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Farm

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)

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

OMB No 1545-0047 2010 Open to Public Inspection

<u>A</u>	For the 2010 ca	alendar year, or tax year beginning $07/01/10$, and ending $06/30/$	11		
В	Check if applicable:	C Name of organization Professional Association of Small		D Empl	oyer identification number
	Address change	Business Accountants		1	
	Name change	Doing Business As		36-	-4486314
	Initial return	Number and street (or P O. box if mail is not delivered to street address)	Room/suite		none number
\sqcap	Terminated	P.O. Box 4350		630)-978-6300
		City or town, state or country, and ZIP + 4			
	Amended return	Naperville IL 60567	. ,	G Gross rec	eipts\$ 305,833
	Application pending	F Name and address of principal officer	H(a) Is this a	group return for	affiliates? Yes X No
				-	<u> </u>
			H(b) Are all a		st (see instructions)
_	Tax avanat statu	s 501(c)(3) X 501(c) (6) ◀ (insert no) 4947(a)(1) or 527	⊣ "`	io, attaon a n	or (occ manualions)
<u> </u>	Tax-exempt status Website: ▶ N				
<u>, </u>	Form of organization		H(c) Group	exemption nu	
		Trust Association Other ► L	. Year of formation		M State of legal domicite
		escribe the organization's mission or most significant activities			· · · · · · · · · · · · · · · · · · ·
_		ociation formed to develope and exchange information	 n pertaini	na to	
일		agement and marketing of accounting firms.	n ber carnir	ng co	•• •
3 1 2012 Activities & Governance		genero and marketing of accounting films.	•		
Ž	2 Check thi	is box ▶ if the organization discontinued its operations or disposed of more than	 25% of its not ass	oto	
ğ		of voting members of the governing body (Part VI, line 1a)	25% Of its fiet ass	1 . 1	
Ç, S)	of independent voting members of the governing body (Part VI, line 1b)		3 4	
S==	L	mber of individuals employed in calendar year 2010 (Part VI, line 19)	•	<u> </u>	
—;	1			5	· · · ·
ౡ₹	I .	nber of volunteers (estimate if necessary) elated business revenue from Part VIII, column (C), line 12		6	
	B .	• • • • • • • • • • • • • • • • • • • •		7a	C
NAU NAU	D Net uniei	lated business taxable income from Form 990-T, line 34	Prior Ye	. 7b	Current Year
	8 Contribut	tions and grants (Part VIII, line 1h)	1110110	1,100	1,450
⊞		consider sevenus (Port VIII line 2-)	25	8,884	276,675
SCANNED		ent income (Part VIII, inite 29)	31 	8,942	2,936
Zk		rent income (Part VIII, column (A), lines 3, 4, and 7d) $ C JAN 2 3 2012 C C C C C C C C C $	8	0,807	24,772
\$		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	34	9,733	305,833
须		nd similar amounts paid (Part IX, column (A), lines 1–3)	1	- 7 . 5 5	300,000
		paid to or for members (Part IX, column (A), line 4)	:	,	
"		other compensation, employee benefits (Part IX, column (A), lines 5–10)			
penses		onal fundraising fees (Part IX, column (A), line 11e)			
De l		draising expenses (Part IX, column (D), line 25) ▶	医阿尔克斯 点部 的		建设等于1度增加。
찚		penses (Part IX, column (A), lines 11a–11d, 11f–24f)	33	4,602	337,195
		venses. Add lines 13–17 (must equal Part IX, column (A), line 25)		4,602	337,195
		less expenses Subtract line 18 from line 12		5,131	-31,362
5 8	10 110101120	Total Superior Substitute To Holl III 12	Beginning of Cu		End of Year
Net Assets or Fund Balances	20 Total asse	ets (Part X, line 16)	34	9,912	308,210
d As	21 Total liabi	ilities (Part X, line 26)		1,090	750
꽃들	22 Net asset	ts or fund balances. Subtract line 21 from line 20		8,822	307,460
		gnature Block			
Ur	nder penalties of pe	erjury, I declare that I have examined this return, including accompanying schedules and statements,	and to the best of my	knowledge a	and belief, it is
		mplete Declaration of preparer (other than officer) is based on all information of which preparer has a			,
	1	YII WALFON I JUNIE (A)			
Sig	ın sı	signature of office		Date	
Hei		Matt Patrick Trea	surer	121	5/2011
		ype or print name and title			7 11
	Print/Typ	pe preparer's name Preparer's signature	Date	Check	If PTIN
Paid	Darlen	e Belter Mulny SI	12/09	1	ployed P00738399
Prep	parer Firm's na	m- yya a lasti ana		rm's EIN ▶	36-4334555
Use	Only	PO Box 4350	1		
	Firm's ad	17 40.545	١,	Phone no	630-978-6300
May		s this return with the preparer shown above? (see instructions)			Yes No
		duction Act Notice and the compute instructions			- 000

	om 900 (2009) Professional Association of Small 36-4486314 Page 2 Part III Statement of Program Service Accomplishments									
<u>Ра</u>					•					
A	ssociatio		develope and exchange in develope and exchange in develope accounting firms.	nformation pertaining	to					
2	the prior Form 990 or 990-EZ?									
•		these new services on								
3	services?									
4		these changes on Sch mpt purpose achieveme	edule O ents for each of the organization's three largest pro	gram services by expenses						
			ations and section 4947(a)(1) trusts are required to							
	allocations to other	ers, the total expenses,	and revenue, if any, for each program service repr	orted						
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)					
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)					
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)					
4d	Other program s	ervices (Describe in Sc	chedule O)	2000						
	(Expenses \$		including grants of \$) (Revenue \$)					
<u>4</u> e	Total program s	ervice expenses 🕨								

			Vaa	Na
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	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	<u> </u>		
•	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)			
3		5		x
c	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III			
6	Did the organization maintain any donor advised funds or any 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,"	_		х
_	complete Schedule D, Part I	6	 -	A
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	 -	<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			7.7
	complete Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9	ļ	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or		ĺ	
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,		l	Ì
	VII, VIII, IX, or X as applicable		Х	<u> </u>
•	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		1	
	of its total 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		İ	
	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 related 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	ĺ		
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		ĺ	i i
•	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		Ì	[
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? Yes No	ļ		
	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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Ĺ	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	Ĺ	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	<u> </u>	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	L_	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on]	j	}
	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
		For	n 990	(2009)

Form	990 (2009) Professional Association of Small 36-4486314		Р	age 4
_ <u>Pa</u>	art IV Checklist of Required Schedules (continued)		,	<u>'</u>
	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	ł		
	in the United States on Part IX, column (A), line 12 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, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	L	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	1		}
	employees? If "Yes," complete Schedule J	23	L	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	•	ĺ	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	}		<u> </u>
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	L	<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			ŀ
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			Ì
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified 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	25b	}	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	1	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	Ì		Ì
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a)	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
•	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,		ĺ	1
	Part IV	28c)	x
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 contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31	1	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
-	Schedule N, Part II	32	1	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
••	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		T-	
•	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		1 -	<u> </u>
	Schedule R, Part V, line 2	35	}	x
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	1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		 	
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		
	The state of the contraction of	ı	1	1

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

Form **990** (2009)

Part Ví

<u> </u>	it v Statements Regarding Other IRS Filings and Tax Compliance	·			
				Yes	No
1a					
	U.S. Information Returns Enter -0- if not applicable	1a	-		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	_ 1b	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	оптавіе	1.		х
•	gaming (gambling) winnings to prize winners?	1 [_1c		
2a					
	Statements, filed for the calendar year ending with or within the year covered by this return		ا مد		i
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see		_2b		<u> </u>
	· · · · · · · · · · · · · · · · · · ·				
3a	instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered	4 by			
Ja	this return?	a by	3a		x
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
b 4a		uthority	30		
40	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account acc	•			
	account)?	on Clai	4a		x
b	If "Yes," enter the name of the foreign country		-40		
U	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign 8	3ank			1
	and Financial Accounts	Sum			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ion?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega				
•	Prohibited Tax Shelter Transaction?	g	5c		
6a		e			
	organization solicit any contributions that were not tax deductible?		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or			
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				_
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods	Ì		
	and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s			
	required to file Form 8282?		7с		
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 per-	ersonal			
	benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ct?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as			
	required?		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
	organization, have excess business holdings at any time during the year?		8	ļ	
9	Sponsoring organizations maintaining donor advised funds.		1		
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter	11			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	\dashv		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
11	Section 501(c)(12) organizations. Enter	14.1			1
a	Gross income from members or shareholders	11a	-		1
b	Gross income from other sources (Do not net amounts due or paid to other sources against	445			
12-	amounts due or received from them) Section 4947(a)(4) non-exempt charitable trusts is the greenvetten files Form 900 in liquid Form	11b	1		1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	12a		\vdash
<u> </u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				<u> </u>

17	List the states with which a copy of this Form 990 is required to be filed ▶ IL
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)
	available for public inspection. Indicate how you make these available. Check all that apply
	Own website Another's website Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest
	policy, and financial statements available to the public
20	State the name, physical address, and telephone number of the person who possesses the books and records of the
	organization ▶ TaXXsolutions P.O. Box 4350
NT.	one

630-978-6300

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."
- 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.

(A) (B) Name and Title Average					C) kallt	hat a _l	oply)	(D) Reportable	(E) Reportable	(F) Estmated	
İ	hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
Tim Nolan President				_				0	0		
Jerry Sutkiewicz		╁		-	├─		\vdash			<u> </u>	
Past Pres.								o	0	(
Steve Henry		 			-						
Treasurer								0	0		
Pat Barnes									-		
Secretary		_	_	ــــــ	<u> </u>	<u> </u>	<u> </u>	0	0	(
Ray Busch											
Member		├		┡	<u> </u>	 	<u> </u>	0	0		
Steve Feinberg											
Member Barb Gay				-				0	0	(
Member				ĺ				o	0	(
Bert Gonzales		\vdash	\vdash	\vdash	\vdash	 					
Member		1						0	0		
Matt Patrick Member								0	0		
			_								
		_	-			-					
					_		_				
					_				<u> </u>		

<u>Pa</u>	T VIII	, Directors, Trus	stees	i, Ne	y Er	npio	h eez	, an	id Hignest Compensated	Employees (continued)	•		<u> </u>	
	(A) Name and Title	(B) Average hours per		_	checi		hat ap		(D) Reportable compensation	(E) Reportable compensation		(F) Estimat amount	ed of	
	•	week	ndividu r direc	Istitutio	Officer	ey em	lighest mploye	Former	from the organization	from related organizations (W-2/1099-MISC)		other mpens: from th	ation	
			Individual trustee or director	Institutional trustee		Key employee	e comp		(W-2/1099-MISC)	(VV-2) 1033-WIGC)		rganiza and rela	tion	
			tee	ustee		,	Highest compensated employee				OI	rganızat	tions	
							ă.							
						_	_					<u>_</u>		
														•
					-		_							_
						_								
								_						
		 												
				_	_	-	-							
														
							<u> </u>							
1b 2	Total Total number of individuals (in	cluding but not li	miter	1 10 1	hoee	liet	ad al	DOVE) who received more than	\$100,000 ip	L			
	reportable compensation from	_				- 1131	cu ai		who received more than					
3	Did the organization list any fo	ormer officer, dire	ector	or tr	uste	e. ke	v en	volar	vee. or highest compensate	ď	ſ		Yes	No
4	employee on line 1a? If "Yes," For any individual listed on line	complete Sched	ule .	for	such	ındı	vidua	al	•			3		X
·	the organization and related o											4		х
5	Did any person listed on line													
Sec	services rendered to the organition B. Independent Contract		con	пріец	<u> 5c</u>	neau	ile J	tor s	such person			5		X
1	Complete this table for your fi compensation from the organi	ve highest comp	ensa	ted II	ndep	ende	ent c	ontra	actors that received more th	nan \$100,000 of				
		(A) I business address				-			Descrip	(B) tion of services		Co	(C) mpensat	ion
													<u>-</u>	
			-					-	<u> </u>			.		
_								<u> </u>						-
	· · · · · · · · · · · · · · · · · · ·													
2	Total number of independent more than \$100,000 in compe		_				d to	thos	e listed above) who receive	ed		0		
DAA	and wide, ode in compe		- i y c	20		<u>-</u>			-				990	(2000

NATL 11/28/2011 10 39 AM Form 990 (2009) Professional Association of Small 36-4486314 Page 9 Statement of Revenue (D) Revenue (B) Related or Unrelated Total revenue exempt business excluded from tax function revenue under sections 512, 513, or 514 revenue 1a 1a Federated campaigns 1b b Membership dues c Fundraising events 1c d Related organizations 1d Contributions, and other simi 1e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1,100 g Noncash contributions included in lines 1a-1f 1,100 h Total. Add lines 1a-1f Program Service Revenue **Busn Code** 126,364 126,364 2a Membership Dues 113,644 113,644 b Conference Fees 18,876 18,876 Regional Income f All other program service revenue 258,884 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 8,942 8,942 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6a Gross Rents **b** Less rental exps c Rental inc or (loss) Net rental income or (loss) ▶ 7a Gross amount from (i) Securities (II) Other sales of assets other than inventory **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events ▶ 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less

Form **990** (2009)

0

11a

b

returns and allowances b Less cost of goods sold

Vendor Sponsorship

Training Manuals

Total. Add lines 11a-11d

d All other revenue

c Net income or (loss) from sales of inventory Miscellaneous Revenue

Mgmnt Commissions Earned

Total Revenue. See instructions

b

Busn. Code

▶

47,250

17,349

12,867

80,807

349,733

3,341

47,250

17,349

12,867

348,633

3,341

Form: 990 (2009)

Part IX Statement of Functional Expenses

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

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

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
3	the U.S. See Part IV, line 22 Grants and other assistance to governments,			<u> </u>	
٠	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes			-	
11	Fees for services (non-employees) Management	53,865			
a	Legal	33,003			
	Accounting	3,350		 	
	Lobbying				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	1,307			ļ <u>.</u>
14	Information technology				
15	Royalties				
16	Occupancy		······································		
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	271			
23	Insurance	1,544			
24	Other expenses Itemize expenses not				
24	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а		185,598			
b	Assoc & Conference Mngmt	36,359			
С	Regional Expenses	15,473			
d	Ntl Conf Speaker Fees	11,756			
0	Credit Card Fees	6,209			
f	All other expenses	18,870			
25	Total functional expenses. Add lines 1 through 24f	334,602			
26	Joint costs. Check here ► if following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet** (B) (A) Beginning of year End of year 121,030 1 231,834 Cash-non-interest bearing 215,000 2 100,000 Savings and temporary cash investments 3 Pledges and grants receivable, net 15,367 4 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete 6 Part II of Schedule L Assets Notes and loans receivable, net 7 8 Inventories for sale or use 941 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 1,903 other basis Complete Part VI of Schedule D 10a 483 211 1,692 b Less accumulated depreciation 10b 10c 11 11 Investments—publicly traded securities 12 12 Investments-other securities See Part IV, line 11 Investments-program-related See Part IV, line 11 13 13 14 14 Intangible assets 2,500 15 15 Other assets See Part IV, line 11 337,454 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 7,761 17 Accounts payable and accrued expenses 17 Grants payable 18 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 6,000 6,000 25 25 Other liabilities Complete Part X of Schedule D 13,761 11,090 26 Total liabilities. Add lines 17 through 25 26 Net Assets or Fund Balances Organizations that follow SFAS 117, check here ▶ complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 338,822 323,693 32 Retained earnings, endowment, accumulated income, or other funds 32 323,693 338,822 33 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 337,454 34 349,912

Form 990 (2009)

orm	1,990 (2009) Professional Association of Small 36-4486314		_ Pa	ge 12
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		X
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		
	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 consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		İ	
	the Single Audit Act and OMB Circular A-133?	3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	<u> </u>	
		Forr	n 990	(2009)

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.

OMB No. 1545-0047

2009
Open to Public Inspection

Employer identification number Name of the organization Professional Association of Small 36-4486314 **Business Accountants** Organizations Maintaining Donor Advised Funds or Other Similar Funds 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 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements. 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section ☐ Yes ☐ No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche		<u>al Associati</u>					Page 2
Pa	rt III Organizations Maintaining C						s (continued)
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other records, chec	k any of the	following t	hat are a significan	t use of its	
а	Public exhibition	d Loan	or exchange	programs			
b	Scholarly research	e Other		,			
c	Preservation for future generations	·					
4	Provide a description of the organization's collection of the organization	ctions and explain how	they further	he organiz	ation's exempt pur	pose in	
5	During the year, did the organization solicit or re	eceive donations of art,	historical trea	asures, or	other similar		Yes No
- Da	assets to be sold to raise funds rather than to b rt IV Escrow and Custodial Arrar					"Ves" to Form	
Pą					ion answered	Tes to Fulli	1 990, Fait
	IV, line 9, or reported an amo						
1a	Is the organization an agent, trustee, custodian	or other intermediary to	r contribution	s or other	assets not		□ v □ v.
	included on Form 990, Part X?						∐ Yes ∐ No
b	If "Yes," explain the arrangement in Part XIV an	d complete the following	g table				
							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 Form	n 990, Part X, line 21?					Yes No
b	If "Yes," explain the arrangement in Part XIV						
Pa	rt V Endowment Funds. Comple	te if organization a	answered	"Yes" to	Form 990, Pa	rt IV, line 10	
	•	(a) Current year	(b) Prior		(c) Two years back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance						
b	Contributions						
	Net investment earnings, gains,				· · · · · · · · · · · · · · · · · · ·		
·	and losses						
							
	Grants or scholarships						
е	Other expenditures for facilities						
	and programs					· · · · · · · · · · · · · · · · · · ·	
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the year en	nd balance held as					
а	Board designated or quasi-endowment	%					
b	Permanent endowment ▶ %						
С	Term endowment ▶ %						
3a	Are there endowment funds not in the possessi	on of the organization th	nat are held	and admin	stered for the		
	organization by	•					Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
b	If "Yes" to 3a(ii), are the related organizations in	sted as required on Sch	edule R?				3b
4	Describe in Part XIV the intended uses of the co						<u> </u>
Pa	Int VI Investments—Land, Buildin			orm 990	Part X line 1	0	·
	Description of investment	(a) Cost or other basis	1	Cost or othe		cumulated	(d) Book value
	2000. paon or involution	(investment)	1 ' '	asis (other)	, ,	reciation	(=, ====
	Lond	(sourion,	 	(50.0.)	305.		
	Land						
	Buildings						
	Leasehold improvements						
	Equipment				000		
	Other				903	1,692	211
Total	. Add lines 1a through 1e (Column (d) must equ	ial Form 990, Part X, co	lumn (B), line	e 10(c))		▶	211

Schedule & (Form 990) 2009 Professional Associati	ion of Small	36-4486314	Page 3
Part VII Investments—Other Securities. See Form 99	90, Part X, line 12.		·
(a) Description of security or category	(b) Book value	(c) Method of	valuation
(including name of security)		Cost or end-of-year	
Financial derivatives			· -
Closely-held equity interests			
Other			
			
	•		
			
			·
			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<u>, , , , , , , , , , , , , , , , , , , </u>		
Part VIII Investments—Program Related. See Form 9	90, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of	valuation
		Cost or end-of-yea	ar market value
-			
		· · · · · · · · · · · · · · · · · · ·	
			
			
		<u> </u>	
	 	<u> </u>	
			
			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	·		
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description			(b) Book value
			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		—	
Part X Other Liabilities. See Form 990, Part X, line 2	25		
1 (a) Description of liability	(b) Amount		
	(b) Amount		
Federal income taxes 2008-9 Mexico Trip	6,000		
2008-9 Mexico IIIp	8,000		
			
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	6,000		
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organic		s that reports the	
organization's liability for uncertain tax positions under FIN 48			
INTERIOR AND AND AND AND AND AND AND AND AND AND			

Sche	dule & (Form 990) 2009 Professional Association. of Sm	n <u>a</u> ll	36-4486314	4	Page 4
	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited	l Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	•		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities		[5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4 through 8			9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	
Pa	rt:XII: Reconciliation of Revenue per Audited Financial Statemen	nts With	Revenue per Ret	turn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d		_	
ө	Add lines 2a through 2d			2е	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5_	<u> </u>
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	h Expenses per F	Retur	'n
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
đ	Other (Describe in Part XIV)	2d			
θ	Add lines 2a through 2d			2е	
3	Subtract line 2e from line 1	1 r		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				1
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		-	
C	Add lines 4a and 4b			4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
	nt ¾IV⊱ Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines				
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines	s 2d and 4	4b Also complete		
this p	part to provide any additional information				
					·
			- 		
_					

Sche	edule	e 🏳	·(Fo	m 99	9 0) 2	2009	P	roi	tes	381	.on	ıal	A:	350	Cla	atj	on	ų, <u>`</u> C)İ	Sm	ιa⊥.	L	- :	36-	44	86.	31	4			13		L	Page 5
P	arit	ΧÍN	1	Sur	ople	mer	ntal	Info	orm	atio	n ((COI	As ntinu	ed)																	•			
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SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Name of the organization

Professional Association of Small Business Accountants

Employer identification number

36-4486314

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

- 00	in		Special E	vents Schedule				2009
Form 99	ן טי	For calendar year 2009,	or tax year beginning	07/01/09	, and ending	06	/30/10	2009
Name		Tor calendar year 2000,	or tax your boginning	3.752733	, and ending			entification Number
		Association	of Small					
Busines	s Acc	ountants			<u></u>		36-448	<u>6314</u>
		(A)	(B)	(C)		thers	•	Total
Gross receipts		22,005	0		0		0 -	22,005
Less contrib		33 005	0		0			33 005
Gross revenue	•	22,005 4,656	0		0			22,005 4,656
Less direct		17,349			$\frac{\circ}{\circ}$ —		$\frac{}{}$	17,349
ivet income (it)55)	17,545			<u> </u>		<u> </u>	
Description	(A)	Training Ma	nuals					
	(B)							
	(C)							
	Others							
							•	
								
								
								
		-						
								
		-						

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

OMB Not-1545-0172 2009

Attachment Sequence No 6

Name(s) shown-on return

(99) ► See separate instructions. ► A Professional Association of Small

Business Accountants

Identifying number 36-4486314

	ess or activity to which this form relates								
	ndirect Depreciati		erty Under Section	179		_			
Га			ty, complete Part V		ı con	nnlete P	art I		
1	Maximum amount See the instruct			bololo you	<u> </u>	ipioto i	<u> </u>	1	250,000
2	Total cost of section 179 property	•						2	
3	Threshold cost of section 179 prop	•	•	ons)				3	800,000
4	Reduction in limitation Subtract line	•	·	,				4	•
5	Dollar limitation for tax year. Subtract line		·	separately, see	e instruc	tions		5	
6	(a) Description			t (business use			Elected cost		
		· · · · · ·							
							·		
7	Listed property Enter the amount t	rom line 29			7				
8	Total elected cost of section 179 p		in column (c), lines 6 and	17				8	
9	Tentative deduction Enter the sma							9	
10	Carryover of disallowed deduction	from line 13 of your 2	2008 Form 4562					10	
11	Business income limitation Enter the			ero) or line 5	(see ir	structions)		11	
12	Section 179 expense deduction Ad	dd lines 9 and 10, bu	t do not enter more than li	ine 11				12	
13	Carryover of disallowed deduction	to 2010 Add lines 9	and 10, less line 12		13				
Note	Do not use Part II or Part III below	for listed property In	stead, use Part V	·					
Pa	rt II Special Depreciati	on Allowance a	nd Other Depreciat	ion (Do no	ot inc	lude liste	ed prope	erty)	(See instr.)
14	Special depreciation allowance for	qualified property (ot	her than listed property) p	laced in serv	ice				
	during the tax year (see instructions	s)						14	- · · · - · - · · · · · · · · · · · · ·
15	Property subject to section 168(f)(1) election						15	
16	Other depreciation (including ACR	S)						16	
_Pa	rt III MACRS Depreciati	i <mark>on (Do not</mark> incl	ude listed property.)	(See instr	<u>uctio</u>	าร.)			
			Section A						
17	MACRS deductions for assets place	ed in service in tax y	ears beginning before 200	09				17	271
18	If you are electing to group any assets pl	aced in service during th	e tax year into one or more ge	neral asset acc	ounts, c	heck here 🕨	<u> </u>	L	
	Section B—A	T	rvice During 2009 Tax Yo	ear Using the	e Gene	ral Depre	ciation Sy	stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	(d) Recovery period	(e) C	Convention	(f) Met	nod	(g) Depreciation deduction
<u>19a</u>	3-year property								
b	5-year property	Į							
<u> </u>	7-year property								
<u>d</u>	10-year property	_							
_ θ	15-year property								
f_	20-year property				ļ				
g	25-year property			25 yrs	<u> </u>		S/L		
h	Residential rental			27 5 yrs		MM	S/L		
	property	ļ		27 5 yrs		MM	S/L		
i	Nonresidential real			39 yrs	ļ	MM	S/L		
	property		L	1	L	ММ	S/L		<u> </u>
	· · · · · · · · · · · · · · · · · · ·	sets Placed in Serv	ice During 2009 Tax Yea	ar Using the	Altern	ative Depi	reciation S	Systen	1
20a	Class life				ļ		S/L		
	12-year	-		12 yrs	 		S/L		
	40-year	<u> </u>	L	40 yrs	<u> </u>	MM	S/L		
	art IV Summary (See ins			_				T	
21	Listed property Enter amount from							21	
22	Total. Add amounts from line 12, I	-			21 Ent	er here			
	and on the appropriate lines of you			e instructions				22	271
23	For assets shown above and place	_	ne current year, enter the						
	portion of the basis attributable to	section 263A costs		· · · · · · · · · · · · · · · · · · ·	23				<u> </u>

11/28/2011 10:39 AM

NATL Professional Association of Small

36-4486314

Form 990, Page 1

FYE: 6/30/2010

Asset	Description	Date I <u>n Service</u>	Cost	Bus <u>%</u>	Sec 179 Bonus	Basis for Depr	PerConv Meth	Pnor	Current
1	MACRS: Projector Projector Case	2/11/05 3/05/05 _	1,593 310 1,903		-	1,593 310 1,903	7 HY S/L 7 HY S/L	1,138 222 1,360	227 44 271
	Grand Totals Less: Dispositions and Tra Less: Start-up/Org Expen Net Grand Totals	ansfers se	1,903 0 0 1,903			1,903 0 0 1,903		1,360 0 0 1,360	271 0 0 271

NATL Professional Association of Small

36-4486314

FYE: 6/30/2010

IL Asset Report Form 990, Page 1

11/28/2011 10:39 AM

Asset _	• Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
	ACRS; ojector ojector Case	2/11/05 3/05/05 _	1,593 310 1,903	1,593 310 1,903	1,237 241 1,478	142 28 170	227 44 271	85 16 101
	Grand Totals Less: Dispositions Less: Start-up/Org Expense Net Grand Totals	-	1,903 0 0 1,903	1,903 0 0 1,903	1,478 0 0 1,478	170 0 0 170	271 0 0 271	101 0 0 101

NATL Professional Association of Small

36-4486314

AMT Asset Report Form 990, Page 1 FYE: 6/30/2010

11/28/2011 10:39 AM

Asset	Description	Date In Service	Cost	Bus Sec <u>%</u> 179 Bonus	Basis for Depr	Per Conv Meth	Pnor	Current
	CRS: jector jector Case	2/11/05 3/05/05	1,593 310 1,903		1,593 310 1,903	7 HY 150DB 7 HY 150DB	1,105 215 1,320	195 38 233
	Grand Totals Less: Dispositions and Trai Net Grand Totals	nsfers _	1,903 0 1,903		1,903 0 1,903		1,320 0 1,320	233 0 233

NATL Professional Association of Small

36-4486314

Depreciation Adjustment Report All Business Activities

11/28/2011 10:39 AM - 4 +

FYE: 6/30/2010

<u>Form</u>	Unit As	sset_	Description	Tax	AMT	AMT Adjustments/ <u>Preferences</u>
MACRS	Adjustn	nents:				
Page 1 Page 1	l 1	1 2	Projector Projector Case	227 44 271	195 38 233	32 6 38

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

OMB NB. 1545-1709 √Rev January 2011) Department of the Treasury File a separate application for each return. Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension-check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Name of exempt organization Type or **Employer identification number** Professional Association of Small print Business Accountants 36-4486314 File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions. filma your P.O. Box 4350 return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. Naperville IL 60567 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Code Is For Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL Form 1041-A 80 Form 990-EZ 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 The books are in the care of Telephone No. FAX No If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 02/15/12, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year ... \blacktriangleright X tax year beginning 07/01/10 , and ending 06/30/11 If this tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a

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

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS

If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

(Electronic Federal Tax Payment System). See instructions.

nonrefundable credits. See instructions.

За

3b