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Short Form Return of Organization Exempt From Income Tax

2009

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

А	For the	2009 calenda	ar year,	or tax year beginning September 1 , 2009, and en		ugust		, 20 10
В	Check if a	k if applicable Please C Name of organization			D Emp	loyer id	entificati	ion number
=	Address change		use IRS label or	Carolina Amateur Hockey Association		31-1709238		
=	Name ch	-	print or Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telep			ohone n	umber	
_	Initial retu Terminat		type. See	PO Box 1294		843-514-1901		
片			Specific	City or town, state or country, and ZIP + 4	E Gro	un Eve	Exemption	
=	Amended	a return ion pending	instruc- tions.	Wake Forest, NC 27588-1294	•	nber I		
느			L					. 🗖 🗸
	• Sec	tion 501(c)(3)			_		☑ Ca	ish
			a coi	npleted Schedule A (Form 990 or 990-EZ).	Other (specific			
					Check ► 🗹	if the	organiza	tion is not
	Websi			ahockey.org	required to at	tach S	chedule	B (Form 990,
<u>J 1</u>	Гах-ех	empt status (check o	nly one) — 🗹 501(c) (3) ◀ (insert no.) 🔲 4947(a)(1) or 🔲 527	990-EZ, or 99	0-PF).		
K	Check	▶ ☐ If th	e organı	zation is not a section 509(a)(3) supporting organization and its gross receip	ots are normally	not m	ore than	\$25,000 A
	Form 9			turn is not required, but if the organization chooses to file a return, be sure				
	Add line	es 5b, 6b, and 7	b, to line	9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Fo	orm 990-EZ	> \$	7	17,312.00
	art I			enses, and Changes in Net Assets or Fund Balances (Se		ction		
	1	•		s, grants, and similar amounts received		1		7,003
	2		_	evenue including government fees and contracts		2		39,688
	3	-				3		30,417
				and assessments		4		204
	4	Investmen				4	 	204
	5a			m sale of assets other than inventory		4	ĺ	
	b			er basis and sales expenses		4	ĺ	
a)	C			n sale of assets other than inventory (Subtract line 5b from line 5a)		<u>5c</u>		0
Revenue	6	Special event	s and act	rivities (complete applicable parts of Schedule G) If any amount is from gaming, che	eck here ► 🔲		ĺ	
	a	Gross reve	enue (no	ot including \$ of contributions			ĺ	
		reported o	n line 1) 6a	C)	ĺ	
_	b	Less: direc	t expe	nses other than fundraising expenses 6b			ĺ	
	C		-	ss) from special events and activities (Subtract line 6b from line 6a	1)	6c	Ì	0
	7a		-	rentory, less returns and allowances	.,	-		
	Ь					1	ł	
	C	Gross prof	it or (lo	ss) from sales of inventory (Suttings) line the from line 7a)	<u>_</u>	7.	ł	0
ĭ	1 -	Other reve	מון זט זו	ss) from sales of inventory (Subtract line b from line 7a) escribe		7c		
<i>;</i>	8					8	 	
<u></u>	9	1 otal reve	nue. A	r amounts paid (attach schedule).	<u> </u>	9	ļ	77,312
3	10	Grants and	simila	r amounts paid (attach schedule) 3 2010		10		10,000
9	11					11		0
es	12	Salaries, o	ther co	mpensation, and employee benefits		12		0
benses	13	Professional fees and other payments to independent contractors						0
_								0
Ω	15	Printing, publications, postage, and shipping						0
	16	Other expenses (describe See attached Statement 1.						73,967
	17	Total expenses. Add lines 10 through 16						83,967
'	18	Excess or	(deficit	for the year (Subtract line 17 from line 9)		17		(6,655)
ë	19			d balances at beginning of year (from line 27, column (A)) (mus		<u> </u>		
SS		end-of-vea	ar figure	e reported on prior year's return)		19	ĺ	97,143
Net Assets	20			net assets or fund balances (attach explanation)		20	 	0,1.40
ž	21			d balances at end of year. Combine lines 18 through 20				<u>_</u>
.	art II	Ralance	Shor	ets. If Total assets on line 25, column (B) are \$1,250,000 or more,	►	21		90,488
	artii	Balance	C SITE					
_				(See the instructions for Part II.)	(A) Beginning of		<u> </u>) End of year
2				vestments		97,143		90,488
2	3 L	and and build	dings .				23	0
2	4 0	Other assets (describ	pe▶)			24	0
2	5 T	otal assets				97,143		90,488
2	6 T	otal liabilitie	s (desc	ribe ▶		0	26	0
2	<u>7 N</u>	let assets or	fund b	palances (line 27 of column (B) must agree with line 21)		97,143	27	90,488
-				···				

Par	Statement of Program Service Accom	nlishments (See the instri	ictions for Part III	1)		Evnence		
	t is the organization's primary exempt purpose?				/Regu	Expenses ared for section		
	501(c)(3) and 501(c)(4)						
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise of an annumber of persons benefited, and other relevant information for of persons benefited, and other relevant information for of persons benefited.								
	program title.	percent benefica, and c	and rolovally lines	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4947(for ot	a)(1) trusts, optional		
	 	to are held coveral times thre	ughout the year to		10.01			
28	Iron Man and Adult Tournaments - These tournamen		oughout the year to		·			
	foster and promote amateur hockey for adult member				.			
						0.000		
		includes foreign grants, che		. ▶ Ц	28a	3,960		
29	Player Development Tryouts - These tryouts are to s		· · · · · · · · · · · · · · · ·		.			
	membership for the opportunity to tryout at the Sout		ment event and		.			
	then advance to the USA Hockey Development Camp	. '						
		includes foreign grants, che			29a	15,582		
30	Coaching Education - Coaching Certification clinics	.						
	maintain the proper level of certification to continue	coaching.			.			
	(Grants \$) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	30a	5,105		
31	Other program services (attach schedule)							
	(Grants \$) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	31a	59,320		
32	Total program service expenses (add lines 28a t			🕨	32	83,967		
Par				ted. (See th				
·		(b) Title and average	(c) Compensation	(d) Contribu	tions to	(e) Expense		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee bene deferred comp		account and other allowances		
Kevi	n Universal	GOVERNO TO POSITION		deletted delity	30113011011	other anomarious		
	4 Cokesbury Ln., Raleigh, NC 27518	President 10 Hours	o	}				
	Fidishun							
	Dornoch Dr., Greensboro, NC	Vice President 5 Hours						
	an Wilkerson							
		Secretary 2 Hours						
	Red Banks Rd., Greenville, NC 37858		0					
	Spitz	Treasurer 6 Hours	_					
301	King Charles Cir., Summerville, SC 29485		0					
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	0-EZ (2009)		<u>Р</u>	age 3
Part	Other Information (Note the statement requirements in the instructions for Part V.)			
00	Dul the association are selected and manifestation and the IDCO If "Vee " ettech a detailed		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of	33		
•	the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but			
	not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.	!		
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section			1
	6033(e) notice, reporting, and proxy tax requirements?	35a		<u> </u>
ь 36	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	ļ <u>-</u>	Η.
00	during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0			
b	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	-	١.	
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		✓
ь 39	If "Yes," complete Schedule L, Part II and enter the total amount involved			
ง ย a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9	:		
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶ 0			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			_
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified		İ	,
	person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40ь		V
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	400		
_	organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c			
_	reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	-	
41	List the states with which a copy of this return is filed. ► North Carolina	400		V
42a		343-51	4-190	1
	Located at ► 301 King Charles Circle Summerville, SC ZIP + 4 ►	2948	5-3435	;
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			No
	account)?	42b	 	├ ✓
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		✓
	If "Yes," enter the name of the foreign country: ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yas	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		1.03	†
	Form 990-EZ	44		/
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	<u></u>	$\bot \checkmark$

Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	section 4947(a)(1) 17(a)(1) nonexempt id 51.	nonexemp charitable	trusts mu	ble trusts only. A ust answer question	II sec ons 46	tion 6-49I	
	Did the organization engage in direct or indirect						Yes	No
	candidates for public office? If "Yes," complete \$	•				46		√
	Did the organization engage in lobbying activities	· ·				47		√
	Is the organization a school as described in section		•			48		
	Did the organization make any transfers to an ex If "Yes," was the related organization a section 5	· ·	_			49a 49b		V
	Complete this table for the organization's five his				officers, directors.		es an	d kev
	employees) who each received more than \$100,0							
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	1	Compensation	(d) Contributions to employee benefit plans & deferred compensation	àc	Exper	and
None								
f	Total number of other employees paid over \$100			0		1		
None	(a) Name and address of each independent contractor	paid more than \$100,000		(b) ⁻	Type of service	(c) Co	mpens	ation
								
d	Total number of other independent contractors e	each receiving over \$	100,000 .	.▶	0		-	
	Under penalties of penury, I declare that I have examine and belief, it is true, correct, and complete Declaration	ed this return, including acc of preparer (other than off	companying sc icer) is based o	hedules and a	statements, and to the be on of which preparer has	st of my	y know owledg	ledge Je
Sign Here	Signature of officer Joseph Spitz Treasurer Type or print name and title				Date //////	O		
Paid	Preparer's signature	D	İs	Check if self-	Preparer's identifying nu	mber (Se	 e instru	ctions)
Prepare Use On	I Firm S name (or k	L			EIN ►			
May th	le IRS discuss this return with the preparer shows	n above? See instruc	tions	<u> </u>	▶	Yes		No (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

Open to Public

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Inspection

Name of the organization Employer identification number Carolina Amateur Hockey Association, Inc. 31 1709238 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/2 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a 🗌 Type I **b** Type II c Type III-Functionally integrated **d** Type III-Other e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes Yes No Yes No No

Pa	Support Schedule for Org (Complete only if you chec	janizations l ked the box	Described in	Sections 17	'0(b)(1)(A)(iv)	and 170(b)(1)(A)(vi)
Sec	tion A. Public Support	nod tilo box	011 1110 0, 7,	or o or rare r	•,		
_	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5 6	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
	tion B. Total Support						<u> </u>
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4		(-,	(0, ====	(4) 2000	(0) 2000	(1) 10101
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on				:		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10 .						<u> </u>
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for organization, check this box and stop he	<u>re .</u>	<u>.</u> , .	id, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)
<u>Sec</u>	tion C. Computation of Public Sup	port Perce	ntage				
14	Public support percentage for 2009 (line			l, column (f))		14	%
15	Public support percentage from 2008 Sch					15	%
	33% % support test—2009. If the organization qualifies	as a publicly	supported organ	nization			▶ 🗌
b	33% % support test—2008. If the organization qua	zation did not d lifies as a publ	check a box on icly supported o	line 13 or 16a, organization .	and line 15 is	33% % or more	, check this ▶ □
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circums organization meets the "facts-and-circums"	acts-and-circui	nstances" test,	check this box	and stop here.	Explain in Part	IV how the
b 18	10%-facts-and-circumstances test – 2008 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	. If the organiza acts-and-circun nces" test The	tion did not chech stances" test, co organization qua	ck a box on line theck this box a difies as a public	13, 16a, 16b, o and stop here cly supported or	r 17a, and line 1 Explain in Part ganization	I5 is 10% or IV how the

Part-III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	Section A. Public Support								
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	97,512	96,193	69,211	59,319	37,420	359,655		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	0	0	101,381	29,990	39,688	171,059		
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0		
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0		
6	Total. Add lines 1 through 5	97,512	96,193	170,592	89,309	77,108	530,714		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	0	0	0	0	0	0		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	o	0	0	0	0		
_	amount on line 13 for the year	0	0	0	0	0	0		
8	Public support (Subtract line 7c from line 6.)						530,714		
Sec	tion B. Total Support						300,714		
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
9	Amounts from line 6	97,512	96,193	170,592	89,309	77,108	530,714		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	618	1,142	666	309	204	2,939		
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0		
c	Add lines 10a and 10b	618	1,142	666	309	204	2,939		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0		
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0		
13	Total support. (Add lines 9, 10c, 11, and 12.)	98,130	97,335	171,258	89,618	77,312	533,653		
14	First five years. If the Form 990 is for to organization, check this box and stop I			nd, third, fourth			on 501(c)(3) ▶ □		
Sec	tion C. Computation of Public Sup								
15	Public support percentage for 2009 (lin	e 8, column (f)	divided by lin	e 13, column	(f)	15	99.44 %		
16_	Public support percentage from 2008 S			<u> </u>	· · · · · · · · · · · · · · · · · · ·	16	99.41 %		
Sec	tion D. Computation of Investmen	nt Income Pe	ercentage						
17	Investment income percentage for 2009			-	olumn (f)) .	17	.55 %		
18	Investment income percentage from 20					18	.59 %		
19a	17 is not more than 331/3 %, check this be	ox and <mark>stop he</mark>	re. The organi	zation qualifies	as a publicly s	supported orga	ınızation 🕨 🛭		
b	33% % support tests – 2008. If the organ line 18 is not more than 33% %, check this	ization did not soon	check a box on here. The orgai	i line 14 or line nization qualifie	19a, and line 1 s as a publicly	6 is more than supported orga	33⅓ %, and nization ► □		
20_									

Chedule A (F	Jim 990 01 990-EZ) 2009					Page 🕶
Part.IV	Supplemental Information. Part II, line 17a or 17b; and	Complete this Part III, line 12	part to provide Provide any ot	the explanation her additional in	ns required by formation. Se	
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CAROLINA AMATEUR HOCKEY ASSOCIATION FORM 990-EZ YE AUGUST 31,2010 EIN:31-1709238

STATEMENT 1 PART 1 LINE 16	
Adult Tournaments	800
CAHA Annual Meeting	2,419
Coaching Education	5,105
Girls/Women	8,150
Iron Man Tournament	3,160
Other Miscellaneous Expenses	670
Player Development Tryout	15,582
SE District Expenses	19,100
SE District Membership Fee	1,950
Telephone/Conference Calls	4,244
Tournament Committee	10,000
USA Hockey Conference	1,899
Youth Player Development	888
Total Program Services Expenses	73,967

CAROLINA AMATEUR HOCKEY ASSOCIATION FORM 990-EZ YE AUGUST 31,2010 EIN.31-1709238

PART III, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS LINE 31 - Other program services		
Girls and Womens Hockey - Clinics and Tournaments are held throughout the season specifically for the development and growth of girls and women hockey players CAHA womens team practice and games expenses.	\$	8,150
Southeast District Fee and Miscellaneous Expenses	\$	2,620
Telephone, postage, and meetings	\$	8,562
Grant Expense - Player Development Grants are given to members for programs that provide for player development and to grow the sport of hockey	\$	10,000
Youth Tournaments - CAHA sponsorship of end of season championship tournaments hosted by the Carolinas Hockey League in support of member teams	\$	10,000
Youth Player Development - Provide oversight and support of player development activities within CAHA	\$	888
Girls, Womens Southeast District Tournament - This tournament is held for all girls and womens teams in the Southeast District with winning teams advancing to the USA Hockey National Tournament	\$	19,100
	_	59,320