Return of Organization Exempt From Income Tax

For the calendar year ending 2015

C Name of organization: THE PET PROFESSIONAL GUILD

D Employer identification number: 38-3900303

E Telephone number: (850) 625-1097

F Name and address of principal officer:

G Gross receipts: $463,208

H(e) Is this a group return for subordinates? Yes

H(f) Are all subordinates included? Yes

I Tax-exempt status: 501(c)(3) X 501(c)(6) ( )

J Website: N/A

K Form of organization: X Corporation

L Year of formation: 2013

M State of legal domicile: FL

Part I: Summary

1 Briefly describe the organization’s mission or most significant activities: Association for Force Free Pet Training, held events, webinars and other training resources available and expanded membership base.

Activities & Governance

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (c), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column A, lines 3, 4, and 7d)

11 Other revenue (Part VIII, column A, lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue — add lines 8 through 11 (must equal Part VIII, column A, line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column A, lines 1-3)

14 Benefits paid to or for members (Part IX, column A, line 4)

15 Salaries, other compensation, employee benefits (Part IX, column A, lines 5-10)

16a Professional fundraising fees (Part IX, column A, line 11e)

b Total fundraising expenses (Part IX, column D, line 25)

17 Other expenses (Part IX, column A, lines 11a-11d, 11f-24e)

18 Total expenses. Add lines 13-17 (must equal Part IX, column A, line 25)

19 Revenue less expenses. Subtract line 18 from line 12

Net Assets or End Balance

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Part II: Signature Block

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

Sign Here

Signature of officer: RICHARD INGRAM

Type or print name and title: VICE PRESIDENT

Date: 08/15/16

Print/Type preparer’s name: Tracy Lemon, CPA

Preparer’s signature: 08/15/16

Check if preparer is a sole proprietor or a partner

PTIN: P00341427

Phone no.: (352) 523-1040

Firm’s name: TRACY L LEMON, CPA

Firm’s address: 37751 MERIDIAN AVENUE

DADE CITY FL 33525

May the IRS discuss this return with the preparer shown above? (see instructions) Yes

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TLEA0101 10/12/15 Form 990 (2015)