



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



**Return of Organization Exempt From Income Tax**

**2008**

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

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2008 calendar year, or tax year beginning 10/1, 2008, and ending 9/30, 20 09

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Termination  
 Amended return  
 Application pending

**C** Name of organization National Association of Basketball Coaches  
 Doing Business As \_\_\_\_\_  
 Number and street (or P O box if mail is not delivered to street address) Room/suite  
1111 Main Street 1000  
 City or town, state or country, and ZIP + 4  
Kansas City, MO 64105

**D** Employer identification number  
31 : 1626159

**E** Telephone number  
 ( 816 ) 878-6222

**G** Gross receipts \$ 4,527,066

**F** Name and address of principal officer Jim Haney  
Same as C above

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶ \_\_\_\_\_

**I** Tax-exempt status:  501(c) ( 6 ) ◀ (insert no)  4947(a)(1) or  527

**J** Website: ▶ www.nabc.com

**K** Type of organization  Corporation  Trust  Association  Other ▶ \_\_\_\_\_

**L** Year of formation: 1994 **M** State of legal domicile: KS

**Part I Summary**

<b>1</b> Briefly describe the organization's mission or most significant activities: <u>STMT 1</u>			
<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.			
<b>Activities &amp; Governance</b>	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<u>3</u>	<u>21</u>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<u>4</u>	<u>21</u>
	<b>5</b> Total number of employees (Part V, line 2a) . . . . .	<u>5</u>	<u>15</u>
	<b>6</b> Total number of volunteers (estimate if necessary) . . . . .	<u>6</u>	<u>16</u>
	<b>7a</b> Total gross unrelated business revenue from Part VIII, line 12, column (C) . . . . .	<u>7a</u>	<u>24,997</u>
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34. . . . .	<u>7b</u>	<u>(66,302)</u>
			<b>Prior Year</b>
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	<u>3,750,113</u>	<u>2,634,914</u>
	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	<u>1,439,828</u>	<u>1,806,719</u>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	<u>81,275</u>	<u>55,557</u>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	<u>28,464</u>	<u>29,876</u>
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	<u>5,299,680</u>	<u>4,527,066</u>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .	<u>452,817</u>	
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) . . . . .	<u>1,532,120</u>	<u>1,439,607</u>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	<u>393,540</u>	
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ . . . . .		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) . . . . .	<u>2,613,914</u>	<u>2,608,767</u>	
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25). . . . .	<u>4,992,391</u>	<u>4,048,374</u>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 . . . . .	<u>307,289</u>	<u>478,692</u>	
<b>Net Assets or Fund Balances</b>			<b>Beginning of Year</b>
	<b>20</b> Total assets (Part X, line 16) . . . . .	<u>2,340,097</u>	<u>2,815,870</u>
	<b>21</b> Total liabilities (Part X, line 26) . . . . .	<u>3,238</u>	<u>319</u>
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 . . . . .	<u>2,336,859</u>	<u>2,815,551</u>	

**Part II Signature Block**

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

**Sign Here** ▶ Jim Haney Signature of officer Date 5/11/10  
Executive Director Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature ▶ \_\_\_\_\_ Date \_\_\_\_\_ Check if self-employed  Preparer's identifying number (see instructions) \_\_\_\_\_  
 Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ \_\_\_\_\_ EIN ▶ \_\_\_\_\_  
 Phone no ▶ ( ) \_\_\_\_\_

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

401  
 RECEIVED  
 MAY 20 2010  
 OGDH  
 SCANNED JUL 15 2010

20912

**Part III Statement of Program Service Accomplishments** (see instructions)

1 Briefly describe the organization's mission  
**STMT 1**

.....  
.....  
.....

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  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 services?  Yes  No  
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 (Code: ..... ) (Expenses \$ ..... including grants of \$ ..... 0 ) (Revenue \$ ..... )

**Annual conference/meetings:**

**All meetings are held to determine the direction of collegiate basketball. The annual conference is provided for the members to attend seminars related to education, drug abuse, changing rules, coaching techniques, equipment improvements, player problems and health education.**

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

4b (Code ..... ) (Expenses \$ ..... including grants of \$ ..... ) (Revenue \$ ..... )

**NABC Publications:**

**All members receive a publication which provides technical articles, latest rule interpretations, progress in academics, ethics, education and unification to enhance basketball.**

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

4c (Code ..... ) (Expenses \$ ..... including grants of \$ ..... ) (Revenue \$ ..... )

**All Star Basketball Game:**

**The Game provides coaches at the annual conference an opportunity to see collegiate players who represent the highest traditions of intercollegiate competition both on and off the court.**

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

4d Other program services. (Describe in Schedule O.)  
(Expenses \$ ..... including grants of \$ ..... ) (Revenue \$ ..... )

4e Total program service expenses ► \$ ..... (Must equal Part IX, Line 25, column (B).)

**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 . . . . .		✓
2 Is the organization required to complete Schedule B, Schedule of Contributors? . . . . .	✓	
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 . . . . .		✓
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .		N/A
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III . . . . .	✓	
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 . . . . .		✓
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 . . . . .		✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .		✓
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 . . . . .		✓
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .		✓
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable . . . . .	✓	
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 . . . . .		✓
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .		✓
14a Did the organization maintain an office, employees, or agents outside of the U.S.? . . . . .		✓
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 . . . . .		✓
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? If "Yes," complete Schedule F, Part II . . . . .		✓
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 . . . . .		✓
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I . . . . .		✓
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .		✓
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .		✓
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .		✓
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 . . . . .		✓
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 . . . . .		✓
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J . . . . .	✓	
24a 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 questions 24b-24d and complete Schedule K. If "No," go to question 25. . . . .		✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		✓
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? . . . . .		✓
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		✓
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .		N/A
b 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 . . . . .		N/A
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 . . . . .		✓
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 . . . . .		✓

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>28</b> During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
<b>a</b> 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)? <i>If "Yes," complete Schedule L, Part IV</i>		✓
<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	✓	
<b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i>		✓
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	✓	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		✓
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		✓
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		✓
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		✓
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		✓
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	N/A	
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i>		✓

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No		
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable . . . . .	1a	41		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b	0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	N/A		
<b>2a</b>	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	15		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2b	✓		
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	3a	✓		
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b	✓		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	4a		✓	
<b>b</b>	If "Yes," enter the name of the foreign country: ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a		✓	
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	5b		✓	
<b>c</b>	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .	5c	N/A		
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible? . . . . .	6a		✓	
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b	N/A		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? . . . . .	7a	N/A		
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7b	N/A		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7c	N/A		
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d	N/A		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e	N/A		
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7f	N/A		
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7g	N/A		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	7h	N/A		
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8	N/A		
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b>	Did the organization make any taxable distributions under section 4966? . . . . .	9a	N/A		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	9b	N/A		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter.				
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a	N/A		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	10b	N/A		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:				
<b>a</b>	Gross income from members or shareholders . . . . .	11a	N/A		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	11b	N/A		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a	N/A		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b	N/A		

**Part VI 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**

		Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
<b>1a</b>	Enter the number of voting members of the governing body . . . . .	<b>1a</b>	<b>21</b>
<b>b</b>	Enter the number of voting members that are independent . . . . .	<b>1b</b>	<b>21</b>
<b>2</b>	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? . . . . .	<b>2</b>	✓
<b>3</b>	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? . . . . .	<b>3</b>	✓
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .	<b>4</b>	✓
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .	<b>5</b>	✓
<b>6</b>	Does the organization have members or stockholders? . . . . .	<b>6</b>	✓
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>	✓
<b>b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	<b>7b</b>	✓
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. . . . .		
<b>a</b>	The governing body? . . . . .	<b>8a</b>	✓
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	✓
<b>9a</b>	Does the organization have local chapters, branches, or affiliates? . . . . .	<b>9a</b>	✓
<b>b</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? . . . . .	<b>9b</b>	N/A
<b>10</b>	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 . . . . .	<b>10</b>	✓
<b>11</b>	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 . . . . .	<b>11</b>	✓

**Section B. Policies**

		Yes	No
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b>	✓
<b>b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	✓
<b>c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<b>12c</b>	✓
<b>13</b>	Does the organization have a written whistleblower policy? . . . . .	<b>13</b>	✓
<b>14</b>	Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b>	✓
<b>15</b>	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. . . . .		
<b>a</b>	The organization's CEO, Executive Director, or top management official? . . . . .	<b>15a</b>	✓
<b>b</b>	Other officers or key employees of the organization? . . . . .	<b>15b</b>	✓
Describe the process in Schedule O (see instructions)			
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>	✓
<b>b</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	<b>16b</b>	N/A

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ► N/A
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Stephanie Whitcher, 1111 Main Street, Suite 1000, Kansas City, MO 64105, 816-878-6222

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

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

1a 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) 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.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Page Moir Board Member	2	✓					0	0	0	
Ron Hunter Board Member	2	✓					0	0	0	
Jeff Jones Board Member	2	✓					0	0	0	
Bill Self Board Member	2	✓					0	0	0	
Paul Hewitt Board Member	2	✓					0	0	0	
Bo Ryan Board Member	2	✓					0	0	0	
Charlie Brock Board Member	2	✓					0	0	0	
Gary Stewart Board Member	2	✓					0	0	0	
Lorenzo Romar Board Member	2	✓					0	0	0	
Mike Brey Board Member	2	✓					0	0	0	
Tim Carter Board Member	2	✓					0	0	0	
Jeff Capel Board Member	2	✓					0	0	0	
Trent Johnson Board Member	2	✓					0	0	0	
Gary Williams Board Member	2	✓					0	0	0	
Jim Boeheim Past-President	2	✓					0	0	0	
Tubby Smith Past-President	2	✓					0	0	0	
Dale Clayton President	2	✓		✓			3,000	0	0	



**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Tom Izzo 1st Vice-President	2	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
Ernie Kent 2nd Vice-President	2	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
Larry Gipson 3rd Vice-President	2	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
Phil Martelli 4th Vice-President	2	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
Brian Welch Treasurer	3			<input checked="" type="checkbox"/>				0	0	0
Jim Haney Executive Director	40			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			477,450	0	0
Reggie Minton Deputy Director	40				<input checked="" type="checkbox"/>			184,537	0	0
<b>1b Total</b>								<b>661,987</b>	<b>0</b>	<b>0</b>

**2** Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization **▶ 2**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		<input checked="" type="checkbox"/>
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i>	<input checked="" type="checkbox"/>	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		<input checked="" type="checkbox"/>

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
Fishbait Marketing, LLC, Madmalaw Island, South Carolina	Marketing	462,013
Highline Sports & Entertainment, Inc., Vail, Colorado	Producer of Award Show	131,112

**2** Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization **▶ 2**

<b>Part VIII Statement of Revenue</b>				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>						
	<b>b</b> Membership dues . . . . .	<b>1b</b>						
	<b>c</b> Fundraising events . . . . .	<b>1c</b>						
	<b>d</b> Related organizations . . . . .	<b>1d</b>						
	<b>e</b> Government grants (contributions)	<b>1e</b>						
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	<b>2,634,914</b>					
	<b>g</b> Noncash contributions included in lines 1a-1f. \$		<b>104,600</b>					
	<b>h Total.</b> Add lines 1a-1f . . . . . ▶		<b>2,634,914</b>					
<b>Program Service Revenue</b>			<b>Business Code</b>					
	<b>2a Publications</b> . . . . .		<b>519100</b>	<b>21,485</b>		<b>21,485</b>		
	<b>b Merchandise</b> . . . . .		<b>453000</b>	<b>3,512</b>		<b>3,512</b>		
	<b>c Convention</b> . . . . .		<b>900099</b>	<b>1,259,957</b>			<b>1,259,957</b>	
	<b>d CBE Classic</b> . . . . .		<b>900099</b>	<b>35,880</b>	<b>35,880</b>			
	<b>e Membership dues</b> . . . . .		<b>900099</b>	<b>485,885</b>	<b>485,885</b>			
	<b>f</b> All other program service revenue . . . . .							
	<b>g Total.</b> Add lines 2a-2f . . . . . ▶			<b>1,806,719</b>				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . . ▶			<b>55,557</b>			<b>55,557</b>	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . . ▶							
	<b>5</b> Royalties . . . . . ▶			<b>28,638</b>			<b>28,638</b>	
	<b>6a</b> Gross Rents . . . . .	(i) Real	(ii) Personal					
		<b>b</b> Less: rental expenses . . . . .						
		<b>c</b> Rental income or (loss) . . . . .						
		<b>d</b> Net rental income or (loss) . . . . . ▶						
	<b>7a</b> Gross amount from sales of assets other than inventory . . . . .	(i) Securities	(ii) Other					
		<b>b</b> Less cost or other basis and sales expenses . . . . .						
		<b>c</b> Gain or (loss) . . . . .						
		<b>d</b> Net gain or (loss) . . . . . ▶						
	<b>8a</b> Gross income from fundraising events (not including \$ . . . . . of contributions reported on line 1c). See Part IV, line 18 . . . . . <b>a</b>							
		<b>b</b> Less direct expenses . . . . . <b>b</b>						
		<b>c</b> Net income or (loss) from fundraising events . . . . . ▶						
	<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . . <b>a</b>							
		<b>b</b> Less: direct expenses . . . . . <b>b</b>						
		<b>c</b> Net income or (loss) from gaming activities . . . . . ▶						
	<b>10a</b> Gross sales of inventory, less returns and allowances . . . . . <b>a</b>							
<b>b</b> Less: cost of goods sold . . . . . <b>b</b>								
<b>c</b> Net income or (loss) from sales of inventory . . . . . ▶								
Miscellaneous Revenue		<b>Business Code</b>						
<b>11a Other</b> . . . . .		<b>900099</b>	<b>1,238</b>	<b>1,238</b>				
<b>b</b> . . . . .								
<b>c</b> . . . . .								
<b>d</b> All other revenue . . . . .								
<b>e Total.</b> Add lines 11a-11d . . . . . ▶			<b>1,238</b>					
<b>12 Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . . ▶			<b>4,527,066</b>	<b>523,003</b>	<b>24,997</b>	<b>1,344,152</b>		

**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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>		(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	661,987			
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	442,490			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	93,727			
9	Other employee benefits	94,345			
10	Payroll taxes	61,431			
11	Fees for services (non-employees).				
a	Management				
b	Legal	87,143			
c	Accounting	19,689			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	71,636			
13	Office expenses	24,024			
14	Information technology				
15	Royalties				
16	Occupancy	83,254			
17	Travel	43,057			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,019,182			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	17,905			
23	Insurance	13,465			
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)				
a	All-Star Game	54,942			
b	All-American Team	37,484			
c	Publications	52,222			
d	Telephone	31,960			
e	Repairs and maintenance	26,645			
f	All other expenses <b>Miscellaneous STMT 2</b>	111,786			
25	<b>Total functional expenses.</b> Add lines 1 through 24f	4,048,374			
26	<b>Joint Costs.</b> Check here <input type="checkbox"/> 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				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
Assets	<b>1</b> Cash—non-interest-bearing . . . . .	87,103	<b>1</b>	194,539	
	<b>2</b> Savings and temporary cash investments . . . . .	2,194,545	<b>2</b>	2,561,202	
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>		
	<b>4</b> Accounts receivable, net . . . . .		<b>4</b>		
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L . . . . .		<b>5</b>		
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		<b>6</b>		
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>		
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>		
	<b>9</b> Prepaid expenses and deferred charges . . . . .		<b>9</b>	5,000	
	<b>10a</b> Land, buildings, and equipment: cost basis <b>10a</b> . . . . .	184,613			
	<b>b</b> Less: accumulated depreciation. Complete Part VI of Schedule D <b>10b</b> . . . . .	137,424	58,449	<b>10c</b>	47,189
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>		
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>		
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>		
	<b>14</b> Intangible assets . . . . .		<b>14</b>		
	<b>15</b> Other assets. See Part IV, line 11 . . . . .		<b>15</b>	7,940	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		2,340,097	<b>16</b>	2,815,870	
Liabilities	<b>17</b> Accounts payable and accrued expenses . . . . .	3,238	<b>17</b>	319	
	<b>18</b> Grants payable . . . . .		<b>18</b>		
	<b>19</b> Deferred revenue . . . . .		<b>19</b>		
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>		
	<b>21</b> Escrow account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>		
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>		
	<b>24</b> Unsecured notes and loans payable . . . . .		<b>24</b>		
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .		<b>25</b>		
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .		3,238	<b>26</b>	319
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets . . . . .	2,336,859	<b>27</b>	2,815,551	
	<b>28</b> Temporarily restricted net assets . . . . .		<b>28</b>		
	<b>29</b> Permanently restricted net assets . . . . .		<b>29</b>		
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>		
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>		
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>		
<b>33</b> <b>Total net assets or fund balances</b> . . . . .	2,336,859	<b>33</b>	2,815,551		
<b>34</b> <b>Total liabilities and net assets/fund balances</b> . . . . .		2,340,097	<b>34</b>	2,815,870	

**Part XI Financial Statements and Reporting**

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .	✓	
<b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . .		✓
<b>c</b> If "Yes" to lines 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? . . . . .	N/A	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	N/A	
<b>b</b> If "Yes," did the organization undergo the required audit or audits? . . . . .	N/A	

**Political Campaign and Lobbying Activities**

**2008**

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**

▶ **To be completed by organizations described below.**  
▶ **Attach to Form 990 or Form 990-EZ.**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

- If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then**
- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
  - Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
  - Section 527 organizations Complete Part I-A only

- If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
  - Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

- If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then**
- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization	Employer identification number
<b>National Association of Basketball Coaches</b>	<b>31 1626159</b>

**Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.**  
See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures . . . . . ▶ \$ \_\_\_\_\_
- 3 Volunteer hours . . . . . ▶ \_\_\_\_\_

**Part I-B To be completed by all organizations exempt under section 501(c)(3).**  
See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a Was a correction made? . . . . .  Yes  No
- b If "Yes," describe in Part IV

**Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).**  
See the instructions for Schedule C for details.

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b . . . . . ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

**Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

- A** Check  if the filing organization belongs to an affiliated group.  
**B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .														
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) . . . . .														
<b>d</b>	Other exempt purpose expenditures . . . . .														
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .														
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .														
<b>h</b>	Subtract line 1g from line 1a. Enter -0- if line g is more than line a . . . . .														
<b>i</b>	Subtract line 1f from line 1c. Enter -0- if line f is more than line c . . . . .														
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
<b>2a</b> Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots non-taxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
<b>i</b> Other activities? If "Yes," describe in Part IV			
<b>j</b> Total lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** See the instructions for Schedule C for details

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes."** See Schedule C instructions for details.

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):		
<b>a</b> Current year	<b>2a</b>	
<b>b</b> Carryover from last year	<b>2b</b>	
<b>c</b> Total	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	<b>5</b>	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

**Part IV** Supplemental Information *(continued)*

Lined area for supplemental information with horizontal dashed lines.



SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

National Association of Basketball Coaches

31 1626159

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Year. Rows include: 1 Purpose(s) of conservation easements held by the organization, 2 Complete lines 2a-2d if the organization held a qualified conservation contribution, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated during the taxable year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No, 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year \$, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No, 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items, 1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in 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, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 \$, b Assets included in Form 990, Part X \$.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3** Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other .....
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Trust, Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV and complete the following table:
- |   | Amount |
|---|--------|
| <b>1c</b> Beginning balance             |        |
| <b>1d</b> Additions during the year     |        |
| <b>1e</b> Distributions during the year |        |
| <b>1f</b> Ending balance                |        |
- 2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance					
<b>b</b> Contributions					
<b>c</b> Investment earnings or losses					
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> End of year balance					

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment ▶ .....%
  - b** Permanent endowment ▶ .....%
  - c** Term endowment ▶ .....%

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
  - (ii)** related organizations
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

**4** Describe in Part XIV the intended uses of the organization's endowment funds

**Part VI Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		<b>184,613</b>	<b>137,424</b>	<b>47,189</b>
<b>e</b> Other				
<b>Total.</b> Add lines 1a–1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				<b>47,189</b>

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products . . . . .		
Closely-held equity interests . . . . .		
Other .....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 12.) ▶		

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
<b>Due from NABC Foundation, Inc.</b>	<b>7,597</b>
<b>Due from others</b>	<b>343</b>
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 15.) ▶	<b>7,940</b>

**Part X Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) 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

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)		1
2	Total expenses (Form 990, Part IX, column (A), line 25)		2
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3
4	Net unrealized gains (losses) on investments		4
5	Donated services and use of facilities		5
6	Investment expenses		6
7	Prior period adjustments		7
8	Other (Describe in Part XIV)		8
9	Total adjustments (net). Add lines 4-8		9
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	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:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		5

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		5

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part ii, lines 3, 5, and 9; Part iii, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.

-----

-----

-----

-----

-----

-----

-----

-----

-----

-----

-----

**Part XIV** Supplemental Information *(continued)*

---

Area with horizontal dashed lines for supplemental information.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No 1545-0047

Department of the Treasury  
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

▶ Attach to Form 990. To be completed by organizations  
that answered "Yes" to Form 990, Part IV, line 23.

**2008**

**Open to Public  
Inspection**

Name of the organization

Employer identification number

**National Association of Basketball Coaches**

**31**

**1626159**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . . . . .

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                         | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a** Receive a severance payment or change of control payment? . . . . .
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .
- c** Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . .

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .

	Yes	No
1a		
1b		
2		
3		
4a		✓
4b		✓
4c		✓
5a		
5b		
6a		
6b		
7		
8		

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Jim Haney	(i)	472,450	5,000	24,500	9,589	511,539	0
	(ii)						
Reggie Minton	(i)	179,537	5,000	26,728	4,645	215,910	0
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Area with horizontal dashed lines for supplemental information.



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

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

▶ Attach to Form 990 or Form 990-EZ.  
▶ To be completed by organizations that 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

**2008**

**Open To Public Inspection**

Name of the organization <b>National Association of Basketball Coaches</b>	Employer identification number <b>31 : 1626159</b>
---	---

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).  
To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on 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.**  
To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
<b>Total</b> . . . . . ▶				\$						

**Part III Grants or Assistance Benefitting Interested Persons.**  
To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

**Part IV Business Transactions Involving Interested Persons.**  
To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
<b>Carol Haney</b>	<b>Key Employee</b>	<b>\$77,689</b>	<b>Employment</b>		<input checked="" type="checkbox"/>

**SCHEDULE M  
(Form 990)**

**NonCash Contributions**

OMB No 1545-0047

**2008**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

► To be completed by organizations that answered "Yes"  
on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

Name of the organization <b>National Association of Basketball Coaches</b>	Employer identification number <b>31 : 1626159</b>
---	---

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .	✓		\$ 99,600	Fair Market Value
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 . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► (Basketballs . . . . .)	✓	Numerous	\$ 5,000	Fair Market Value
26 Other ► ( . . . . . )				
27 Other ► ( . . . . . )				
28 Other ► ( . . . . . )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .

29	0
----	---

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		✓
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .	✓	
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

The NABC uses an outside marketing company to solicit noncash contributions. All noncash contributions are used during the NABC convention and the majority of the goods go back to the membership as gifts. Some of the noncash contributions are also used to fulfill sponsorship obligations (for example, autographed basketballs).

Dotted lines for supplemental information.

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

**2008**

**Open to Public Inspection**

Name of the organization

**National Association of Basketball Coaches**

Employer identification number

**31 : 1626159**

**Form 990, Part VI, Section A, Line 6**

The Association is organized as a not-for-profit, non-stock corporation with members. The Association has five classes of membership: active, associate, activity, life and honorary members. The members serve without authority and do not have the right to notice or to vote, are not considered for the purposes of establishing a quorum, and do not have any corporate rights or responsibility.

**Form 990, Part VI, Section A, Line 7a**

The affairs of the Association are managed by the Directors who have and exercise all powers and of the Association. The directors are elected by a nominating committee comprised of one current Director and two members. This committee nominates and recommends to the Directors then in office the individuals selected for open Director positions. Upon election, the Directors hold office until their successor is elected, death, resignation or disqualification occurs. The Directors consist of not less than 13 and not more than 21 individuals divided into three classes representative of the NCAA: Division I, Division II and Division III.

**Form 990, Part VI, Section A, Line 10:**

The Association's Form 990 is prepared by the Association's staff and reviewed by the Association's external certified public accountant. The Form 990 is presented to the Executive Committee of the Board of Directors at the Spring annual meeting. The Executive Committee reviews and approves the Form 990. This Executive Committee reports to the full Board of Directors that such action was taken. The Executive Committee and Board of Directors document the approval in their respective minutes. Subsequent to the Executive Committee approval, management files the Form 990 with the Internal Revenue Service.

Name of the organization <b>National Association of Basketball Coaches</b>	Employer identification number <b>31 : 1626159</b>
---	---

**Form 990, Part VI, Section B, Line 12c:**

The Association conducts periodic reviews for monitoring proposed and ongoing transactions of conflict of interest. The Association requires that each Director and member of a committee with governing board delegated power sign an annual statement which affirms that they have received a copy of the conflict of interest policy; have read and understand the policy; have agreed to comply with the policy; and understands that the Association is tax-exempt and must engage primarily in activities that accomplish its tax-exempt purpose. The committee with governing board delegated power determines whether a conflict of interest has occurred based on disclosure of the financial interest and all material facts of an interested person. This committee reviews all compensation arrangements and benefits to determine if they are reasonable. The Association's policy covers all interested persons who are defined as any director, principal officer, or member of a committee with governing board delegated powers who has a direct or indirect financial interest in the Association. This committee will also review actual conflicts of interest. In the event conflict of interest, this committee will determine if any restrictions should be imposed on the interested person.

**Form 990, Part VI, Section B, Line 15a and 15b:**

The Association hires an independent party to perform a compensation study on the Executive Director and Deputy Director of the Association. The most recent compensation study was performed in fiscal year 2009.

**Form 990, Part VI, Section C, Line 19:**

The Association has a Public Inspection policy. This policy states that its governing documents, conflicts of interest policy and financial statements are available to the public for review during regular business hours at 1111 Main Street, Suite 1000, Kansas City, MO 64105. Any request for such filings will be made without charge except for the cost to reproduce and mail the filings. All requests must be made in person or in writing. If the request is made in person, the copies shall be provided immediately. For any written requests, the NABC shall provide the filings within 30 days of the request.

**Form 990, Part III - Organization's Primary Exempt Purpose**

1. To develop within the coaches a deeper sense of responsibility in developing, maintaining and conducting the game of basketball.
2. To foster and encourage the playing of basketball in accordance with the highest traditions of intercollegiate competition.
3. To correlate the game of basketball with the general objectives of education.
4. To maintain a membership group representative of various sections of the United States.

**Form 990, Part IX, Line 24f**

Projects	\$	26,214
Consult		21,017
Web		15,565
Postage		13,642
Research		11,137
Contribution		9,635
Printing		6,286
Dues		3,691
Bank		3,295
Utilities		894
Taxes/fees		410
Miscellaneous expenses	\$	<u>111,786</u>

-1

**NABC**  
**Depreciation Expense Report**  
**As of September 30, 2009**

Book = Internal

FYE Month = September

Sys No	In Svc Date	Acquired Value	P T	Depr Meth	Est Life	Salv / 168(k) Sec 179	Depreciable Basis	Prior Thru	Prior Accum Depreciation	Depreciation This Run	Current YTD Depreciation	Current Accum Depreciation	Key Code
000004	FULLY DEPRECIATED ASSETS AT 9/30/07												
	03/24/95	45,900.69	P	MF200	07 00	0.00	45,900.69	08/31/09	45,900.69	0.00	0.00	45,900.69	s
000005	Paper folder												
	11/09/00	2,835.50	P	MF200	07 00	0.00	2,835.50	08/31/09	2,835.50	0.00	0.00	2,835.50	s
000006	Storage cabinets												
	02/10/01	1,391.50	P	MF200	07 00	0.00	1,391.50	08/31/09	1,391.50	0.00	0.00	1,391.50	s
000007	Exec multifunctional												
	12/11/01	377.64	P	MF200	05 00	0.00	377.64	08/31/09	377.64	0.00	0.00	377.64	
000008	Flat screen monitor - 1												
	01/21/02	391.00	P	MF200	05 00	0.00	391.00	08/31/09	391.00	0.00	0.00	391.00	
000009	Sharp LCD projector												
	11/01/02	1,930.25	P	MF200	05 00	0.00	1,930.25	08/31/09	1,930.25	0.00	0.00	1,930.25	s
000010	2000 Server/IMB XS												
	11/27/02	4,789.83	P	MF200	07 00	0.00	4,789.83	08/31/09	4,673.95	6.44	77.25	4,751.20	s
000011	HP ZE5170 #STW2440												
	11/20/02	1,929.97	P	MF200	05 00	0.00	1,929.97	08/31/09	1,929.97	0.00	0.00	1,929.97	s
000012	HP ZE5170 #STW2431												
	12/18/02	1,616.35	P	MF200	05 00	0.00	1,616.35	08/31/09	1,616.35	0.00	0.00	1,616.35	s
000013	HP ZE5170 #STW 2440												
	12/18/02	1,616.35	P	MF200	05 00	0.00	1,616.35	08/31/09	1,616.35	0.00	0.00	1,616.35	s
000014	Computer equipment												
	01/21/03	1,567.71	P	MF200	05 00	0.00	1,567.71	08/31/09	1,567.71	0.00	0.00	1,567.71	s
000015	DVD RW Drive												
	01/22/03	472.06	P	MF200	05 00	0.00	472.06	08/31/09	472.06	0.00	0.00	472.06	s
000016	Laser printer/LCD												
	09/29/03	3,010.05	P	MF200	05 00	0.00	3,010.05	08/31/09	3,010.05	0.00	0.00	3,010.05	s
000017	Hiback chair - Jim Haney												
	11/03/03	440.87	P	MF200	05 00	0.00	440.87	08/31/09	422.67	0.00	18.20	440.87	s
000018	Quorum Speakerphone												
	03/05/04	884.93	P	MF200	05 00	0.00	884.93	08/31/09	861.88	0.00	23.05	884.93	s
000019	3 powerspec & 1 17"												
	03/19/04	2,746.26	P	MF200	05 00	0.00	2,746.26	08/31/09	2,674.71	0.00	71.55	2,746.26	s
000020	Conference table & chairs												
	07/19/04	6,246.30	P	MF200	07 00	0.00	6,246.30	08/31/09	5,462.35	26.13	313.58	5,775.93	s
000021	APC Smart Ups 1000												
	08/27/04	672.03	P	MF200	05 00	0.00	672.03	08/31/09	649.05	0.00	22.98	672.03	s
000022	LCD monitor												
	08/27/04	480.19	P	MF200	05 00	0.00	480.19	08/31/09	463.77	0.00	16.42	480.19	s
000023	Choc sofa & chair												
	08/27/04	1,074.74	P	MF200	07 00	0.00	1,074.74	08/31/09	939.86	4.50	53.95	993.81	s
000024	1 headset/4 MLX 16												
	09/10/04	1,139.77	P	MF200	05 00	0.00	1,139.77	08/31/09	1,100.79	0.00	38.98	1,139.77	s
000025	2 powerspecs/3 17"												
	09/30/04	2,666.69	P	MF200	05 00	0.00	2,666.69	08/31/09	2,575.49	0.00	91.20	2,666.69	s
000026	File/desk - Dottie's												
	09/30/04	1,064.40	P	MF200	07 00	0.00	1,064.40	08/31/09	930.82	4.45	53.43	984.25	s
000027	ROS - Conference table												
	10/21/04	2,660.80	P	MF200	05 00	0.00	2,660.80	08/31/09	2,430.91	12.77	153.26	2,584.17	s
000028	Flat screen monitor												
	10/25/04	480.19	P	MF200	05 00	0.00	480.19	08/31/09	438.71	2.30	27.65	466.36	s
000029	Toshiba S209												
	12/30/04	1,665.55	P	MF200	05 00	0.00	1,665.55	08/31/09	1,521.65	7.99	95.93	1,617.58	s
000030	Toshiba S211 \$S3111												



NABC  
Depreciation Expense Report  
As of September 30, 2009

Book = Internal  
FYE Month = September

Sys No	In Svc Date	Acquired Value	P T	Depr Meth	Est Life	Salv / 168(k) Sec 179	Depreciable Basis	Prior Thru	Prior Accum Depreciation	Depreciation This Run	Current YTD Depreciation	Current Accum Depreciation	Key Code
000031	05/26/05	2,774.25	P	MF200	05 00	0.00	2,774.25	08/31/09	2,534.56	13.32	159.79	2,694.35	s
	Lateral files - 2												
000032	12/14/05	1,702.57	P	MF200	05 00	0.00	1,702.57	08/31/09	1,304.17	13.28	159.36	1,463.53	
	Bookcase												
000033	03/02/06	265.43	P	MF200	05 00	0.00	265.43	08/31/09	193.77	2.39	28.66	222.43	
	Conference room												
000034	06/22/06	1,699.60	P	MF200	05 00	0.00	1,699.60	08/31/09	1,179.52	17.34	208.03	1,387.55	
	Sony Silver notebook												
000035	06/19/06	2,168.11	P	MF200	05 00	0.00	2,168.11	08/31/09	1,504.67	22.11	265.38	1,770.05	s
	Canon Comp pnnter												
000036	06/19/06	90.00	P	MF200	05 00	0.00	90.00	08/31/09	62.46	0.92	11.02	73.48	s
	HP 5550 DTN Color												
000037	07/27/06	5,328.93	P	MF200	05 00	0.00	5,328.93	08/31/09	3,506.44	60.75	729.00	4,235.44	
	Security cameras												
000038	09/18/06	613.44	P	MF200	05 00	0.00	613.44	08/31/09	403.64	6.99	83.92	487.56	
	Console table con												
000039	09/18/06	686.93	P	MF200	05 00	0.00	686.93	08/31/09	452.00	7.83	93.95	545.95	s
	CDR - DVDR Disc Publ												
000040	09/26/06	2,690.00	P	MF200	05 00	0.00	2,690.00	08/31/09	1,770.02	30.67	367.99	2,138.01	
	Jim's laptop												
000041	12/08/06	1,330.00	P	MF200	05 00	0.00	1,330.00	08/31/09	811.30	17.29	207.48	1,018.78	
	Network Wireless												
000042	01/26/07	883.69	P	MF200	05 00	0.00	883.69	08/31/09	486.03	13.25	159.06	645.09	
	Monitor												
000043	03/15/07	319.79	P	MF200	05 00	0.00	319.79	08/31/09	175.89	4.80	57.56	233.45	
	Kevin's laptop												
000044	03/03/07	1,075.24	P	MF200	05 00	0.00	1,075.24	08/31/09	591.38	16.13	193.54	784.92	
	DP laptop												
000045	02/06/07	1,494.60	P	MF200	05 00	0.00	1,494.60	08/31/09	822.03	22.42	269.03	1,091.06	
	Ebony's desktop												
000046	04/19/07	645.14	P	MF200	05 00	0.00	645.14	08/31/09	316.12	10.97	131.61	447.73	
	HP P2005X pnnter												
000047	05/18/07	959.35	P	MF200	05 00	0.00	959.35	08/31/09	470.08	16.31	195.71	665.79	
	Avaya phones												
000048	07/09/07	19,321.41	P	MF200	05 00	0.00	19,321.41	08/31/09	8,308.21	367.11	4,405.28	12,713.49	
	Bookcases												
000049	01/13/06	530.87	P	MF200	05 00	0.00	530.87	08/31/09	387.54	4.78	57.33	444.87	s
	Sony Silver notebook												
000050	02/10/06	1,612.94	P	MF200	05 00	0.00	1,612.94	08/31/09	1,177.45	14.52	174.20	1,351.65	s
	VGNAR 520E laptop												
000051	10/17/07	1,483.99	P	SLMM	05 00	0.00	1,483.99	08/31/09	272.07	24.73	296.80	568.87	
	Adobe Master Collection Software												
000052	10/17/07	1,131.97	P	SLMM	03 00	0.00	1,131.97	08/31/09	345.88	31.44	377.32	723.20	
	Dell PC 2												
000053	10/31/07	354.84	P	SLMM	05 00	0.00	354.84	08/31/09	65.05	5.91	70.97	136.02	
	MS Office 2007												
000054	01/14/08	537.64	P	SLMM	03 00	0.00	537.64	08/31/09	134.41	14.93	179.21	313.62	
	Acer 19" monitor												
000055	01/14/08	408.59	P	SLMM	05 00	0.00	408.59	08/31/09	61.29	6.81	81.72	143.01	
	Acer 22" monitor												
000056	01/14/08	247.30	P	SLMM	05 00	0.00	247.30	08/31/09	37.10	4.12	49.45	86.55	
	Dell PC P4												
	01/14/08	645.17	P	SLMM	05 00	0.00	645.17	08/31/09	96.78	10.75	129.03	225.81	

F-2

**NABC**  
**Depreciation Expense Report**  
**As of September 30, 2009**

Book = Internal

FYE Month = September

Sys No	In Svc Date	Acquired Value	P T	Depr Meth	Est Life	Salv / 168(k) Sec 179	Depreciable Basis	Prior Thru	Prior Accum Depreciation	Depreciation This Run	Current YTD Depreciation	Current Accum Depreciation	Key Code
000057	IP 400 VoiceMail Pro 12/31/07	2,275.00	P	SLMM	05 00	0.00	2,275.00	08/31/09	341.25	37.92	455.00	796.25	
000058	Phone system 12/04/07	10,317.44	P	SLMM	05 00	0.00	10,317.44	08/31/09	1,719.57	171.96	2,063.49	3,783.06	
000059	Phone system 02/27/08	3,927.66	P	SLMM	05 00	0.00	3,927.66	08/31/09	458.23	65.46	785.49	1,243.72	
000060	Phone system 04/30/08	5,426.86	P	SLMM	05 00	0.00	5,426.86	08/31/09	452.24	90.45	1,085.37	1,537.61	
000061	Blackberry and VM 06/25/08	1,608.80	P	SLMM	05 00	0.00	1,608.80	08/31/09	80.44	26.81	321.76	402.20	
000062	Server 08/07/08	3,972.50	P	SLMM	05 00	0.00	3,972.50	08/31/09	132.42	66.21	794.50	926.92	
000063	Sony Vaio laptop - Whitcher 07/18/08	2,098.94	P	SLMM	05 00	0.00	2,098.94	08/31/09	69.97	34.98	419.77	489.74	
000064	Sony Vaio laptop - Haney C 08/28/08	1,720.47	P	SLMM	05 00	0.00	1,720.47	08/31/09	28.68	28.67	344.09	372.77	
000065	Lenovo laptop - Haney C - old 03/27/08	1,451.64	P	SLMM	05 00	0.00	1,451.64	08/31/09	145.16	24.19	290.33	435.49	
000066	Sony Vaio laptop 04/01/08	2,078.10	P	SLMM	05 00	0.00	2,078.10	08/31/09	207.81	34.63	415.61	623.42	
000067	Lenovo and HP 02/19/08	1,752.72	P	SLMM	05 00	0.00	1,752.72	08/31/09	204.48	29.21	350.52	555.00	
000068	Bookcase - 7 shelf 03/03/08	285.48	P	SLMM	07 00	0.00	285.48	08/31/09	23.79	3.40	40.78	64.57	
000069	Hands On software - registration at convention 12/05/08	500.00	Z	SLMM	03 00	0.00	500.00	08/31/09	0.00	13.89	138.89	138.89	
000070	3 HP Pmtrers for Convention Registration 03/19/09	180.82	P	SLMM	03 00	0.00	180.82	08/31/09	0.00	5.02	30.14	30.14	
000071	2 Compaq laptops for Convention Registration 03/19/09	859.98	P	SLMM	03 00	0.00	859.98	08/31/09	0.00	23.89	143.33	143.33	
000072	Update office cables 08/18/09	3,137.23	P	SLMM	10 00	0.00	3,137.23	08/31/09	0.00	26.14	26.14	26.14	
000073	Install of computer racks; moving servers; cabling 09/29/09	1,966.14	P	SLMM	10 00	0.00	1,966.14		0.00	0.00	0.00	0.00	
<b>Grand Total</b>		184,613.19				0.00	184,613.19		119,519.58	1,509.28	17,905.04	137,424.62	
Less disposals and transfers		0.00				0.00	0.00		0.00			0.00	
Count = 0													
<b>Net Grand Total</b>		<u>184,613.19</u>				<u>0.00</u>	<u>184,613.19</u>		<u>119,519.58</u>	<u>1,509.28</u>	<u>17,905.04</u>	<u>137,424.62</u>	
Count = 70													

## Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

<b>Type or print</b>	Name of Exempt Organization <b>National Association of Basketball Coaches</b>	Employer identification number <b>31 1626159</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1111 Main Street, Suite 1000</b>	
	City, town or post office, state, and ZIP code For a foreign address, see instructions <b>Kansas City, MO 64105</b>	

**Check type of return to be filed** (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **Jim Haney, Executive Director**

Telephone No. ▶ ( 816 ) 878-6222 FAX No. ▶ ( 816 ) 878-6223

- 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 will cover.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until May 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶  calendar year 20\_\_\_\_ or

▶  tax year beginning October 1, 2008, and ending September 30, 2009

**2** If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box  **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

<b>Type or print</b>  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	

**Check type of return to be filed** (File a separate application for each return):

- |                                      |   |                                      |                                    |
|--------------------------------------|---|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990    | <input type="checkbox"/> Form 990-PF                              | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 4720   | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 5227   |                                    |

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**


- The books are in the care of  Telephone No.  FAX No.
- 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.

- I request an additional 3-month extension of time until \_\_\_\_\_, 20\_\_\_\_\_.
- For calendar year \_\_\_\_\_, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_\_.
- If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- State in detail why you need the extension \_\_\_\_\_

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$
<b>b</b> If this application is for Form 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 and any amount paid previously with Form 8868.	<b>8b</b>	\$
<b>c Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title Executive Director Date 2/5/10