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## Form **990**

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

2009

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

Open to Public Inspection

A	<u>Fo</u> r	the	2009 cal	lendar year, or tax year beginning and ending		
В	Chec	ck if	Please	C Name of organization	D Employer identifi	cation number
	appl	icable	use IRS	NATIONAL WOOD FLOORING ASSOCIATION		
ſ	٦Ą	ddress hange	label or	AMMN. MD EDWADD C VODCZAV CAE	i	
Ĭ	- N	lame hange	print or type	Doing Business As	62-1	289602
i		ntial	See	Number and street (or P.O. box if mail is not delivered to street address) Room/suit	1	
ı I		eturn ermin-	Specific	111 CHECKERETEIN TAINICHRIAI RIVN		519-9663
l f	a	ted mende	Instruc-			3,249,962.
L	re	sturn		City or town, state or country, and ZIP + 4	G Gross receipts \$	
l		pplica- on ending		CHESTERFIELD, MO 63005	H(a) Is this a group re	
	•		F Nan	me and address of principal officer EDWARD S. KORCZAK	for affiliates?	Yes X No
_				ME AS C ABOVE	H(b) Are all affiliates inc	
1				us: X 501(c) ( 6 ) ◀ (insert no ) 4947(a)(1) or 527	<del>-</del> 1	list (see instructions)
_	We	bsite	: <b>▶</b> ₩₩	W.NWFA.ORG	H(c) Group exemptio	
<u>K</u>	For	m of o	rganizatio	on: Corporation Trust X Association Other ► L Yea	r of formation: 1986 N	■ State of legal domicile; MO
L	Part		Summ			<u> </u>
	<b>a</b> .	1 B	riefly des	scribe the organization's mission or most significant activities TO ORGANI	ZE AND UNITE	ALL
	[일	S	EGME	ENTS OF THE WOOD FLOORING INDUSTRY AND TO	EDUCATE MEM	BERS AND
	Ë   :			is box If the organization discontinued its operations or disposed of mo		
	<u>ا چ</u>			of voting members of the governing body (Part VI, line 1a)	3	15
	<u>ة</u>   ق			of independent voting members of the governing body (Part VI, line 1b)	4	15
1	Activities & Governance			nber of employees (Part V, line 2a)	5	23
	<u>₽</u>   }			nber of volunteers (estimate if necessary)	6	0
	(   }			ss unrelated business revenue from Part VIII, column (C), line 12	7a	0.
2010	۲   ۲			ated business taxable income from Form 990-T, line 34	7b	0.
2	+-	<u>b N</u>	et unreig	ated business taxable income from Form 550-1, line 54	Prior Year	Current Year
9	1.			1,418,550.	1,219,093.	
2	9		ontributi	2,123,652.	1,661,556.	
>=	ହ ।		•	service revenue (Part VIII, tine 2g) int income (Part VIII, column (A), lines 3, 4, and 7d)		11,782.
MAY				<u>37,584.</u>		
	_   1			renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) enue - add lines 8 through 11 (must equal Part XIII, column (A), line 12)	113,711.	124,255.
SCANNED	1			3,693,497.	3,016,686.	
7	1			nd similar amounts paid (Part IX, column (A) lines 1.3).		
$\overline{z}$	1	14 E	lenefits p	<del></del>		
$\triangleleft \bigcirc$	ဖွ   1	15 S	Salaries, d	other compensation, employee benefits (Part IXR collumn (A) lines 5 (0)	<u>1,168,441.</u>	1,327,488.
Q	<u>ا ت</u> ا			nal fundraising fees (Part IX, column (A), line 11e)		
$\mathbb{Q}_{\mathbb{Q}}$	Expenses	bТ	otal fund	draising expenses (Part IX, column D), line-25)		
	<u>ا</u> ش	17 C	ther exp	penses (Part IX, column (A), lines 11a 11d, 11f24f)	2,288,525.	2,061,058.
				enses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,456,966.	3,388,546.
	1			less expenses Subtract line 18 from line 12	236,531.	-371,860.
5					Beginning of Current Year	End of Year
o to	Fund Balances	20 T	otal asse	ets (Part X, line 16)	5,478,428.	4,912,726.
V	ر اعج			ilities (Part X, line 26)	998,194.	804,352.
ā				ts or fund balances Subtract line 21 from line 20	4,480,234.	4,108,374.
	Parl			ature Block		
L			Linder pena	alties of persons. I declare that I have examined this return, including accompanying schedules and statement	s, and to the best of my knowled	ige and belief, it is true, correct,
			and comple	ete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	je	
	ian			March Soland	4-	22-2010
	ign	-	Sign	nature of officer	Date	0/-
Г	lere		. Er	OWARD S. KORCZAK, CEO / EXECUTIVE DIRECTO	T.	
				pe or print name and title		
-	-			Date I	Check if Prepa	rer's identifying number
P	aid		Preparer's		elf- (see in	structions)
P	repar		Signature Firm's nam		mployed >	
U	lse Or	niv	yours if	RIEFER BONFANII & CO. HDF	EIN ►	
			self-employ address, ar	nd File Eller Bolt Rolls, BIE 202	D /	2141422 6700
_			ZIP + 4	ST. LOUIS, MO 63141-6741	Phone no.	314)432-6700
<u> </u>	/lay ti	he IR	S discus	ss this return with the preparer shown above? (see instructions)		X Yes No

932002 02-04-10 Form 990 (2009) \*

ATTN: MR. EDWARD S. KORCZAK, CAE Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
-	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
• •	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			:
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		İ	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX		İ	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		_X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	990	2000

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			ų.
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			v
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		x	
	Schedule J	23		<del> </del>
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 lines 24b through 24d and complete	04=		x
	Schedule K If "No", go to line 25	24a	<del></del>	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
_	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<del>                                     </del>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			İ
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OEL		
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	26		x
^-	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
27				
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	27		x
	Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV		<u> </u>	
28	instructions for applicable filing thresholds, conditions, and exceptions)			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
a	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
b	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
C	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	İ	х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
30	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
31	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		<b></b>	
ŰŽ.	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
٠.	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
-	If "Yes," complete Schedule R, Part V, line 2	35	1	Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	1	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2009)

932004 02-04-10

62-1289602

O09) ATTN: MR. EDWARD S. KORCZAK, CAE
Statements Regarding Other IRS Filings and Tax Compliance Part V

					Yes	No				
1a	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	28							
b	Enter the number of Forms W-2G included in line 1a. Enter -0 - if not applicable	1b	0			l				
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eporta	ble gaming			l				
	(gambling) winnings to prize winners?			1c	_X_					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a	23			ļ				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	rns?		2b	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	ınstru	ctions)			X.				
3a	3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?									
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b_		<b>_</b>				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		1							
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		_X_				
b	If "Yes," enter the name of the foreign country									
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank a	and							
	Financial Accounts					7.7				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactions and taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.		1	5b						
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the Organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the Organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the Organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the Organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the Organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the Organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the Organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarded to the Organization file Form 8886-T, Disc	arding	Pronibited							
_	Tax Shelter Transaction?		anization collect	5c						
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the second by th	ie org	ariizatiori solicit	6a		х				
L	any contributions that were not tax deductible?  If "Yes," did the organization include with every solicitation an express statement that such contributions.	lione o	ur aifte	Ua_						
D	were not tax deductible?	110113	, girts	6b		ĺ				
7	Organizations that may receive deductible contributions under section 170(c).				-					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	aoods	and services							
u	provided to the payor?	3		7a						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b						
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
_	to file Form 8282?			7c		L				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	persor	al							
	benefit contract?			7e	ļ	<u> </u>				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?		7f	<u> </u>	<u> </u>				
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			7g	ļ					
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0			7h	ļ	<b> </b>				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or					İ				
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc	ess b	usiness holdings							
_	at any time during the year?			_8						
9	Sponsoring organizations maintaining donor advised funds.			0-						
	Did the organization make any taxable distributions under section 4966?			9a 9b	-					
	Did the organization make a distribution to a donor, donor advisor, or related person?			30		<del>                                     </del>				
10	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12	10a								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter:									
	Gross income from members or shareholders	11a								
	Gross income from other sources (Do not net amounts due or paid to other sources against									
_	amounts due or received from them)	11b								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		<u></u>				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b								
				Form	990	(2009)				

Page 6

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

Sec	tion A. Governing Body and Management						
				-		Yes	No
1a	Enter the number of voting members of the governing body	1a		15			
b	Enter the number of voting members that are independent	1b		15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other				
	officer, director, trustee, or key employee?			L	2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?				3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo	orm 99	0 was filed?	Ĺ	4		_X_
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?		L	5		_X_
6	Does the organization have members or stockholders?			-	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers	s of the				
	governing body?			Ļ	7a_	<u> </u>	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pe	rsons?		]_	7b		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year				
	by the following.						
а	The governing body?			-	8a	X	
b	Each committee with authority to act on behalf of the governing body?			-	8b_	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the				••
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		<u> </u>
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	levenu	e Code)				
	Desired to the lan			Г	10-	Yes	No X
	Does the organization have local chapters, branches, or affiliates?		ero offiliatos	H	10a		
Þ	If "Yes," does the organization have written policies and procedures governing the activities of such	спарт	ers, aniliates,		40h		
	and branches to ensure their operations are consistent with those of the organization?	ilina th	o form?	}	10b 11		X
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	iiiig ti	0 1011111	F	- ' '	-	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Does the organization have a written conflict of interest policy? If "No," go to line 13				12a		х
	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld aw	o rico	F	124		
D	to conflicts?	uiu giv	e lise		12b		
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes."	describe	F			
Ŭ	In Schedule O how this is done	, 20,			12c		
13	Does the organization have a written whistleblower policy?			Ī	13		Х
14	Does the organization have a written document retention and destruction policy?				14	_	X
15	Did the process for determining compensation of the following persons include a review and approve	al by ır	ndependent	Ī			
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		·	ł			
а	The organization's CEO, Executive Director, or top management official				15a		X
b	Other officers or key employees of the organization				15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			ſ			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a				
	taxable entity during the year?			L	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate i	ts participation				
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anızat	on's				
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► NONE						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	T (501(	c)(3)s only) ava	ilable f	or		
	public inspection. Indicate how you make these available Check all that apply						
	Own website Another's website X Upon request				J &		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict	of interest poli	cy, an	d tina	ncial	
^~	statements available to the public.	الم	ordo efilh	nn:	as. <b>•</b>		
20	State the name, physical address, and telephone number of the person who possesses the books a EDWARD S. KORCZAK - 636-519-9663	ınu rec	orus or the orga	ai iiZa(i	on.		
		ישדי	TERFIELI	<u> </u>	40	63	005
	TIT CHESTEVILIEND IMPOSITION DUAD. CUESTEKLIEND'	وتعدد	TRICK TEIN	<u>1 , ر</u>			20007

932006 02-04-10

62-1289602

Page 7

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. Report compensation for the calendar year ending with or within the organization's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."

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

- 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 ce	ompensate an	<del>, ,,</del>				, 0111	, o . o	1, 01 1100100.		
(A)	(B)			(0	<b>C)</b>			(D)	(E)	(F)
Name and Title	Average		Position		Reportable	Reportable	Estimated			
	hours	(cł	neck	( all 1	that	app	ly)	compensation	compensation from related	amount of other
	per week	ector						from the	organizations	compensation
	WGCK	ndividual trustee or director	, e			ated		organization	(W-2/1099-MISC)	from the
		ustee	institutional trustee		8	npeus		(W-2/1099-MISC)	,	organization
		lual tr	tonal		Key employee	yee ye				and related
		Indivi	thstfu	Officer	Key	Highest compensated employee	<b>Former</b>			organizations
DON FINKELL				-	-	-				
CHAIRMAN OF BOARD	1.00	x		x				0.	0.	0.
NEIL POLAND	2:00	-				1-				
VICE CHAIRMAN	1.00	x		X				0.	0.	0.
RICK HOLDEN				1		<b> </b>	<u> </u>		-	
TREASURER	1.00	х		Х				0.	0.	0.
JOHN LESSICK										
SECRETARY	1.00	X		X				0.	0.	0.
EDWARD S. KORCZAK										
CEO / EXECUTIVE DIRECTOR	40.00	X			X	<u></u>	<u> </u>	186,088.	0.	21,785.
TOM ANSTETT						1				
DIRECTOR	1.00	X	_				<u> </u>	0.	0.	0.
DEWEVAI BUCHANAN									_	_
DIRECTOR	1.00	X	<u> </u>	<u> </u>		ļ	<u> </u>	0.	0.	0.
JEFF FAIRBANKS									_	_
DIRECTOR	1.00	X	_	<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
DAVID GRAF					İ					
DIRECTOR	1.00	X	<u> </u>	ļ	<u> </u>		<u> </u>	0.	0.	0.
ROBERT HAGGARD										
DIRECTOR	1.00	X	_	<u> </u>	<u> </u>	╄	-	0.	0.	0.
KIM HOLM							İ	_		_
DIRECTOR	1.00	X	<u> </u>	<b>├</b>	<del> </del>	╄	<u> </u>	0.	0.	0.
SPRIGG LYNN	1 00	,,							_	_
DIRECTOR	1.00	X			┝	$\vdash$	-	0.	0.	0.
THOMAS MAXWELL	1 00	7.						0.	0.	0.
DIRECTOR GLEN MILLER	1.00	X		-		╁				<u> </u>
• -	1.00	v						0.	0.	0.
DIRECTOR KEVIN MULLANY	1.00	^	-			-	╁╌	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>
DIRECTOR	1.00	x						0.	0.	0.
SAM SMITH	1.00	A	$\vdash$	t		1		<u> </u>		<del> </del>
DIRECTOR	1.00	x						0.	0.	o.
JERRY COLEMAN JR.	2.00	<del>  **</del>	$\vdash$	T	t	†	$\vdash$			
EX-OFFICIO DIRECTOR	1.00	x						0.	0.	0.
					_	•	•	<u> </u>		Form <b>990</b> (2009)

932007 02-04-10

Form **990** (2009)

Form 990 (2009) \*

TN: MR. EDWARD S. KORCZAK, CAE

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Page 8

Section A. Officers, Directors, Tru	1	mple	yee			High	est			т —	<del></del> _	
(A)	(B)	ĺ			C)			(D)	(E)	1	(F)	
Name and title	Average hours	Position (check all that apply)					oly)	Reportable compensation	Reportable compensation		mate	-
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	comp fro orga	other ensa m the nizat relat	ition e ion ed
MARK ELWELL						<u> </u>						
EX-OFFICIO DIRECTOR	1.00	X				<u> </u>	<u> </u>	0.	0	,		0.
JAMIE LUPRESTO										ļ		_
EX-OFFICIO DIRECTOR	1.00	X	<b> </b>		-	┼	<u> </u>	0.	0 .	<del></del>		0.
JIM SCHUMACHER	1 00				1				0	ŀ		^
EX-OFFICIO DIRECTOR	1.00	X	-		-	-	-	0.	0.	<del>\</del>		0.
JOHN WOOTEN EX-OFFICIO DIRECTOR	1.00	v						0.	0.	1		0.
KEN SCHUMACHER	1.00	^				$\vdash$	┢	<u> </u>		<del>'</del>		
IMMEDIATE PAST CHAIRMAN	1.00	x					Ì	0.	0.			0.
1b Total						<b>&gt;</b>		186,088.	0.	. 21	. , 7	85.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d al	bov	e) wi	ho r	eceived more than \$100	,000 in reportable			1
compensation from the organization			_							<del></del>	Yes	No
3 Did the organization list any former officer,	director or tru	stee	ke.	, en	ากได	Vee	or h	nighest compensated er	nolovee on			
line 1a? If "Yes," complete Schedule J for s			, 110	,	٠,٢٠٥	,,,,,	٠	ngnoor componente c	p.oyou u	3		Х
4 For any individual listed on line 1a, is the si			omp	ensa	atior	n and	d otl	her compensation from	the organization			
and related organizations greater than \$15	0,000? <i>If "Yes</i> ,	" со	mple	ete S	Sch	edul	e J f	for such individual		4	X	
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion f	rom	any	y uni	relat	ed organization for serv	ices rendered to	1		
the organization? If "Yes," complete Sched	ule J for such	pers	on							5		X
Section B. Independent Contractors									#100,000 of a			
1 Complete this table for your five highest co	mpensated in	aepe	ende	nt c	ont	racto	ors 1	nat received more than	\$100,000 of compen	sation in	om	
(A)			_					(B)		(C)	)	
Name and business	address					_		Description of s	ervices	Compen		<u>n</u>
							-					
2 Total number of independent contractors (	ncluding but n	ot la	mite	d to	tho	se li	l	l above) who received n	ore than			
\$100,000 in compensation from the organi				0		0						
Maria de la companya della companya della companya della companya de la companya della companya										Form 9	90 (	2009)

62-1289602 Page **10** 

Part IX | Statement of Functional Expenses

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

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21		<del></del>		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22			<del></del>	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
	· · · · · · · · · · · · · · · · · · ·			<del> </del>	
	Benefits paid to or for members				
,	Compensation of current officers, directors,	207,873.			
	trustees, and key employees	201,013.			
•	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)  Other salaries and wages	990,337.	<del>_</del> _		
		990,331.			
}	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	32,785.			
)	Other employee benefits	32,103.			
)	Payroli taxes	96,493.			
	Fees for services (non-employees).	70,473.			
_	Management				
a	T	10,123.			
b	Legal	11,500.	······································		
c	Lobbying	11,500.			
d	Professional fundraising services. See Part IV, line 17			-	<del> </del>
e f	Investment management fees				
	Other				
g	Advertising and promotion				<del></del> -
: }	Office expenses	53,882.			
,	Information technology	3370021	<del> </del>		
	Royalties		··		
5 3	Occupancy				
,	Travel	835.		· <del>-</del> · <del></del>	<b></b> •
	Payments of travel or entertainment expenses			<del></del>	
}	for any federal, state, or local public officials				
)	Conferences, conventions, and meetings	1,008,503.			
,	Interest	2/000/5001			
,	Payments to affiliates				
2	Depreciation, depletion, and amortization	111,196.	<del></del>		. =
: 	Insurance	271,075.			
,	Other expenses. Itemize expenses not covered		<del></del>		
•	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	MITT THOROGOMEONO	98,504.			
a b	MEMBERSHIP SERVICES	69,973.			
_	TAXES AND LICENSES	62,368.			
C	TRADE SHOW EXPENSES	60,388.		<u> </u>	
a	DUES AND SUBSCRIPTIONS	58,433.			
e f	All other expenses	244,278.	<del></del>		-
	Total functional expenses. Add lines 1 through 24f	3,388,546.			
<u>;                                    </u>	Joint costs. Check here J If following	3,300,340.	<u> </u>		
•	SOP 98-2. Complete this line only if the organization	ŀ			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	i		1	

Part X	Balance Sheet			.2896U2 Page
		(A) Beginning of year		(B) End of year
1	Cash · non·interest·bearing		1	
2	Savings and temporary cash investments	<u>1,114,483.</u>	2	631,588.
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	8,616.	4	65,354.
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II			
	of Schedule L		5	
6	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		6	
2 7	Notes and loans receivable, net		7	225 222
7 8	Inventories for sale or use	313,364.	8	295,390.
9	Prepaid expenses and deferred charges	279,830.	9	190,102.
10	a Land, buildings, and equipment. cost or other			
	basis. Complete Part VI of Schedule D 10a 3,983,037.			2 244 562
	b Less. accumulated depreciation 10b 741,469.	3,326,732.		3,241,568.
11	Investments - publicly traded securities		11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets	425 402	14	400 704
15	Other assets See Part IV, line 11	435,403.	15	488,724.
16	Total assets. Add lines 1 through 15 (must equal line 34)	5,478,428.	16	4,912,726. 56,877.
17	Accounts payable and accrued expenses	58,472.	17	30,011
18	Grants payable .	124,023.	18	110,575
19	Deferred revenue	124,023.	19	110,575
20	Tax-exempt bond liabilities		20	
21 22 22	Escrow or custodial account liability. Complete Part IV of Schedule D	<del></del>	21	- <del></del>
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
<u></u>	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	<del></del>	23	
23	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities. Complete Part X of Schedule D	815,699.	25	636,900.
26	Total liabilities, Add lines 17 through 25	998,194.	26	804,352
120	Organizations that follow SFAS 117, check here X and complete		-	
n	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	4,380,234.	27	4,008,374.
g   28	Temporarily restricted net assets		28	
29	Permanently restricted net assets	100,000.	29	100,000
5	Organizations that do not follow SFAS 117, check here			
5	complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32 32 32 32 32 32 32 32 32 32 32 32 32	Retained earnings, endowment, accumulated income, or other funds		32	
ž   33	Total net assets or fund balances	4,480,234.	33	4,108,374.
34	Total liabilities and net assets/fund balances	5,478,428.	34	4,912,726.

Form **990** (2009)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form	1990 (2009) ATTN: MR. EDWARD S. KORCZAR, CAE 62-1263	<u> </u>	_ ra	90 2
Pa	rt XI   Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	<u> </u>	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a	1		
	consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	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?	3a		X

Form **990** (2009)

### **SCHEDULE C**

(Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

		01(c)(4), (5), or (6) organizat	ions Complete Part III	y raxy, then		
	ne of orga		L WOOD FLOORING	ASSOCIATION	Emp	loyer identification number
	J		MR. EDWARD S. KO			62-1289602
Pa	art I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 of	
<u> </u>		<del></del>	ation's direct and indirect politic			
		expenditures	ation's direct and marreet points	zar campaign activities	■ S	<b>.</b>
	Voluntee	•				
3	voluntee	rilouis				
Pa	art I-B	Complete if the org	anization is exempt und	ler section 501(c)		
1	Enter the	amount of any excise tax	ncurred by the organization und	der section 4955	▶ \$	
2	Enter the	amount of any excise tax	ncurred by organization manag	ers under section 4955		i
3	If the org	janization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
<b>4</b> a	Was a co	orrection made?				Yes No
b	o If "Yes,"	describe in Part IV				
Pa	art I-C	Complete if the org	anization is exempt und	ler section 501(c)	, except section 501	(c)(3).
1	Enter the	amount directly expended	by the filing organization for se	ction 527 exempt func	tion activities	·
2	Enter the	amount of the filing organ	zation's funds contributed to ot	ther organizations for s	ection 527	
	exempt 1	unction activities			▶ 9	·
3	Total exe	empt function expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL	-,	
	line 17b				▶ 9	S
4	Did the f	iling organization file Form	1120-POL for this year?			└── Yes └── No
5			nployer identification number (E			
			he amount paid from the filing o			
			vered to a separate political org	anization, such as a se	parate segregated fund or	a political action committee
	(PAC). If	additional space is needed	, provide information in Part IV.			<del></del>
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
					filing organization's	contributions received and promptly and directly
					funds. If none, enter -0-	delivered to a separate
						political organization.
	_					If none, enter -0-
				<del></del>		<u> </u>
						<del> </del>
				1		

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009	ATTN: MR.	EDWARD S.	KORCZAK, CA	E 62-	1289602 Page 2
Part II-A Complete if the org		npt under sectio	on 501(c)(3) and file	ed Form 5768	
(election under sec	<del></del>				
	tion belongs to an affil	<del>-</del> :			
B Check L if the filing organiza	tion checked box A an	d "limited control" pr	ovisions apply.		T
	ts on Lobbying Exper ditures" means amou		.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (g	rass roots lobbying)			
b Total lobbying expenditures to influ	uence a legislative bod	y (direct lobbying)			
c Total lobbying expenditures (add li	nes 1a and 1b)				
d Other exempt purpose expenditure	əs				
e Total exempt purpose expenditure	s (add lines 1c and 1d	)			
f Lobbying nontaxable amount. Enter	er the amount from the	following table in bo	th columns.		
If the amount on line 1e, column (a) o	r (b) is: The lob!	oying nontaxable an	nount is:		
Not over \$500,000		he amount on line 1e			
Over \$500,000 but not over \$1,000		O plus 15% of the ex			
Over \$1,000,000 but not over \$1,5			cess over \$1,000,000.		
Over \$1,500,000 but not over \$17		O plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000	J \$1,000,0	000			
g Grassroots nontaxable amount (er	stor 25% of line 1ft		<del></del>		
h Subtract line 1g from line 1a. If zer	•				
i Subtract line 1f from line 1c. If zero				······	<del></del>
j If there is an amount other than ze	· ·	ine 1), did the organiz	ı zatıon file Form 4720		······································
reporting section 4911 tax for this		, <u></u>			Yes No
		raging Period Under	r Section 501(h)		
			n do not have to comp es 2a through 2f on pa		
	Lobbying Exper	ditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
<ul> <li>b Lobbying ceiling amount</li> <li>(150% of line 2a, column(e))</li> </ul>		. <u>-</u>			
c Total lobbying expenditures		<u> </u>			
d Grassroots nontaxable amount			j		
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 ATTN: MR. EDWARD S. KORCZAK, CAE 62-1289602 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(	a)	(b	<u> </u>
	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or	<u> </u>			
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of.				
Volunteers?		ļ		
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
Media advertisements?				
Mailings to members, legislators, or the public?			<u>-</u> .	
Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?	-	ļ		
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Other activities? If "Yes," describe in Part IV				
j Total Add lines 1c through 1:		ļ		
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>	<del> </del>		
of If "Yes," enter the amount of any tax incurred under section 4912	-		ļ	
of If "Yes," enter the amount of any tax incurred by organization managers under section 4912		<u> </u>		
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Int III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501/o	\ <u>\</u>	otion	
<u>rt III-A</u> Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6).	11011 30 1(0)	)(S), OI SE	CHOII	
			Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		1		2
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		7
"Yes."  Dues, assessments and similar amounts from members	<del></del>	1	<u> </u>	
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol	itical	-		
expenses for which the section 527(f) tax was paid).				
·		2a		
a Cultrent year				
a Current year		1 20		
Carryover from last year	•	2b 2c	<u> </u>	
Carryover from last year	•	2c		
Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	· excess			
Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the 6		2c		
Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the educes the organization agree to carryover to the reasonable estimate of nondeductible lobbying an		2c 3		
Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the 6		2c		

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization

NATIONAL WOOD FLOORING ASSOCIATION ATTN: MR. EDWARD S. KORCZAK, CAE

Employer identification number 62-1289602\_

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Fund	is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpos	e conferring
	ımpermissible private benefit?		Yes No
Par	rt II Conservation Easements. Complete if the org	anization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or pl	leasure) Preservation of an h	nistorically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the forr	m of a conservation easement on the last
	day of the tax year.		<del></del>
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	• •	2c
d	Number of conservation easements included in (c) acquired a		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by t	ne organization during the tax
_	year >	annual in Innated N	
4	Number of states where property subject to conservation eas		_ .s
5	Does the organization have a written policy regarding the per	- '	Yes No
	violations, and enforcement of the conservation easements it Staff and volunteer hours devoted to monitoring, inspecting,		
6 7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
0	and section 170(h)(4)(B)(ii)?	e satisfy the requirements of section 17	Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expen	
Ū	include, if applicable, the text of the footnote to the organizat		
	conservation easements		<b>3</b>
Pai	rt 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	
	-		
1a	If the organization elected, as permitted under SFAS 116, not	t to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of p	public service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these if	tems	
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, or	r research in furtherance of public servi	ce, 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 trea		cial gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items.	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2009

		MR. EDWARD								Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, His	storical Tr	easures	or Othe	<u>r Simil</u>	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	is, che	ck any of the	following tl	hat are a sig	gnificant	use of its	collection	items
	(check all that apply):									
а	Public exhibition	d	ı 🗀	Loan or exc	hange prog	grams				
b	Scholarly research	е	. $\square$	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how	they further tl	he organiza	ation's exen	npt purp	ose in Par	t XIV.	
5	During the year, did the organization solicit o	r receive donations	of art, I	historical trea	sures, or o	ther sımılar	assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	the org	anization's co	ollection?	_			Yes	□ No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if o	rganization ar	nswered "Y	es" to Forn	n 990, Pa	art IV, line	9, or	
	reported an amount on Form 990, Par	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary fo	r contribution	s or other	assets not i	ncluded			
	on Form 990, Part X?		-						Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	g table <sup>.</sup>						
	· · ·								Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete r	f the organization ar	swere	d "Yes" to Fo	rm 990, Pa	rt IV, line 10	)			
	•	(a) Current year	(b)	Prior year	(c) Two y	ears back (	<b>d)</b> Three	years back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
9	End of year balance									
2	Provide the estimated percentage of the year	r end balance held a	as.				•			
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment	%								
За	Are there endowment funds not in the posse	ssion of the organiz	ation t	hat are held a	nd adminis	stered for th	e organi	zation		
	by:	•								Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sch	edule R?					3b	
4	Describe in Part XIV the intended uses of the	· · · · · · · · · · · · · · · · · · ·								
Pai	rt VI   Investments - Land, Building				, Part X, lin	e 10.				
	Description of investment	(a) Cost or c	ther	(b) Cost	or other	(c) Ac	cumulat	ed	(d) Book	value
	•	basis (investr		1 , ,	(other)		reciation			_
1a	Land		•	64	9,461	•			649	,461.
b	Buildings				3,576		41,4	69.		,107.
	Leasehold improvements									
	Equipment		_							
_	Other						-			

3,241,568.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

		ASSOCIATION		1200602 B 1
Schedule D (Form 990) 2009 ATTN: MR.  Part VII Investments - Other Securities.	EDWARD S. K			L289602 Page
(a) Description of security or category	368 FOITH 950, FAIT A, III	10 12	(c) Method of valuatio	n·
(including name of security)	(b) Book value	Cos	st or end-of-year market	
Financial derivatives	<del></del>		<u> </u>	
•	· · · · · · · · · · · · · · · · · · ·	<del></del>		
Closely-held equity interests				· · · · · · · · · · · · · · · · · · ·
Other	<del></del>			
	<del></del>			
· · · · · · · · · · · · · · · · · · ·				
				<del></del>
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, I	ine 13.	(-) Mathad of valuation	
(a) Description of investment type	(b) Book value	Cov	<b>(c)</b> Method of valuatio st or end-of-year marke	
	<del> </del>		ot or one or your marks	· value
		<del></del>		···
			<del></del>	
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, I			<del></del>	(b) Book value
	(a) Description			
CASH VALUE OF LIFE INSURANCE	<u> </u>	· - <del></del> -		56,720
DUE FROM RELATED PARTY				331,205
CASH RESTRICTED		·		100,799
		<del></del>		<del>_</del>
	<del></del>			
		·		
		·		
				400 704
Total. (Column (b) must equal Form 990, Part X, col (B)				488,724
Part X Other Liabilities. See Form 990, Part	X, line 25.	(h) Amount	<del></del>	
1 (a) Description of liability		(b) Amount		
Federal income taxes		200 710		
DEFERRED CONVENTION REVENUE		389,718.		
DEFERRED SEMINAR REVENUE		15,360.		
DEFERRED MAGAZINE REVENUE		78,648.	i	

DEFERRED TRADE SHOW REVENUE 8,745. 84,429. DEFERRED COMPENSATION AGREEMENT 60,000. REVOLVING LINE OF CREDIT 636,900. Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) 

2. FIN 48 Footnote. 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.

932053 02-01-10

Schedule D (Form 990) 2009

	•	NATIONAL WOOD FLOORIN	NG ASSO	ሮፒ ልሞፐ (ነ	J				
Sche	dule D (Form 990) 2009	ATTN: MR. EDWARD S.			•		62-1	L289602	Page 4
Par		of Change in Net Assets from For	m 990 to	Audited Fi	nancial S				
1	Total revenue (Form 990, Pa				1			3,016	686.
2	Total expenses (Form 990, F	• • • • • • • • • • • • • • • • • • • •		•	2	_		3,388	
3		ar. Subtract line 2 from line 1			3				,860.
4	Net unrealized gains (losses				4				
5	Donated services and use o				5				
6	Investment expenses				6				
7	Prior period adjustments				7				
8	Other (Describe in Part XIV.)				8				
9	Total adjustments (net) Add				9				0.
10		ar per audited financial statements. Combin	ne lines 3 and	9	10			-371	,860.
	t XII Reconciliation of	of Revenue per Audited Financial	Statemen	nts With R	evenue p	er R	eturn		
1	Total revenue, gains, and ot	her support per audited financial statement	s				1	3,249	,962.
2		but not on Form 990, Part VIII, line 12 <sup>.</sup>							
а	Net unrealized gains on inve			2a		i			
b	Donated services and use o			2b			İ		
c	Recoveries of prior year grain			2c					
d	Other (Describe in Part XIV)			2d	233,2	76.			
e	Add lines 2a through 2d						2e	233	,276.
3	Subtract line 2e from line 1						3	3,016	,686.
4		990, Part VIII, line 12, but not on line 1							
а	Investment expenses not in	cluded on Form 990, Part VIII, line 7b		4a					
b	Other (Describe in Part XIV.)			4b			ŀ		
c	Add lines 4a and 4b						4c		0.
5	Total revenue Add lines 3 a	nd <b>4c.</b> (This must equal Form 990, Part I, lin	e 12)				5	3,016	,686.
Pa	t XIII Reconciliation of	of Expenses per Audited Financia	I Stateme	nts With E	xpenses	per	Retu		
1	Total expenses and losses p	per audited financial statements					1	3,621	<u>,822.</u>
2	Amounts included on line 1	but not on Form 990, Part IX, line 25.							
а	Donated services and use of	f facilities		2a					
b	Prior year adjustments			2b					
С	Other losses			2c					
d	Other (Describe in Part XIV)			2d	<u>233,2</u>	<u>76.</u>			
е	Add lines 2a through 2d						2e		<u>,276.</u>
3	Subtract line 2e from line 1			•		į	3	3,388	,546.
4	Amounts included on Form	990, Part IX, line 25, but not on line 1.							
а	Investment expenses not in	cluded on Form 990, Part VIII, line 7b		4a					
b	Other (Describe in Part XIV.)			_4b					_
С	Add lines 4a and 4b						4c		0.
_5_		and 4c. (This must equal Form 990, Part I, I	line 18 )				5	3,388	<u>,546.</u>
	rt XIV Supplemental II		<del>.</del>						
		descriptions required for Part II, lines 3, 5, a							4; Part
		nes 2d and 4b; and Part XIII, lines 2d and 4b							NT.
PAI	RT XII, LINE 2D	: AMOUNT REPRESENTS CO	OST OF	GOODS	א מיזה?	O.I.	INC	ר משמחים	<u> </u>
INC	COME PER THE FI	NANCIAL STATEMENTS BU	T INCLU	DED PE	R THE	TAX	RE'	TURN.	
PAI	RT XIII, LINE 2	D: AMOUNT REPRESENTS	COST OF	GOODS	SOLD	INC	LUD	ED IN	_
EX.	PENSES PER THE	FINANCIAL STATEMENTS	BUT INC	LUDED	IN INC	OME	PE	R THE T.	AX
RE'	rurn.								

Schedule D (Form 990) 2009

### SCHEDULE J (Form 990)

### **Compensation Information**

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

NATIONAL WOOD FLOORING ASSOCIATION

ATTN: MR. EDWARD S. KORCZAK, CAE

Employer identification number 62-1289602

Part I **Questions Regarding Compensation** Yes No 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 First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are 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 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, 2 trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 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 X Written employment contract Compensation committee X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization. X a Receive a severance payment or change-of-control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X 4c 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 section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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 5a a The organization? 5b b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 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: 6a a The organization? 6b b Any related organization? If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments 7 not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the 8 initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

Regulations section 53 4958-6(c)?

ATTN: MR. EDWARD S. KORCZAK, CAE

Schedule J (Form 990) 2009

62-1289602

Page 2

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.

		(B) Breakdown of W-2 and/or 1099-MISC compensation	r 1099-MISC (	compensation	(C)	(D)	(E) Total of columns	(F)
( <b>A</b> ) Name		(i) Base (ii) Bonus & compensation		(iii) Other reportable compensation	other deferred	benefits	(B)(j-(D)	reported in prior Form 990 or Form 990-EZ
	(3)	186,088.			21,785.		207,873.	
EDWARD S. KORCZAK	(1)							
	(1)							
	(ii)							
	3							
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Schedule J (Form 990) 2009

### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

NATIONAL WOOD FLOORING ASSOCIATION Employer identification number Name of the organization EDWARD S. KORCZAK, 62-1289602 MR. FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: USERS TO THE USES AND BENEFITS OF WOOD FLOORING. FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS OF THE GOVERNING BOARD ARE ELECTED BY THE MEMBERS OF THE ASSOCIATION. FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS PREPARED BY INDEPENDENT CPA FIRM AND REVIEWED BY THE EXECUTIVE DIRECTOR AND THE ACCOUNTING MANAGER. AFTER FILING IT IS AVAILABLE TO ALL MEMBERS OF THE GOVERNING BOARD UPON REQUEST. FORM 990, PART VI, SECTION C, LINE 19: AVAILABLE UPON REQUEST.

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships SCHEDULE R (Form 990)

OMB No 1545-0047

ber .

Complete if the organization answered Test to rorm sec, rail iv, line ss, 34, 55, 56, 01 57.  ▶ Attach to Form 990. ► See separate instructions.	ASSOCIATION Employer identification number 62-1289602	in answered "Yes" to Form 990, Part IV, line 33.)	(b) (c) (d) (e) (f)  Legal domicile (state or Total income End-of-year assets Direct controlling foreign country)			Identification of Related Tax-Exempt Organizations (Complete of the organization answered "Yes" to Form 990. Part IV, line 34 because it had one or more related tax-exempt
the Treasury	Name of the organization NATIONAL WOOD FLOORING ASSOCIATION ATTN: MR. EDWARD S. KORCZAK, CAE	Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	(a) (b) Name, address, and EIN Primary activity Legal of disregarded entity for			Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Y
Department of Internal Reven	Name o	Part				

Direct controlling entity status (if section Public charity 501(c)(3)) <u>e</u> Exempt Code section Legal domicile (state or foreign country) ESTABLISH STANDARDS FOR Primary activity NWFA CERTIFIED PROFESSIONALS - 43-1786967 Name, address, and EIN of related organization

501 (C) (6) 501 (C) (3) MISSOURI MISSOURI CONDUCT SCIENTIFIC RESEARCH WOOD FLOORING INSTALLERS, SANDERS, & FINISHERS FOR PUBLICATIONS. 43-1938473, 111 CHESTERFIELD INDUSTRIAL NWEA INDUSTRY RESEARCH FOUNDATION -111 CHESTERFIELD INDUSTRIAL BLVD. BLVD., CHESTERFIELD, NO 63005 CHESTERFIELD, MO 63005

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

23

Schedule R (Form 990) 2009

MR. EDWARD S. KORCZAK, ATTN: Schedule R (Form 990) 2009

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) PartIII

Page 2

62-1289602

managing partner? Yes No ieneral or Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 9 Ξ Code V-UBI amount in box 120 of Schedule K-1 (Form 1065) Share of end-of-year assets Ô Disproportionate allocations? Ŷ Ξ Share of total income Yes Share of end-of-year assets Type of entity (C corp, S corp, or trust) ত্ত Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Ē (e) Legal domicile (state or foreign country) છ Direct controlling entity Primary activity ন্ত 9 Legal domicile (state or foreign country) Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV

Percentage ownership 8 Schedule R (Form 990) 2009 o o. C 885 9 24 CUSTOMER SERVICE CALL CENTER 111 CHESTERFIELD INDUSTRIAL BLVD. INC. - 20-8195322 63005 CHESTERFIELD, MO NWEA SERVICES,

932162 02-04-10

## NATIONAL WOOD FLOORING ASSOCIATION ATTN: MR. EDWARD S. KORCZAK, CAE

Schedule R (Form 990) 2009

Page 3

62-1289602

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

Schedule R (Form 990) 2009	Sche	25
1		(9)
		(5)
		(4)
		(3)
		(2)
122,967.	×	1) NWFA CERTIFIED PROFESSIONALS
(c) Amount involved	(b) Transaction type (a-r)	(a) Name of other organization(s)
	ansaction thresholds	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
14 X X		<ul> <li>q Other transfer of cash or property to other organization(s)</li> <li>r Other transfer of cash or property from other organization(s)</li> </ul>
ot dt		<ul> <li>Reimbursement paid to other organization for expenses</li> <li>Reimbursement paid by other organization for expenses</li> </ul>
E t	:	m Sharing of paid employees
:	. ;	<ul> <li>Leader of reminder, equipment, or each of some state of some state of some state of services or membership or fundraising solicitations by other organization(s)</li> <li>Performance of services or membership or fundraising solicitations by other organization(s)</li> </ul>
;		
th th		h Exchange of assets
# X X	:	f Sale of assets to other organization(s)
te 1d X	:	<ul> <li>d Loans or loan guarantees to or for other organization(s)</li> <li>e Loans or loan guarantees by other organization(s)</li> </ul>
-	•	c Gift, grant, or capital contribution from other organization(s)
1a X		<ul> <li>a Receipt of (i) interest (ii) annurties (iii) royalties or (iv) rent from a controlled entity</li> <li>b Gift, grant, or capital contribution to other organization(s)</li> </ul>
Yes No.		Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
⊢		

62-1289602

Page 4

NATIONAL WOOD FLOORING ASSOCIATION ATTN: MR. EDWARD S. KORCZAK, CAE

Schedule R (Form 990) 2009

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile	(d) Are all partners section 501(c)(3)	(e) Share of end-of-	Disproportionate	(g) Code V-UBI amount in box 20	(h) General or managing
ט פוויול		- 1	Yes No			of Schedule K·1 (Form 1065)	Yes No
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						Schedule R (Form 990) 2009	1 990) 2009

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### STATEMENT 3

## National Wood Flooring Association PROPERTY AND EQUIPMENT

	2009	2008
Land	649,461	649,461
Building and improvements	2,890,256	2,890,256
Technical training equipment	43,238	43,238
Office furniture and equipment	258,125	254,872
Computer equipment and software	118,382	112,502
Automobiles	23,575	<u> </u>
	3,983,037	3,950,329
Less: Accumulated depreciation	(741,469)	(623,597)
Total Property and Equipment	3,241,568	3,326,732