOTAL			Ī	8,93		8,93	9,15	83
	INGS								
416	6HORSE SHELTER - JAMES RIVER	20108	Ī	0	69		69,	, 69	0
421	421FENCING - JAMES RIVER	43009		0	,33		,33	33	0
424	424HORSE SHELTER - JAMES RIVER	10509		0.	,35		,35	, 35	0
430	30FENCING - JAMES RIVER	93010		0	,72		,72	,725	
435	35FENCING - JAMES RIVER	0531118	SL	7.00	,02		,02	96	O
450	50BARN - JAMES RIVER	13014		0	11,519.		11,519.	,552	,152
	* 990 PAGE 10 TOTAL BUILDINGS				0,65		0,65	$^{\circ}$	214
	OTHER								
461	ROUNDPENS - JAMES RIVER	022815	SL	7.00	3,000.		3,000.	1,215.	429.
463	ST FOR POONDE FINS	93015		C	207		207	031	C
465	465TRACTOR - JAMES RIVER	043015	SI	5.00	3,208		3.208	1,712,	642.
	BOT								1
466	RIVER	51316		0.	90'		90,		\leftarrow
469	469FENCING - JAMES RIVER	063017	SL	7.00	,41		,414	172	345
470	4702015 JD 4044M TRACTOR - JAMES RIVER	21317		0	1,000		1,000	50	.20
	* 990 PAGE 10 TOTAL OTHER				,89		,895	,502	487
	闰				5,549		5,549	127	701
	BUILDINGS								
426	426FENCING (NE)	012510	SI	7.00	3,596.		3,596.	3,596.	00
					יטט		נטע	207	0.

^{*} ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL -

Amount Of Depreciation	3,341, 34,921, 34,921, 34,931, 34,931,
mulated sciation	3,596. 14,478. 22,157. 22,157. 1193226.
is For eciation	23,386. 12,900. 36,286. 1470595.
* Reduction In Basis	
justed Jr Basi	23,596. 23,386. 12,900. 36,286. 1470595.
Life	7.00
Method	ISE SE SE
Date Acquired	10
Description	* 990 PAGE 10 TOTAL - BUILDINGS 444FENCING (IL) * 990 PAGE 10 TOTAL BUILDINGS * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10 DEPR
Asset No.	444 644