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Form 990-ÈZ

OMB No 1545-1150 2009

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

A	For the	2009 calend	dar year,	or tax year beginning	, and ending							
В	Check if	fapplicable	Please	C Name of organization					D	Emp	loyer identification number	
	Address	Address change use IRS NATIONAL ASSOCIATION OF ACTIVITY										
Name change   PROFESSIONALS   PROFESSIONALS										36-3253020		
	Initial ref	turn	type.	Number and street (or P O box, if mail is i	not delivered to street add	ress)		Room/suite	Е		phone number	
Ц	Termina	ition	See Specific	PO BOX 5530						86	5-429-0717	
Ц	Amende	ed return	Instruc-	City or town, state or country, and ZIP + 4					F	Grou	p Exemption	
		ion pending	tions.	SEVIERVILLE	TN 378					Num		
	<ul><li>Sec</li></ul>	tion 501(c)(3		zations and 4947(a)(1) nonexempt ch		attach		G Accountin		thod	Cash X Accrual	
_				npleted Schedule A (Form 990 or 990	)-EZ).		-	Other (specify)				
١.	Websit			enaap.com	4047(-)(4)		1 507	H Check ► required t	o atta	ch Sch	organization is <b>not</b> jedule B (Form 990,	
<u>J</u>		empt status (ch					527	990-EZ, c	or 990	-PF)	<del></del>	
K	Check			ganization is not a section 509(a)(3) si			_	•		•	more than \$25,000 A	
				turn is not required, but if the organization determine gross receipts if \$500,000 er					ete r	-	171,862	
	art I			to determine gross receipts, if \$500,000 or penses, and Changes in Net					ruct	<mark>▶ \$</mark>		
	1	•		nts, and similar amounts received	Assets of Fullu I	Daiaii	ices (C	oce me mor	Tuci	1	500	
	2	-		enue including government fees and c	ontracts				-	2	104,858	
	3	-		nd assessments		e S	State	ment 1	f	3	59,960	
	4	Investment		a abbosoments					l	4	1,286	
	5a			sale of assets other than inventory	3	5a			ı			
	b			asis and sales expenses	İ	5b						
Ŋ	С	Gain or (loss)	from sale	of assets other than inventory (Subtract life)	5b from line 5a)		•			5c		
ĕ	6			1.51 100	· ·	gamin	g, check l	here 🕨	1 [			
USSE Revenue	a	SI SET 23 2010 1917					'	- 1				
<b>8</b>		reported on				6a				1		
ij	b	Less direct	expense	s other than until singlexpenses		6b				- 1		
_	С	Net income	or (loss)	from special events and activities (Su	btract line 6b from line	(6a)			Į.	6с		
	7a	Gross sales	of inven	tory, less returns and allowances		7a		3,7		1		
==1	b	Less cost o	of goods s	sold		7b	Į	2,5	06			
:9	С			from sales of inventory (Subtract line					L	7с	1,212	
<u> </u>	8			ribe ► <u>See Statement</u>	2				)	8	1,540	
ა ე	9			lines 1, 2, 3, 4, 5c, 6c, 7c, and 8				·		9	169,356	
	10			mounts paid (attach schedule)					}	10	1,000	
	11	Benefits paid to or for members						-	11	64 270		
es	12	Salaries, other compensation, and employee benefits						ŀ	12	64,378 5,820		
Expenses	13	Professional fees and other payments to independent contractors						L	13	17,992		
Ä	14							ŀ	14 15	20,921		
	15 16						$\cdot$	16	84,624			
	17						<b>┟</b>	17	194,735			
_	18								18	-25,379		
ets	19	•	•	• ,	•	t agree	with		Ì			
Net Assets		end-of-year figure reported on prior year's return)						19	33,126			
et/	20						Ī	20	······································			
Z	21	-	_	alances at end of year Combine lines	•				▶	21	7,747	
F	art II	Balan	ce She	ets. If Total assets on line 25, colum	n (B) are \$1,250,000 o	or more	, file For	m 990 instead	of F	orm 9	90-EZ	
				(See the instructions for Part II)			(A)	Beginning of yea	ır		(B) End of year	
22	Cash,	savings, and	ınvestme	ents				29,1	24	22	10,280	
23	Land a	ind buildings								23	•	
24	Other a	assets (descr	nbe 🕨	See Statement 4		)		5,0		24	3,882	
25	Total a	assets						34,1	_		14,162	
26 Total liabilities (describe ► See Statement 5 ) 1,062 26								6,415				
<u>27</u>	Net as	sets or fund	balance	s (line 27 of column (B) must agree w	ith line 21)		L	33,1	26	27	7,747	

DAA

Form 990-EZ (2009) NATIONAL ASSO	CIATION OF ACTIV	/ITY 3 <i>6</i>	3-3253020		_	Page 2
Part III Statement of Program Serv	vice Accomplishments (	See the instruc	tions for Part II	1.)	Ex	penses
What is the organization's primary exempt purpose?	)					for section
See Statement 6						and 501(c)(4)
Describe what was achieved in carrying out the organ manner, describe the services provided, the numbe					-	ons and section trusts, optional
each program title	or personic bononica, or outer i				for others	• •
28 CONTINUING EDUCATION FOR ACTIVITY	PROFESSIONALS-NUMBER OF	MEMBERS				-
SERVED-1041						
			. 1			
<del></del>	nount includes foreign grants, ch	eck here	<u> </u>		28a	
29						
(Grants \$ ) If this an	nount includes foreign grants, ch	eck here	<b>&gt;</b>	<u>                                   </u>	29a	
30	<u> </u>					
			_			
	nount includes foreign grants, ch	eck here	<b>•</b>		30a	
<ul><li>31 Other program services (attach schedule)</li><li>(Grants \$ ) If this an</li></ul>	nount includes foreign grants, ch	eck here	<b>.</b>	m l	31a	
32 Total program service expenses (add lines 28		icon norc		-	32	
Part IV List of Officers, Directors, Trustee		ch one even if not		the II	nstructions fo	or Part IV)
(a) Name and addre	ee	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) ( employe	Contributions to ee benefit plans &	(e) Expense account and
(a) Name and Source		devoted to position	enter -0)		d compensation	other allowances
IRENE TAYLOR		EXEC. DIR.			_	
DEDDIE DEDA	<del> </del>	40.00 PRESIDENT	37,000		0	0
DEBBLE BEKA		PRESIDENT	,		0	0
DEBBIE BERA MYRTLE KLAUER		VICE-PRESIDE				·
			0		0	0
MARY SPIKES		SECRETARY-TR	EASURER			
			. 0		0	. 0
VANESSA EMM		TRUSTEE			0	0
DEBBIE BOUKNIGHT		TRUSTEE				
			0		0	o
BRENDA SCOTT		TRUSTEE				
	<del> </del>		0		0	0
SUSAN RAUCH		TRUSTEE			_	_
			0		0	0
				1		
		<u> </u>				<u> </u>
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Form **990-EZ** (2009)

Form	m 990-EZ (2009) NATIONAL ASSOCIATION OF ACTI	VITY 3	5-3253020		ı	Page 4	
Pa	art VI Section 501(c)(3) organizations and section 4947(	a)(1) nonexemp	t charitable tr	usts only. All s	ection		
•	501(c)(3) organizations and section 4947(a)(1) non	exempt charital	ole trusts must	answer question	ons 46-49	9b	
	and complete the tables for lines 50 and 51.	-		•			
46	Did the organization engage in direct or indirect political campaign activities	on behalf of or in op	position to		Yes	No	
	candidates for public office? If "Yes," complete Schedule C, Part I	·			46		
47	Did the organization engage in lobbying activities? If "Yes," complete Sched	ule C, Part II			47		
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii	)? If "Yes," complete	Schedule E		48		
49a					49a		
b	If "Yes," was the related organization a section 527 organization?				49b		
50	Complete this table for the organization's five highest compensated employe	es (other than office	ers, directors, trust	ees and key			
	employees) who each received more than \$100,000 of compensation from t	he organization If th	ere is none, enter	"None "			
	(a) Name and address of each employee paid more	(b) Title and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans &	(e) Exper		
	than \$100,000	devoted to position		deferred compensation	other allowa		
		l					
			<u> </u>				
f	Total number of other employees paid over \$100,000	▶ _		_			
	\$100,000 of compensation from the organization. If there is none, enter "No	ne *				<u>.</u>	
	(a) Name and address of each independent contractor paid more than \$100,000	(b)	Type of service	(c) C	ompensation		
						<del></del>	
				<b></b>		<del></del>	
		İ					
	Total number of other independent contractors each receiving over \$100,00	0					
_	, , , , , , , , , , , , , , , , , , ,						
	Under penalties of perjury, I declare that I have examined this return, includir						
	and belief it is true, correct, and complete Declaration of preparer (other than	in officer) is based on a	Il information of which	n preparer has any know	vledge		
Sig	In Juny James	9/16/10					
Her							
	IRENE TAYLOR /	EXE	CUTIVE DI	RECTOR			
	Type or print name and title						
	Preparer's A A A A A A A A	Date	Check if	Preparer's Ident	ıfyıng Number (S	See instr )	
Pai		08/2	6/10 self- employed	▶□   P0040	3185		
Pre	eparer's Firm's name (or yours Hickman & Company, P				2-1297	7170	
Use	e Only of self-employed), 110 Legacy View Way			Phone			
		-1343			-689-9	598	
Max							
ividy	y the IRS discuss this return with the preparer shown above? See instructions			<b>•</b>	Yes	No	

Form **4562** 

Department of the Treasury Internal Revenue Service

#### **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions.

Attach to your tax return.

OMB No 1545-0172

Name(s) shown on return

NATIONAL ASSOCIATION OF ACTIVITY **PROFESSIONALS** 

Identifying number 36-3253020

Business or activity to which this form relates Indirect Depreciation Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses. 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filling separately, see instructions (b) Cost (business use only) (c) Elected cost (a) Description of property 6 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 q Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) Property subject to section 168(f)(1) election 15 598 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2009 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (business/investment use (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property placed in period only-see instructions) service 19a 3-year property b 5-year property C 7-year property d 10-year property e 15-year property 20-year property S/L g 25-year property 25 yrs S/L Residential rental 27 5 yrs MM property 27 5 yrs MM S/L 39 yrs ММ S/L Nonresidential real property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs S/L b 12-year ММ S/L c 40-year 40 yrs Summary (See instructions.) Part IV 21 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 598 and on the appropriate lines of your return Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

# · 207513 NATIONAL ASSOCIATION OF ACTIVITY 36-3253020

Description

# **Federal Statements**

- FYE: 12/31/2009

## Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description	Amount			
DUES	\$	59,960		
Total	\$	59 <b>,</b> 960		

#### Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description		Amount		
CONFERENCE PROGRAM ADS	\$	675		
SALE OF MEMBERSHIP LISTS		500		
NEWSLETTER	•	300		
MISCELLANEOUS INCOME		65		
Total	\$	1,540		

#### Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Amount

NAAP WORKSHOPS	\$ 1,887
Conferences/Meetings	1,887
ANNUAL CONFERENCE	
Supplies	687
Travel	9,148
Conferences/Meetings ACCREDITATION	34,045 150
SPEAKERS	4,810
PROFESSIONAL DEVELOPMENT	569
EXHIBITS	3,003
Expenses	
Conferences/Meetings	4,626
Insurance	2,069
BANK CHARGES	3,290
WEB SITE	1,823
BOARD EXPENSES	1,375
DUES & MEMBERSHIPS MARKETING	200 1,286
OFFICE SUPPLIES	1,272
TELEPHONE	4,555
VOLUNTEER REIMB	2,038
EQUIPMENT LEASE	2,646
OTHER EQUIP EXPENSE	720
MISCELLANEOUS	301
TRAVEL AWARDS	2,957 857
UNRELATED BUSINESS TAXES	310
Total	\$ 84,624
10041	- 01,024

# · 207513 NATIONAL ASSOCIATION OF ACTIVITY 36-3253020

# **Federal Statements**

- FYE: 12/31/2009

### Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	_	End of Year
Inventories for Sale or Use Prepaid Expenses and Deferred Charges	\$ 1,352 293	\$	1,062
Less Accumulated Depreciation SECURITY DEPOSITS	16,348 14,344 1,415		16,348 14,943 1,415
	5,064		3,882

### Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	l 	End of Year
Accounts Payable and Accrued Expenses Deferred Revenue	\$	\$	1,065 5,350
PAYROLL TAXES PAYABLE UNRELATED BUSINESS TAX PAYABLE	1,0	062	3,330
	1,0	062	6,415

-207513 NATIONAL ASSOCIATION OF ACTIVITY
36-3253020 Federal Statements

8/26/2010 10:22 AM

FYE: 12/31/2009

## Statement 6 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

TO PROVIDE EDUCATION AND TRAINING FOR ACTIVITY PROFESSIONALS