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Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2008

Department of the Treasury

Open to Public Inspection

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3 ,	For the	2008 calendar year,	or tax year begin	ning		. 20	08. and endin	ıg			•
В	Check if	applicable	C Name of organiz	ation					D Employ	er Ident	ification Number
	Add	ress change IRS label	PRINCE ATH	ILETIC AS	SOCIAT	ION			23-0	988	760
	Nan	ne change or print or type.	Number and stre	et (or PO box if i	mail is not di	elivered to stree	t addr) Room/s	uite	E Telepho	ne num	ber
		See al return specific	600 SOUTH	RICHLAND	AVENI	IF.			(71	7) 8	48-1410
		Instruc- mination tions.	City, town or cou			Sta	ite ZIP code + 4			. , .	
	H		YORK	•		P	A 17404		G C		¢ 1 272 100
	=	ended return	•				H 1/404	H(a) Ic this	a group return		\$ 1,273,180.
	∐ Арр		and address of principa		- 1/051/		DR 17404	1 ''	affiliates incl		Illiates? Yes X No
_			SNYDER 600 S R			· -	PA 17404	, , ,	attach a list		structions)
<u></u>		exempt status X 501	I(c) (/)◀	(insert no.)	49	47(a)(1) or	527			_	
<u>J</u>		site: ► N/A	· · · · · · · · · · · · · · · ·	· -					exemption nu		
K		of organization X Corpora	ation Trust	Association	Other ►		L Year of Forma	tion 193	5 M/s	tate of I	legal domicile PA
Pa	rt l 💝										
	1 E	Briefly describe the org	janization's missi	on or most sig	gnificant a	ictivities.	SOCIAL_C	LUB FC	R BENE	FIT	OF MEMBERS
ø	_			<i></i>							
Activities & Governance	_						_ _		-		
er.	l _										
હુ		Check this box ►					posed of mor	e than 25	% of its as		110
-ಶ		lumber of voting mem	_			•	o 1h)				1
9	ľ	lumber of independen Total number of emplo	-	_	ing body	(Fait VI, IIII	e 10)				11
₹		otal number of volunt					•			-	0
Act		otal gross unrelated b			line 12	column (C)	•	•		7a	5,415.
		let unrelated business					• ••			7 b	4,415.
		tot amoiataa baamaaa	taxable intention		,	· · · · · ·			rior Year		Current Year
	8 0	Contributions and gran	te (Part VIII lina	16)				<u>_</u>	17,0	144	16,702.
Ð		Program service reven					• • • • • • •	·}	835,6		896,323.
Revenue		nvestment income (Pa						∵├──		45.	2,657.
æ	t .	Other revenue (Part VI				and 11a)			J, 1	57.	199,363.
		otal revenue – add lir					 line 12)	``	857,9		1,115,045.
		Grants and similar amo							03173	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1/113/013.
		Benefits paid to or for i				٠٠٠٠٠٠					
	15 S	cleries paid to or ior i	netion employee	honofito (Por	t IV ook		E E 1000 m	+	211,2	17	248,637.
8		Salaries, other comper					ENAMO.		211,2	· ± / •	240,037.
Expenses		Professional fundraisin			11 1			12 4	1 1		三百十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二
នឹ	ì	otal fundraising exper	8 1		~ f :]	学生的特殊的					
_	17 C	Other expenses (Part I	X, column (A), lır	nes 11a-11d, 1	11f-24f)	1100 ~	6 PAIA	cb	595,5	17.	604,236.
	18 T	otal expenses. Add lir	nes 13-17 (must e	equal Part IX,	column (<u> 0</u>	806,7	734.	852,873.
	19 F	Revenue less expenses	s. Subtract line 18	8 from line 12	<u> </u>		TU.ME	<u> </u>	51,2	201.	262,172.
5 g					مبتحثيا			Begi	nning of Y	ear	End of Year
Jan	20 T	otal assets (Part X, III	ne 16)						780,1		839,143.
Net Assets or Fund Balances		otal liabilities (Part X,							5	41.	556.
F	22 N	let assets or fund bala	nces Subtract lu	ne 21 from line	e 20				779,5	65.	838,587.
Pa	rt II				<u> </u>	·	·	·l	,	, , , ,	03070071
		 		vaminad this retur	n including	200000000000000	cheduler and sta	toments and	to the best o	of my kn	nowledge and helief it is
		Under penalties of perjury, true, correct, and complete	Declaration of prepar	er (other than office	cer) is based	on all informat	ion of which prep	arer has any	knowledge.	/ IIIy KII	iowieuge and belief, it is
Sig	ın	► LOWIN	(°)	M. D.				1	212	3/	10
He	re	Signature of officer		mycan		· · · · · · · · · · · · · · · · · · ·			ate J	~ '	,
	-	LARRY SNYD	r D	1					,	,	
		Type or print name and								_	
							Date	1.	heck if	Р	reparer's identifying number see instructions)
Pai	id			^	_			s	elf-	(s	see instructions)
Pre		Preparer's signature	11	Sth.	4	`	6-29-	/)G °	mployed P	니7	Pinazilia
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On		employed), \triangleright 51	S RICHLAND	AVE					IN ►		
		ZIP+4 YOR					404-3424	F	hone no	(71	
May	the IRS	S discuss this return v	with the preparer	shown above?	see ins	tructions)					X Yes No

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

Form 990 (2008)

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	1 930 (2008) PRINCE ATHLETIC ASSOCIATION	23-0988760	Page
Pai	tillis Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission:		
	SOCIAL CLUB FOR BENEFIT OF MEMBERS		
	.	-	
4			
2	Did the organization undertake any significant program services during the year which were not listed on	the prior	_
	Form 990 or 990-EZ?	🔲 `	res X No
	If 'Yes,' describe these new services on Schedule O.	_	_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program sen	uces?	Yes X No
•		//ccs	163 11
	If 'Yes,' describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	by expenses. Section	1 50 1 (C)(3) the total
	expenses, and revenue, if any, for each program service reported.	anocations to others	, the total
	· · · · · · · · · · · · · · · · · · ·		
4 a	(Code:) (Expenses \$ including grants of \$)	(Revenue \$	
	SOCIAL CLUB FOR BENEFIT OF MEMBERS		
		-	
41	(Code:) (Expenses \$ including grants of \$)	(Revenue \$	
7.		(Nevende 4	
			
			
	(O. I	(D	
4 C	(Code) (Expenses \$ including grants of \$)	(Revenue \$	
			. _ _ _
		- <i>-</i>	
			
			. _
	Other program services. (Describe in Schedule O.)		
→u		¢	`
<u>4e</u>	Total program service expenses ► \$ (Must equal Part IX, Line 25, column	(<i>D).)</i>	

Form 990 (2008) PRINCE ATHLETIC ASSOCIATION
Part IVES 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		x
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		x
9	Did the organization report an amount in Part X, line 21; 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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		х_
13	ls the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		_X_
14 a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		<u>X</u> _
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes</i> ,' <i>complete Schedule F, Part II</i>	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	<u> </u>	X
21	Did the organization report more than \$5,000 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 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		<u>x</u>
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		x
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		X
BAA		Forn	1 990	(2008)

Form 990 (2008) PRINCE ATHLETIC ASSOCIATION Partil Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			H
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively			
	with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		X
	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b	<u>.</u>	x
	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I .	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
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		х

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Form 990 (2008)

PRINCE ATHLETIC ASSOCIATION 23-0988760 Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. οŀ Information Returns. Enter -0- if not applicable O b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 11 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3 a X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b Х 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с Х 6a Did the organization solicit any contributions that were not tax deductible? .. 6a b if 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any guid pro guo contribution of more than \$75? 7 a Х **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? . . . 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7**f X g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 9a

a Did the organization make any taxable distributions under section 4966? ...

b Did the organization make any distribution to a donor, donor advisor, or related person? .

10 Section 501(c)(7) organizations. Enter:

a Initiation fees and capital contributions included on Part VIII, line 12

b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.

11 Section 501(c)(12) organizations. Enter:

a Gross income from other members or shareholders . . .

b Gross income from other sources (Do not net amounts due or paid to other sources against

amounts due or received from them.) . 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

11 a 11b 12a

16,702 2,701

10 a

10b

Form 990 (2008)

9b

Form 990 (2008) PRINCE ATHLETIC ASSOCIATION

Page 0

Part Visit Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

<u> </u>	Cuon A. Governing Body and Management			
`	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstance processes, or changes in Schedule O. See instructions.	es,	Yes	No
1	a Enter the number of voting members of the governing body	- 4		ş
	b Enter the number of voting members that are independent		** .	
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			1
_	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?	on . 3	х	ļ
4	Did the organization make any significant changes to its organizational documents	4		X
	since the prior Form 990 was filed?			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u> </u>
6	Does the organization have members or stockholders?	. 6	X	┼
7	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		a X	
	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7	<u>ь</u> х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	a The governing body?	8	a X	
	b Each committee with authority to act on behalf of the governing body?	. 8	b X	
9	a Does the organization have local chapters, branches, or affiliates?	. 9	а	X
	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates and branches to ensure their operations are consistent with those of the organization?	, g	ь	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	. 10	х	
11	Is there any officer, director or 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	11	-	X
	ction B. Policies			
			Yes	No
12	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12	а	X
	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12	b	
1	C Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12	С	
13	Does the organization have a written whistleblower policy?	13		X
14	Does 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:	- 2		
	a The organization's CEO, Executive Director, or top management official?	15	а	X
l	b Other officers of key employees of the organization?	15	b	X
	Describe the process in Schedule O. (see instructions)	*		A
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxa entity during the year?	bie 16	a	X
ı	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participat in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exemptatus with respect to such arrangements?	ot 💌		
Sec	status with respect to such arrangements?	16	וח	ь
	List the states with which a copy of this Form 900 is required to be filed >			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest statements available to the public.	policy, an	d finan	cıal
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	organizatio	on:	
	LARRY SNYDER 600 S. RICHLAND AVE PA 17404	-		1410
				(2008)
BAA		ror	יוכב וון	(ZUUG)

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 11 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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) or 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)	(c) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	Po and vict at trustee	ather peromphant	Officer	Former High est companied employee Key employee Officer			Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
THOMAS MARTIN										
PRESIDENT	0.00	Х		Х				0.	0.	0.
LARRY SNYDER										
TREASURER	8.00			Х				4,400.	0.	0.
BRYAN WILT DIRECTOR	0.00			Х				0.	0.	0.
LLOYD ENGMAN										
SECRETARY	0.00			Х				4,200.	0.	0.
DAVE SIMPSON										
DIRECTOR	0.00			X				0.	0.	0.
JEFF SCHAFFER										
V PRES	0.00			X	X			6,540.	0.	0.
BRIAN GEESEY										
DIRECTOR	0.00		Щ	X			_	0.	0.	0.
H A SHEELEY JR DIRECTOR	0.00			х				0.	0.	0.
STEVE BRICKNER		-								
DIRECTOR	0.00			X				0.	0.	0.
WILLIAM FEESER ASST TREASURER	0.00			х				7,632.	0.	0.
DAVID COVERSTONE						ŀ				
EMPLOYEE	40.00		Щ		L	Х		48,580.	0.	0.
										-

(A)	(B) Average	Boss	han (obook		hat a	nnlu)	(D)	(E)	(F)
Name and Title	hours per week			Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation related organizatio (W-2/1099-MISC	Estimated amount of other compensation from the organization and related organizations
									·	
			·							
									-	
1 b Total							•	71,352.	·	0.
2 Total number of individuals (including those in 1a) whorganization ►	no receiv	ved i	mor	e tha	an \$	100	,000) in reportable con	npensation from	Yes N
 3 Did the organization list any former officer, director of on line 1a? If 'Yes,' complete Schedule J for such and For any individual listed on line 1a, is the sum of report the organization and related organizations greater that individual 5 Did any person listed on line 1a receive or accrue con rendered to the organization? If 'Yes,' complete Schedule J for such as the sum of the properties of the organization? If 'Yes,' complete Schedule J for such as the properties of the organization? 	lividual ortable d an \$150 mpensa	comj ,000	pens ? If	satio 'Yes	on an	nd o mpl	ther ete	compensation from Schedule J for succession for some	om ch 	4
Section B. Independent Contractors 1 Complete this table for your five highest compensated	d indepe	ende	nt c	ontr	acto	rs th	hat r	received more tha	n \$100,000 of	
compensation from the organization. (A)					-			(B))	(C)
Name and business address	·				-			Description of	of Services	Compensation
									-	5

Ka	N.A.	III Statement of Revenue	е					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	d d e f	Federated campaigns	1b 1c 1d 1e	16,702.	16,702.			
PROGRAM SERVICE REVENUE	d d	SALE OF BEER & FOOL		Business Code 722211	896,323.	896,323.	0.	0.
Š		Total. Add lines 2a-2f	_	•	896,323.			
		Investment income (including dother similar amounts) Income from investment of tax-Royalties	ıvıdends,	interest and	2,657.	0.	2,657.	0.
	6a b	Gross Rents	Real 2,701.					
	7a	assets other than inventory	ecurities	(ii) Other	2,701.	0.	2,701.	0.
	С	Less: cost or other basis and sales expenses		>				
OTHER REVENUE	b	Gross income from fundraising (not including \$	1c). a					
	9a	Gross income from gaming acti See Part IV, line 19	•	354,740.				
		Net income or (loss) from gamil			196,605.	196,605.	0	0
	10a	Gross sales of inventory, less reand allowances	eturns					
		Net income or (loss) from sales	_	·——	394 10 34 - 3 2 2 3 3 4 5 1		(728 -1 . 3 to 11-1)	135 4 2149 133
		Miscellaneous Revenue	3. IIIVEII	Business Code				
	11 a b	SALES TAX DISCOUNT		999999	57.	0.	57.	0.
	d	All other revenue						
	е	Total. Add lines 11a-11d			57.	Print di		121247632
	12	Total Revenue. Add lines 1h, 2g 10c, and 11e	3, 3, 4, 5 ··	, 6d, 7d, 8c, 9c,	1,115,045.	1,092,928.	5,415.	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must com				T
Do 6b,	not include amounts reported on lines 7b, 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 governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	71,352.		71,352.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	152,274.	152,274.		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,419.		5,419.	
9	Other employee benefits				
10	Payroll taxes	19,592.		19,592.	
11	Fees for services (non-employees)				
á	Management				
ŀ	Legal				
(Accounting	4,074.		4,074.	
(l Lobbying	-			
	Prof fundraising svcs. See Part IV, In 17		Awaya walan sa It	We desired the second	
f	Investment management fees				
g	Other				
12	Advertising and promotion			500.	
13	Office expenses	3,423.		3,423.	
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Travel	3,922.	-	3,922.	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	26,057.		26,057.	
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	PURCHASES COGS	421,463.	421,463.	0.	
	BANK FEES	956.		956.	
	DONATIONS	15,864.		15,864.	
	INSURANCE	58,680.		58,680.	
	REAL ESTATE TAXES	10,526.		10,526.	
	All other expenses	58,771.		58,771.	
	Total functional expenses. Add lines 1 through 24f	852,873.	573,737.	279,136.	
	Joint Costs. Check here ► If following				
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2008)

		,	(A) Beginning of year		(B) End of	year	
	1	Cash – non-interest-bearing	98,353.	1	10	5,3	56.
	2	Savings and temporary cash investments	161,499.	2		1,4	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5			
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))	at the second second		4,17		
		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .		6	·		
ASSETS	7	Notes and loans receivable, net		7	- <u>-</u>		
Ē	8	Inventories for sale or use	6,010.	8		6,0	10.
Ś	9	Prepaid expenses and deferred charges		9		4	<u>25.</u>
	10 a	Land, buildings, and equipment: cost basis . 10a 733,770.			4		
	b	Less: accumulated depreciation. Complete Part VI of		" <u>.</u>			Ī
		Schedule D	514,244.	10 c	56	5,8	<u>59.</u>
	11	Investments — publicly-traded securities		11			
	12	Investments – other securities. See Part IV, line 11		12	_		
	13	Investments – program-related See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets Add lines 1 through 15 (must equal line 34)	780,106.	16	83	<u>9,1</u>	
	17	Accounts payable and accrued expenses	541.	17			<u>56.</u>
	18	Grants payable		18			
L	19	Deferred revenue		19			
L	20	Tax-exempt bond liabilities		20			
A B I	21 22	Escrow account liability. Complete Part IV of Schedule D		21		8 7 8	
	2.2	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			a de la lace		
Ť		of Schedule L		22			
E	23	Secured mortgages and notes payable to unrelated third parties		23			
	24	Unsecured notes and loans payable	0.	24			
	25	Other liabilities. Complete Part X of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25	<u>541.</u>	26		5	56.
N E T		Organizations that follow SFAS 117, check here ► and complete lines					
Ť		27 through 29 and lines 33 and 34.		1	一種一樣。金		14億
ASSET	27	Unrestricted net assets		27			
	28	Temporarily restricted net assets		28			
S	29	Permanently restricted net assets		29			#2 V.
R		Organizations that do not follow SFAS 117, check here ► X and complete					24.65
FUZD		lines 30 through 34.	· 別·林》(称 · 達:為)			h . Ē	: j=%
	30	Capital stock or trust principal, or current funds		30			
Ŗ	31	Paid-in or capital surplus, or land, building, and equipment fund .	770 565	31	0.0	0 5	
Ñ	32	Retained earnings, endowment, accumulated income, or other funds	779,565.	32		8,5	
BALAZCES	33	Total net assets or fund balances	779,565.	33 34		8,5	
	34 nt XI	Total liabilities and net assets/fund balances. Financial Statements and Reporting	780,106.	34	63	9,1	45.
F(a	iin van	Financial Statements and Reporting				Yes	No
1	Δαα	ounting method used to prepare the Form 990: X Cash Accrual	Other			163	NO.
		re the organization's financial statements compiled or reviewed by an independent ac			2a	Х	يتسم
		re the organization's financial statements audited by an independent accountant?.	555 37 No. 16 1		2b		х
	c If 'Y	es' to 2a or 2b, does the organization have a committee that assumes responsibility	for oversight of the aud	ht.	-=-		
	revi	ew, or compilation of its financial statements and selection of an independent accou	ntant?		<u>2c</u> _	Х	
3		a result of a federal award, was the organization required to undergo an audit or aud	its as set forth in the Si	ngle	20		v
		lit Act and OMB Circular A-133? 'es,' did the organization undergo the required audit or audits?			3a 3b	_	X
2 1 /		es, and the organization undergo the required addit of addits:		•	Form	990 (°	2008

SCHEDULE D (Form 990)

Départment of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

OMB No 1545-0047 2008

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Employer Identification number

PR	INCE ATHLETIC ASSOCIATION		23-0988760						
Pa	rt I Organizations Maintaining Donor	Advised Funds or Other Similar Fun	ds or Accounts Complete if						
	the organization answered 'Yes' to	Form 990, Part IV, line 6.							
		(a) Donor advised funds	(b) Funds and other accounts						
1	Total number at end of year								
2	Aggregate contributions to (during year) .								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and dono funds are the organization's property, subject to	or advisors in writing that the assets held in don	nor advised						
6									
Pä	til Conservation Easements Comple	te if the organization answered 'Ves'							
			to Form 990, Part IV, line 7.						
•	Purpose(s) of conservation easements held by Preservation of land for public use (e.g., re		of an involvement to a disconstitution of the second						
			of an historically important land area						
	Protection of natural habitat Preservation of open space	Preservation o	of certified historic structure						
2			-f						
2	Complete lines 2a-2d if the organization held a of the tax year.	qualified conservation contribution in the form of	le al						
	Total number of conservation easements		Held at the End of the Year 2a						
	Total acreage restricted by conservation easem		2b						
	Number of conservation easements on a certified		2c						
			2d						
	Number of conservation easements included in	• •							
3	Number of conservation easements modified, tr year ►	ansterred, released, extinguished, or terminate	d by the organization during the taxable						
4	Number of states where property subject to con	servation easement is located >	_						
5	Does the organization have a written policy regard enforcement of the conservation easement it has	arding the periodic monitoring, inspection, viola	itions, and						
6	Staff or volunteer hours devoted to monitoring,	inspecting, and enforcing easements during the	e year ►						
7	Amount of expenses incurred in monitoring, ins	pecting, and enforcing easements during the ye	ear ► \$						
8	Does each conservation easement reported on $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	line 2(d) above satisfy the requirements of sect	Yes 🕒 No						
9	In Part XIV, describe how the organization repoinclude, if applicable, the text of the footnote to conservation easements.	the organization's financial statements that des	scribes the organization's accounting for						
Păi	d III Organizations Maintaining Collection Complete if the organization answ	ctions of Art, Historical Treasures, or vered 'Yes' to Form 990, Part IV, line	Other Similar Assets 8.						
1 a	If the organization elected, as permitted under streasures, or other similar assets held for public the text of the footnote to its financial statement	: exhibition, education, or research in furtheran	nt and balance sheet works of art, historical ce of public service, provide, in Part XIV,						
ŀ	If the organization elected, as permitted under Streasures, or other similar assets held for public amounts relating to these items:	exhibition, education, or research in furtheran	ce of public service, provide the following						
	(i) Revenues included in Form 990, Part VIII, In	ne 1							
	(ii) Assets included in Form 990, Part X		▶\$						
2	If the organization received or held works of art, amounts required to be reported under SFAS 11	historical treasures, or other similar assets for	r financial gain, provide the following						
a	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X .		▶\$						
t	Assets included in Form 990, Part X .		, ▶\$						

Schedule D (Form 990) 2008 PRING				23-098 r Other Similar Ass		Page 2 ued)
3 Using the organization's accessio	n and other r	ecords, check any of the	e following that are a sig	inificant use of its collec	tion items (che	ck all
that apply): a Public exhibition		d 🗆 Loop	or exchange programs			
b Scholarly research		e Other				
c Preservation for future genera	ations	e 🗀 Other				
4 Provide a description of the organ		ections and explain how	they further the organiz	ration's exempt numose	· in	
Part XIV.	1120110113 0011	cettoris and explain now	aley further the organiz	duon's exempt purpose		
5 During the year, did the organizal assets to be sold to raise funds ra					Yes	No
Partive Trust, Escrow and Cu IV, line 9, or reported	stodial Ar	rangements Comp	lete if organization	answered 'Yes' to	Form 990, P	'art
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodiar	n, or other intermediary	for contributions or other	r assets not	☐ Yes [No
b If 'Yes,' explain the arrangement				• • • • • • • • • • • • • • • • • • • •	Lies [NO
bit ies, explain the arrangement	IIII ait Aiv ai	nd complete the lollowin	ig table.		Amount	
c Beginning balance				1c	7 WHOCH	
d Additions during the year				1 d		
e Distributions during the year	· · · · ·			. 1e		
f Ending balance				1f		
2a Did the organization include an ai	nount on For				Yes	No
b If 'Yes,' explain the arrangement		,			٠ ١	
Part V Endowment Funds Co		rganization answer	ed 'Yes' to Form 9	90, Part IV, line 10		
	(a) Current	- 			_	ırs back
1 a Beginning of year balance	·····	in the second				
b Contributions						
c Investment earnings or losses.						
d Grants or scholarships	•				i dan mar	
e Other expenditures for facilities and programs						
f Administrative expenses				27		n gi
g End of year balance		1				
2 Provide the estimated percentage	of the year e	end balance held as:				
a Board designated or quasi-endow	-	*				
b Permanent endowment ►		<u> </u>				
c Term endowment ►						
3a Are there endowment funds not in organization by:	the possess	ion of the organization t	that are held and admin	stered for the	Yes	No
unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	1
b If 'Yes' to 3a(II), are the related of					3b	\top
4 Describe in Part XIV the intended	-			· · · ·	·	·
PartiVII Investments-Land, B				, line 10.		
Description of investment		(a) Cost or other basis (investment)		(c) Depreciation	(d) Book V	/alue
				7197		

75,000. 75,000. 1 a Land 66,294. 405,562. 339,268. **b** Buildings . c Leasehold improvements 46,395. 2,320. 44,075. 206,813. 99,297. 107,516. **d** Equipment . Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c)) 565,859.

BAA

Schedule **D** (Form 990) 2008

Part VII Investments—Other Securities See F	orm 990, Part X, line	e 12.	, 0,000,000 1 age 5
(a) Description of security or category (including name of security)	(b) Book value	(c) Method o Cost or end-of-ye	f valuation
Financial derivatives and other financial products		Cost or end-of-ye	ar market value
Closely-held equity interests			
Other			
		-	
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.) ▶		a mandan un communication de la faction de l	
PartiVIII Investments-Program Related (See	Form 990, Part X, Iir	ne 13)	
(a) Description of investment type	(b) Book value	(c) Method of	f valuation
	 	Cost or end-of-ye	ar market value
			
		 	
Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13)			
RantilX Other Assets (See Form 990, Part X,	line 15)		
(a) D	escription		(b) Book value
			
		······································	
Total Calumn (b) Total (about description of France 2000 Part V and	((T)) ((m = 15)		
			. ▶
Total. Column (b) Total (should equal Form 990, Part X, col	Y line 25)	··· · · · · · · · · · · · · · · · · ·	
PartX Other Liabilities (See Form 990, Part	X, line 25)	•	
Part X Other Liabilities (See Form 990, Part X, co. (a) Description of Liability Federal Income Taxes	X, line 25) (b) Amount		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)		
Part X Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)		

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

	dule D (Form 990) 2008 PRINCE ATHLETIC ASSOCIATION	23-0988760	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to F	inancial Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)		
٠3	Excess or (deficit) for the year. Subtract line 2 from line 1		
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4-8		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		
Pai	t XII Reconciliation of Revenue per Audited Financial Statement	ts With Revenue per Return	
	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
ā	Net unrealized gains on investments	2a	
Ŀ	Donated services and use of facilities	2b	
	Recoveries of prior year grants	2c	
	Other (Describe in Part XIV)	2d	
	Add to a Gottlera of Ot	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		· · · · · · · ·
а	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
	Other (Describe in Part XIV)		
c	Add lines 4a and 4b		
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	
Par	EXIII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses per Return	
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
а	Donated services and use of facilities	2a a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
	Other (Describe in Part XIV)	2d	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
	Add lines 4a and 4b	4c	
	Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	5	
Par	XIV Supplemental Information		
Compline 4	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part; Part X; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	III, lines 1a and 4; Part IV, lines 1b and 2b; F	
			- .
		· · = = - 	