Form 990	
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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.

ΑF	or the	e 2008 calendar year, or tax year beginning and	ending			
B Check if applicable: Please use IRS C Name of organization D Employer identification number						
Address change Name type. Doing Business As USA RACQUETBALL Doing Business As USA RACQUETBALL T Doing Business As USA RACQUETBALL T Doing Business As USA RACQUETBALL T Doing Business As USA RACQUETBALL						
	_chang _Initial _return	Doing Business AS USA RACQUETBALL	Room/suite			
]Termir ation	ⁿ⁻ Instruc- 1685 W. UINTAH STREET	10011/3010	(719)) 635-5396	
	Ameno Ameno	^{ded} tions. City or town, state or country, and ZIP + 4		G Gross receipts \$	2,261,795.	
	Applic tion pendir	COLORADO SPRINGS, CO 80904		H(a) Is this a group re		
		F Name and address of principal officer: GEOFF PETERS		for affiliates?		
	·	SAME AS C ABOVE empt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		H(b) Are all affiliates incl	uded? Yes No ist. (see instructions)	
		te: \blacktriangleright WWW.USARACQUETBALL.COM		H(c) Group exemption		
		organization: X Corporation Trust Association Other	I Year		State of legal domicile: CO	
	rt I	Summary				
ه	1	Briefly describe the organization's mission or most significant activities: USA	RACQUI	ETBALL IS AN		
Governance		EDUCATIONAL ORGANIZATION DESIGNED TO FOS	TER TH	HE DEVELOPMEN	NT OF THE	
ern		Check this box 🕨 🦲 if the organization discontinued its operations or dispo	sed of mor	e than 25% of its assets		
Š					12	
8		Number of independent voting members of the governing body (Part VI, line 1b)			12	
ties	5	Total number of employees (Part V, line 2a)			300	
Activities &		Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, line 12, column (C)			164,991.	
Ă		Net unrelated business taxable income from Form 990-T, line 34			0.	
				Prior Year	Current Year	
e	8	Contributions and grants (Part VIII, line 1h)		624,913.	909,119.	
ňué		Program service revenue (Part VIII, line 2g)		982,470.	1,053,293.	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,300.	517.	
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		387,750.	282,551.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,996,433.	2,245,480.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		75,064.	76,558.	
		Benefits paid to or for members (Part IX, column (A), line 4)		242 040	206 077	
ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		343,940.	386,977.	
Expenses	16a k	Professional fundraising fees (Part IX, column (A), line 11e)	12			
Ĕ	17	Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	42.	1,525,309.	1,558,235.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,944,313.	2,021,770.	
		Revenue less expenses. Subtract line 18 from line 12		52,120.	223,710.	
or		· · · · · · · · · · · · · · · · · · ·		Beginning of Year	End of Year	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		505,633.	702,872.	
et As nd B	21	Total liabilities (Part X, line 26)		378,709.	352,238.	
		Net assets or fund balances. Subtract line 21 from line 20		126,924.	350,634.	
Ра	nrt II	Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules ar	nd atatamanta	and to the best of my knowledge	a and balliof it in true, correct	
		and complete. Declaration of preparer (other than officer) is based on all information of which preparer has a	any knowledge	and to the best of my knowledg		
Sigr				1		
Here		Signature of officer		Date		
	•	GEOFF PETERS, TREASURER				
		Type or print name and title				
Paid	1	Preparer's Date	Cr se		r's identifying number tructions)	
_	arer's	signature		nployed 🕨 🛄		
	Only	Firm's name (or WAUGH & GOODWIN, LLP	105	EIN 🕨		
	2	self-employed), address, and COLODADO CDDTNCC CO 80007	T02		710\ 500 0777	
Mai	the	COLORADO SPRINGS, CO 80907		Phone no. 🕨 (
	01 12-1			structions.	X Yes No Form 990 (2008)	
0020		EE SCHEDULE O FOR ORGANIZATION MISSION S			. ,	

Form	990 (2008) UNITED STATES RACQUETBALL ASSOCIATION 73-0954204 Page 2
Pa	rt III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
	USA RACQUETBALL IS THE NATIONAL GOVERNING BODY OF RACQUETBALL,
	RECOGNIZED BY THE U.S. OLYMPIC COMMITTEE. WE PROVIDE OPPORTUNITIES
	FOR MEMBERS AND ENTHUSIASTS TO ACTIVELY PARTICIPATE IN THE SPORT,
	THROUGH SANCTIONING OF EVENTS, ADMINISTRATION OF PROGRAMS, AND
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes", describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
-	If "Yes", describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 887,650 · including grants of \$ 73,808 ·) (Revenue \$ 493,642 ·)
та	NATIONAL EVENTS - THE ASSOCIATION HAS APPROXIMATELY 550 SANCTIONED
	EVENTS WITH 15,500 ATHLETES COMPETING. THE ASSOCIATION ALSO SPONSORS
	THE ADULT/JUNIOR REGIONALS AND MASTERS COMPETITIONS.
	THE ADOBT/DUNIOR REGIONALS AND MASTERS COMPETITIONS.
4b	(Code:) (Expenses \$ 355,104. including grants of \$ 2,750.) (Revenue \$) DEVELOPMENT PROGRAMS - THE ASSOCIATION SPONSORS THE ADULT AND JUNIOR
	USA RACQUETBALL TEAMS. IT ALSO HAS GRASSROOT PROGRAMS FOR ALL AGES OF ATHLETES. THE ASSOCIATION PROVIDES REFEREE CERTIFICATION, TEACHING
	•
	DEVELOPMENT AND ELITE TRAINING.
4c	(Code:) (Expenses \$ 247,659. including grants of \$) (Revenue \$ 164,991.) RACQUETBALL MAGAZINE - THE ASSOCIATION PUBLISHES RACQUETBALL MAGAZINE
	QUARTERLY. EACH ISSUE OF THIS MAGAZINE WAS PROVIDED TO APPROXIMATELY 15,500 MEMBERS.
	15,500 MEMBERS.
A -1	Other pregram carriess (Describe in Schedule O)
4d	Other program services. (Describe in Schedule O.) (Expanses $f = 345, 407$ including grants of f
<u> </u>	(Expenses \$ 345,407. including grants of \$) (Revenue \$ 559,651.) Total program service expenses ▶\$ 1,835,820. (Must equal Part IX, Line 25, column (B).)
4e	Total program service expenses ►\$ 1,835,820. (Must equal Part IX, Line 25, column (B).)

	990 (2008) UNITED STATES RACQUETBALL ASSOCIATION 73-0954	204
Par	t IV Checklist of Required Schedules	
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
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2
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
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
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice	
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6
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
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	
	Schedule D, Part III	8
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
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was	
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13
	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	44
45	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b
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	15
16	located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15
16		16
17	located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.	
	If "No", go to question 25	24a
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	

	prior year? If "Yes," complete Schedule L, Part I	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	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial		
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	Ĺ

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Form 990 (2008)	UNITED	STATES	RACQUETBALL	ASSOCIATION
Part IV Checklist	of Required Sc	hedules (co	ntinued)	

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			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		Х
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		Х
с	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	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			
	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 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
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		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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

Form 990 (2008)

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	990 (2008) UNITED STATES RACQUETBALL ASSOCIATION 73-0954	204
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 25	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c
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 7	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a
b	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 and	
	Financial Accounts.	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	
-	Tax Shelter Transaction?	5c
	Did the organization solicit any contributions that were not tax deductible?	6a
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	
-	were not tax deductible?	6b
7	Organizations that may receive deductible contributions under section 170(c).	7-
a h	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a 7b
	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 required to file Form 8282?	7c
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	
•	benefit contract?	7e
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)	
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have	
	excess business holdings at any time during the year?	8
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	
а	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: N/A	
а	Initiation fees and capital contributions included on Part VIII, line 12 10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	
11	Section 501(c)(12) organizations. Enter: N/A	

a Gross income from members or shareholders

b If "Yes," enter the amount of tax-exempt interest received or accrued during the yearN/A.

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?

b Gross income from other sources (Do not net amounts due or paid to other sources against

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Yes No

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Form 990 (2008)

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	Internal Revenue Code.)	alon about pe	
Sec	tion A. Governing Body and Management		
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe	e the circumst	tances,
	processes, or changes in Schedule O. See instructions.		
1a	Enter the number of voting members of the governing body	1a	1:
b	Enter the number of voting members that are independent		1:
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with any oth	ner
	officer, director, trustee, or key employee?		
3	Did the organization delegate control over management duties customarily performed by or under the	•	
	of officers, directors or trustees, or key employees to a management company or other person?		
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 990 was fi	led?
5	Did the organization become aware during the year of a material diversion of the organization's asset		
6	Does the organization have members or stockholders?		
7a	Does the organization have members, stockholders, or other persons who may elect one or more me governing body?		
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	sons?	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during the yea	ar
	by the following:		
а	The governing body?		
b	Each committee with authority to act on behalf of the governing body?		
9a	Does the organization have local chapters, branches, or affiliates?		
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapters, affil	liates,
	and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	ganizations m	iust
	describe in Schedule O the process, if any, the organization uses to review the Form 990		
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be re-	eached at the	ł
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		
Sec	tion B. Policies		

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	x	
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а	The organization's CEO, Executive Director, or top management official?	15a	Х	
b	Other officers or key employees of the organization?	15b	X	
16a	Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		x
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright CSEE STATEMENT 1			

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. X Own website Another's website X Upon request

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 19 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: THE ORGANIZATION - (719) 635-5396

80904 1685 W. UINTAH STREET, COLORADO SPRINGS, CO

Section A.	Governing	Body and	Management

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Yes No

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average		Position					Reportable	Reportable	Estimated
	hours	,	(check all that apply)		compensation	compensation	amount of			
	per week	ector	sctor		from the	from related organizations	other compensation			
	week	or din	e.			ated		organization	(W-2/1099-MISC)	from the
		ustee	truste		e	bens		(W-2/1099-MISC)	,	organization
		ual tr	tional		nploy6	st con				and related
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme			organizations
CHERYL KIRK										
PRESIDENT	5.00	x		х				0.	0.	0.
GEOFF PETERS										
VICE PRESIDENT	5.00	x		х				0.	Ο.	0.
SALVATORE PERCONTI										
SECRETARY	5.00	Х		Х				0.	0.	0.
LANCE GILLIAM										
TREASURER	5.00	Х		Х				0.	0.	0.
JACK HUCZEK										
ATHLETE REPRESENTATIVE	5.00	Х						0.	0.	0.
MIKE GUIDRY										
ATHLETE REPRESENTATIVE	5.00	Х						0.	0.	0.
KIM RUSSELL-WASSELENCHUC										-
ATHLETE REPRESENTATIVE	5.00	Х						0.	0.	0.
RAY CORDERO	F 00								0	0
MILITARY REPRESENTATIVE	5.00	X						0.	0.	0.
DAVE NEGRETE	F 00	37						0	0	0
APPOINTED ED REMEN	5.00	X						0.	0.	0.
ED REMEN AT LARGE MEMBER	5.00	x						0.	0.	0.
THOMAS CURRAN	5.00	•						0.	0.	0.
AT LARGE MEMBER	5.00	x						0.	0.	0.
JAY MATHIS	5.00	Δ						0.	0•	0.
AT LARGE MEMBER	5.00	x						0.	0.	0.
FRANK TADDONIO	5.00									
AT LARGE MEMBER	5.00	x						0.	0.	0.
MARIJEAN KELLY										
AT LARGE MEMBER	5.00	x						0.	Ο.	0.
JIM HISER										
EXECUTIVE DIRECTOR	45.00				х			101,674.	Ο.	14,895.
MELODY WEISS										
CHIEF FINANCIAL OFFICER	40.00				Х			52,500.	0.	10,230.

832007 12-18-08

Form 990 (2008)

									SSOCIATION	73-095	4204	Page 8
Par	t VII Section A. Officers, Directors, Tru		nplo	byee			High	est				
	(A) Name and title	(B) Average hours	(cl		Posi		app	oly)	(D) Reportable compensation	(E) Reportable compensation	Estir amo	F) nated unt of
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compe fron organ and r	her ensation n the ization elated zations
							Ļ		154 174	0	25	105
1b 2	Total Total number of individuals (including those						▶ n \$1	00	154,174.	0	• 25	,125.
											•	1
3	Did the organization list any former officer, line 1a? <i>If "Yes," complete Schedule J for s</i>										Y	es No X
4	For any individual listed on line 1a, is the su	im of reportabl	e co	omp	ensa	atior	n and	d ot	her compensation from	the organization		
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a										4	X
	the organization? If "Yes," complete Sched					-			-		5	X
Sec 1	tion B. Independent Contractors Complete this table for your five highest co	monoported inc	long	ando	nt o	ont	root		that reacived more than	\$100,000 of compo	nation fro	
•	the organization.	inpensated inc	rehe	snue		Jonu	acit	5	that received more than		ISALIUITITU	
<u></u>	(A) Name and business		. TZ T				r.		(B) Description of s	services	(C) Compens	ation
	IIM ENTERPRISES, INC., IVE, WESTERVILLE, OH 43			<u> </u>					EVENT SERVIC	ES	121	<u>,687.</u>
2	Total number of independent contractors (i from the organization ►	ncluding those 1	in ⁻	1) wł	ho re	ecei	ved	mo	re than \$100,000 in com	pensation		

Form 990 (2008)

Statement of Revenue

Part VIII

gifts, grants lar amounts	1	а	Federated campaigns		1a					
grar		b	Membership dues		1b					
s, c		с	Fundraising events		1c					
gift ar a			- · · · · · ·		1d	24,192.				
			Government grants (contribut	ions)	1e					
tior r si			All other contributions, gifts, gran							
Contributions, and other simi			similar amounts not included above		1f	884,927.				
do		g	Noncash contributions included in lines		· · · ·	404,432.				
ရှိပိ		h	Total. Add lines 1a-1f				909,	119.		
						Business Code				
e	2	а	MEMBERSHIP DUES			713990	559,	651.	559	,651.
ž		b	ENTRY FEES			711210	322,	639.	322	,639.
Sel			NATIONAL EVENTS			711300	171,	003.	171	,003.
Program Service Revenue		d					, ,			
2 B C C C C		e								
Pre		f	All other program service reve	nue						
		g	Total. Add lines 2a-2f				1,053,	293.		
	3	-	Investment income (including				_,,			
	Ŭ		other similar amounts)		,	,		517.		
	4		Income from investment of tax					01/0		
	5		Royalties			-	42	056.		
	J				Real	(ii) Personal		0000		
	6	2	Gross Rents	() '	icai		-			
	0		Less: rental expenses				-			
			Rental income or (loss)				-			
			Net rental income or (loss)							
	-									
	'	а	Gross amount from sales of	(1) Sec	curities	(ii) Other	-			
			assets other than inventory				-			
		D	Less: cost or other basis							
		_	and sales expenses				-			
			Gain or (loss)			L				
			Net gain or (loss)			····· ·				
eni	8	а	Gross income from fundraising including \$ 16,2							
ven										
Other Revenue			contributions reported on line							
her		b	Part IV, line 18			a	-			
đ			Less: direct expenses			٥ <u>ــــــــــــــــــــــــــــــــــــ</u>				
	•		Net income or (loss) from func			····· ►				
	9	а	Gross income from gaming ac							
		b	Part IV, line 19				4			
						∾ ⊳				
	40		Net income or (loss) from gam	-	lies					
	10	а	Gross sales of inventory, less			43,542.				
		h	and allowances			a 43,542. b 16,315.	-			
			•				27	227.		
i		C	Net income or (loss) from sale		entory		-	227.		
		_	Miscellaneous Revenu ADVERTISING INC			Business Code	164,	991		
			OTHER PROGRAMS	OME		713990		277.	18	,277.
		b	OTHER PROGRAMS			113330	<u>40,</u>	411•	40	, 4 / / •
		с С	All other revenue							
			All other revenue				213,	268		
						·····	213, 245, 2, 245,		1 1 0 1	570
83200	12		Total Revenue. Add lines 1h, 2g, 3, 4	1, 5, 6d, 7d	l, 8c, 9c,	10c, and 11e	4,443,	400.	Ι, ΙΟΙ	,570.
83200 02-02	2-09									

UNITED STATES RACQUETBALL ASSOCIATION

(A)

Total revenue

(B)

Related or

exempt function

revenue

Page 9 0954204

(D) Revenue excluded from tax under sections 512, 513, or 514

517.

42,056.

27,227.

69,800.

Form **990** (2008)

164,991

164,991.

73-0954204	

(C)

Unrelated

business

revenue

Part IX Statement of Functional Expenses

UNITED STATES RACQUETBALL ASSOCIATION

	Section 501(c)(3) All other organizations must comp		tions must complete al not required to comple		(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and	11 040	11 040		
-	organizations in the U.S. See Part IV, line 21	11,248.	11,248.		
2	Grants and other assistance to individuals in	CE 210	65 210		
•	the U.S. See Part IV, line 22	65,310.	65,310.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	179,299.	136,899.	35,944.	6,456
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	149,812.	129,945.	2,166.	17,701.
8	Pension plan contributions (include section 401(k)		<i>.</i>		
	and section 403(b) employer contributions)	7,251.	6,087.	158.	1,006 2,588
9	Other employee benefits	25,253.	21,631.	1,034.	2,588
10	Payroll taxes	25,362.	20,525.	2,821.	2,016
11	Fees for services (non-employees):				
а	Management	F 101	2 1 0 2		2 010
	Legal	7,121. 5,235.	3,183.	726.	3,212 2,361
	Accounting	5,235.	2,340.	534.	2,361
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	225,287.	206,071.	19,216.	
g ₁∩	Other	224,931.	223,674.	602.	655
12 13	Advertising and promotion	115,851.	96,968.	16,689.	2,194
13 14	Office expenses Information technology	20,425.	18,467.	1,117.	841
15	Royalties	20,123.	10,107.	<u> </u>	011
16	Occupancy	124,080.	118,355.	3,338.	2,387
17	Travel	140,359.	136,519.	3,799.	41
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	58,262.	51,682.	6,580.	
20	Interest	19,506.	15,856.	2,128.	1,522
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	33,541.		33,541.	
23	Insurance	58,129.	52,186.	4,718.	1,225
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
~	expenses shown on line 25 below.)	145,688.	145,688.		
a b	VIK EXPENSE	117,502.	116,142.	1,310.	50
D D	COURT RENTALS	55,895.	55,895.	±, 5±0•	50
d	AGENCY DISCOUNT	41,782.	41,782.		
u e	APPAREL AND UNIFORMS	40,139.	40,139.		
f	All other expenses	124,502.	119,228.	5,187.	87
25	Total functional expenses. Add lines 1 through 24f	2,021,770.	1,835,820.	141,608.	44,342
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				

33

34

UNITED	STATES	RACQUETBALL	ASSOCIATION
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73-0954204 Page 11

Pa	rt X	Balance Sheet	10102				0901201
		I			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			273,953.	1	268,250.
	2	Savings and temporary cash investments		30,892.	2		
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		144,778.	4	111,625.	
	5	Receivables from current and former officers, of			-		
		employees, or other related parties. Complete			5		
	6	Receivables from other disqualified persons (a					
		4958(f)(1)) and persons described in section 49	958(c)(3)(E	3). Complete			
		Part II of Schedule L				6	
ŝ	7	Notes and loans receivable, net		Γ		7	
Assets	8	Inventories for sale or use			19,853.	8	31,548.
	9	Prepaid expenses and deferred charges			6,965.	9	4,614.
	10a	Land, buildings, and equipment: cost basis		483,670.	-		
		Less: accumulated depreciation. Complete					
		Part VI of Schedule D	10b	214,249.	8,228.	10c	269,421.
	11	Investments - publicly traded securities		3,055.	11	2,999.	
	12	Investments - other securities. See Part IV, line		17,909.	12	14,415.	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must eq			505,633.	16	702,872.
	17	Accounts payable and accrued expenses			286,296.	17	255,618.
	18	Grants payable				18	
	19	Deferred revenue			77,544.	19	94,251.
	20	Tax-exempt bond liabilities				20	
es	21	Escrow account liability. Complete Part IV of S				21	
Liabilities	22	Payables to current and former officers, directed	ors, truste	es, key employees,			
iab		highest compensated employees, and disquali	fied perso	ons. Complete Part II			
-		of Schedule L				22	
	23	Secured mortgages and notes payable to unre			5,000.	23	
	24			······		24	
	25	Other liabilities. Complete Part X of Schedule E			9,869.		2,369.
	26	Total liabilities. Add lines 17 through 25			378,709.	26	352,238.
		Organizations that follow SFAS 117, check I	nere 🕨	X and complete			
ces		lines 27 through 29, and lines 33 and 34.			04 041		007 011
lan	27	Unrestricted net assets		84,241.		287,911.	
Ва	28	_	······	42,683.	28	62,723.	
pu	29				29		
г Т		Organizations that do not follow SFAS 117,	спеск пе	re ▶ ∟ and			
is o	20	complete lines 30 through 34.	-			20	
set	30	Capital stock or trust principal, or current fund				30 31	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or e Retained earnings, endowment, accumulated i				31	
	32	Retained earnings, endowment, accumulated i	126 924	32	350 634		

Pa	t XI Financial Statements and Reporting		
		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Х
b	Were the organization's financial statements audited by an independent accountant?	X	
с	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,		
	review, or compilation of its financial statements and selection of an independent accountant?	X	
3a	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		Х
b	If "Yes," did the organization undergo the required audit or audits?		

Total net assets or fund balances

Total liabilities and net assets/fund balances

350,634. 702,872.

126,924.

505,633.

33

34

Form 990 (2008)

Total					
LHA For Privacy Act an	d Paperwork Redu	ction Act Notice, see th	ne Instruc	tions for F	orm 990.

Public Charity Status and Public Support (Form 990 or 990-EZ) To be completed by all section 501(c)(3) organizations and section 4947(a)(1)

Department of the Treasury Internal Revenue Service			nonexempt charitable trusts. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.		Open to Public Inspection					
		the organizati		Employer ir	lentification numb	Jor				
INA		ine organizati								
	art I	Baaaan	UNITED STATES RACQUETBALL ASSOCIATION for Public Charity Status (All organizations must complete this part.) (see instructions		-0954204					
				5)						
	Ē.		a private foundation because it is: (Please check only one organization.)							
1		-	nvention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2			cribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)							
3		•	a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Sch							
4		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 stat								
5		-	ion operated for the benefit of a college or university owned or operated by a governmental u	nit described	a in					
~			(b)(1)(A)(iv). (Complete Part II.)							
6			tte, or local government or governmental unit described in section 170(b)(1)(A)(v).							
7		•	ion that normally receives a substantial part of its support from a governmental unit or from the	ne general pi	ublic described in					
~			b)(1)(A)(vi). (Complete Part II.)							
8			r trust described in section 170(b)(1)(A)(vi). (Complete Part II.)							
9	X		on that normally receives: (1) more than 33 1/3% of its support from contributions, membersl							
			ted to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of i	• •	0					
			unrelated business taxable income (less section 511 tax) from businesses acquired by the org	ganization af	ter June 30, 1975.					
			509(a)(2). (Complete the Part III.)							
10		0	ion organized and operated exclusively to test for public safety. See section 509(a)(4). (see in		<i>.</i>					
11		0	ion organized and operated exclusively for the benefit of, to perform the functions of, or to ca	, ,						
		. ,	v supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509	3(a)(3). Chec	ck the box that					
			e type of supporting organization and complete lines 11e through 11h.							
		a Type I			Type III - Other					
•	e 📖	, ,	this box, I certify that the organization is not controlled directly or indirectly by one or more di	• •						
			nanagers and other than one or more publicly supported organizations described in section 50	09(a)(1) or se	ection 509(a)(2).					
Ī	f	•	ation received a written determination from the IRS that it is a Type I, Type II, or Type III		٦					
	~		rganization, check this box		L					
9	g	0	t 17, 2006, has the organization accepted any gift or contribution from any of the following per		Yes	No				
		., .	n who directly or indirectly controls, either alone or together with persons described in (ii) and provide body of the supported organization?			10				
		the gove	erning body of the supported organization?		11g(i)					

(ii) A family member of a person described in (i) above?

(iv) Is the organization (v) Did you notify the

in col. (i) listed in your organization in col.

(i) of your support?

No

Yes

governing document?

Yes

No

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

(iii) Type of

organization

(described on lines 1-9

above or IRC section

(see instructions))

Provide the following information about the organizations the organization supports. h

(ii) EIN

(i) Name of supported

organization

(vi) Is the organization in col. (i) organized in the U.S.?

No

Yes

Schedule A (Form 990 or 990-EZ) 2008

11g(ii)

11g(iii)

(vii) Amount of

support

OMB No. 1545-0047

2008

SCHEDULE A

artment of the Treasury	

Schedule A (Form 990 or 990-EZ) 2008						Page 2
Part II Support Schedule for)(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(v	/i)
(Complete only if you checke	d the box on line 5	5, 7, or 8 of Part I.)				
Section A. Public Support				1		
Calendar year (or fiscal year beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ization'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 - 3						
5 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)						
6 Public Support. Subtract line 5 from line 4.						
Section B. Total Support			i	i	i	
Calendar year (or fiscal year beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources \dots						
9 Net income from unrelated business						
activities, whether or not the						
business is regularly carried on \dots						
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						
12 Gross receipts from related activities	, etc. (see instructi	ons)			12	
13 First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3)	
organization, check this box and sto						<u></u>
Section C. Computation of Publ					· · ·	
14 Public support percentage for 2008 (14	%
15 Public support percentage from 2007						%
16a 33 1/3% support test - 2008. If the o						
stop here. The organization qualifies						
b 33 1/3% support test - 2007. If the c	U U					
and stop here. The organization qua						
17a 10% -facts-and-circumstances tes						
and if the organization meets the "fac						
meets the "facts-and-circumstances"						
b 10% -facts-and-circumstances tes	-					
more, and if the organization meets the				• •		
organization meets the "facts-and-cire 18 Private foundation. If the organization						
TO FINALE TOUTUATION. IT THE OTUATIZATION	n ulu HUL CHECK a		να. ΙΟυ. Ι/d. ΟΓΙ/	D. UNCON LINS DOX	and see instruction	·> · · · · · · · · · · · · · · · · · ·

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 UNITED STATES RACQUETBALL ASSOCIATION 73-0954204 Page 3 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.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1137683.	1177034.	1198327.	1142977.	1468770.	6124791.
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	673,800.	817,079.	673,949.	682,454.	685,860.	3533142.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
Ŭ	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 - 5	1811483.	1994113.	1872276.	1825431.	2154630.	9657933.
	Amounts included on lines 1, 2, and	1011403.	1))4110.	10/22/0.	1023431.	2134030.	5057555.
1 6	3 received from disgualified persons						
ŀ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of 1% of the total of lines 9,						
	10c, 11, and 12 for the year or \$5,000						
	Add lines 7a and 7b						0(57022
	Public support (Subtract line 7c from line 6.)						9657933.
	ction B. Total Support	()000((1) 0005	() 0000	(1) 0007	() 0000	(0 T))
	endar year (or fiscal year beginning in)	(a)2004 1811483.	(b) 2005 1994113.	(c) 2006 1872276.	(d) 2007 1825431.	(e)2008 2154630.	(f) Total 9657933.
	Amounts from line 6	1011403.	1994113.	10/22/0.	1023431.	ZI34030.	905/955.
108	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties	14 000			0.2 0.20		220 150
	and income from similar sources	14,288.	92,572.	86,896.	93,829.	42,573.	330,158.
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	14,288.	92,572.	86,896.	93,829.	42,573.	330,158.
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV.)	24,336.	26,977.	61,152.	77,173.		237,915.
13	Total support (Add lines 9, 10c, 11, and 12.)						10226006.
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2008 (olumn (f))		15	94.44 %
16	Public support percentage from 2007	Schedule A, Part	IV-A, line 27g			16	95.64 %
Se	ction D. Computation of Inve	stment Incom	e Percentage				
17			T	ne 13, column (f))		17	3.23 %
	Investment income percentage from 2					18	2.76 %
	a 33 1/3% support tests - 2008. If the						
	more than 33 1/3%, check this box a						► X
ŀ	33 1/3% support tests - 2007. If the						
	line 18 is not more than 33 1/3%, che	•					
20	Private foundation. If the organization						

Schedule A (Form 990 or 990-EZ) 2008

Schedule	D
(Form 990)	

Supplemental Financial Statements

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

	tment of the Treasury	-	n 990, Part IV, line 6, 7, 8, 9, 10, 11, or		Open to Public Inspection
-	al Revenue Service e of the organizati		1 330, Part IV, Inte 0, 7, 0, 3, 10, 11, 0		identification number
Nam	e of the of gallizati		UETBALL ASSOCIATION		3-0954204
Pa	rt I Organiza	ations Maintaining Donor Advise			
ľ		n answered "Yes" to Form 990, Part IV, lin			
	organizatio		(a) Donor advised funds	(b) Funds and	d other accounts
1	Total number at er	nd of year		.,	
2		utions to (during year)			
3		from (during year)			
4		t end of year			
5		on inform all donors and donor advisors in		ised funds	
	-	on's property, subject to the organization's	-		Yes No
6	-	on inform all grantees, donors, and donor a			
		poses and not for the benefit of the donor of			Yes No
Pa	rt II Conserv	ation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.	
1	Purpose(s) of cons	servation easements held by the organizat	ion (check all that apply).		
	Preservation	n of land for public use (e.g., recreation or p	bleasure) Preservation of an h	istorically important	and area
	Protection of	of natural habitat	Preservation of certi	fied historic structure	e
	Preservation	n of open space			
2	Complete lines 2a	-2d if the organization held a qualified cons	servation contribution in the form of a co	nservation easement	on the last day
	of the tax year.				
				Held	at the End of the Year
а	Total number of co	onservation easements		2a	
b	Total acreage rest	ricted by conservation easements		2b	
с	Number of conser	vation easements on a certified historic str	ucture included in (a)	2c	
d	Number of conser	vation easements included in (c) acquired	after 8/17/06	2d	
3	Number of conser	vation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization durin	g the taxable
	year 🕨				
4	Number of states	where property subject to conservation ea	sement is located <a>		
5		tion have a written policy regarding the pe			
	enforcement of the	e conservation easements it holds?			Yes No
6		hours devoted to monitoring, inspecting, a		-	_
7		ses incurred in monitoring, inspecting, and			
8		vation easement reported on line 2(d) above			
)(4)(B)(ii)?			Yes No
9		be how the organization reports conservat	•		
		ole, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's a	accounting for
De	conservation ease			Athen Cincilon Ar	
Pa	-	ations Maintaining Collections o f the organization answered "Yes" to Form		Jther Similar As	sets.
	Completen	The organization answered Tes to Form	330, Fait IV, ille 8.		
10	If the organization	elected, as permitted under SFAS 116, no	t to report in its revenue statement and	halanaa ahaat warka	of ort historical
Ia	-	· · ·	•		
		r similar assets held for public exhibition, e		ublic service, provide	e, ill Part Alv, the text of
h		financial statements that describes these elected, as permitted under SFAS 116, to		nco choot works of a	art historical traceuros
5	-	sets held for public exhibition, education, of	-		
	these items:	sets held for public exhibition, education, c	research in furtherance of public servic		ing amounts relating to
		uded in Form 990, Part VIII, line 1		¢	
		uded in Form 990, Part VIII, line 1			
2		ed in Form 990, Part X received or held works of art, historical tre			
2	-	unts required to be reported under SFAS 1		iai yain, provide	
а	-	d in Form 990, Part VIII, line 1	-	▶ ¢	
a b		i Form 990, Part X			
J				····· • •	

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

Schedule D (Form 990) 2008

OMB No. 1545-0047

Open to Public

8

-		STATES RA								: Page 2
Par	rt III Organizations Maintaining Co	ollections of	Art, His	torical	Treasures, o	or Othe	er Simila	ar Asse	ts (contir	nued)
3	Using the organization's accession and other	records, check a	any of the	following	that are a signif	icant use	e of its col	ection ite	ms (checł	< all
	that apply):									
а	Public exhibition		d 🗌	Loan or e	exchange progra	ams				
b	Scholarly research		е 🗌	Other						
с	Preservation for future generations									
4	Provide a description of the organization's col	llections and exp	lain how t	hey furthe	er the organizati	ion's exe	mpt purpo	ose in Par	t XIV.	
5	During the year, did the organization solicit or	receive donation	ns of art, h	istorical t	reasures, or oth	er simila	r assets			
	to be sold to raise funds rather than to be mai	intained as part o	of the orga	nization's	collection?				Yes	No No
Par	rt IV Trust, Escrow and Custodial	Arrangemen	ts. Comp	lete if org	anization answe	ered "Ye	s" to Form	990, Par	t IV, line 9	, or
	reported an amount on Form 990, Part	: X, line 21.								
1a	Is the organization an agent, trustee, custodia	an or other intern	nediary for	contribut	ions or other as	sets not	included			
	on Form 990, Part X?								Yes	No No
b	If "Yes," explain the arrangement in Part XIV a									
									Amount	
с	Beginning balance						. 1c			
	Additions during the year									
	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Fo	rm 990, Part X, li	ine 21?						Yes	No
	If "Yes," explain the arrangement in Part XIV.									
Par	rt V Endowment Funds. Complete if	organization ans	wered "Ye	es" to For	m 990, Part IV, I	line 10.				
		(a) Current year	r (b) F	Prior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four y	years back
1a	Beginning of year balance									
b	Contributions									
	Investment earnings or losses									
	Grants or scholarships									
	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	end balance hel	d as:							
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
с	Term endowment	<u> </u>								
3a	Are there endowment funds not in the posses	sion of the orga	nization th	at are hel	d and administe	ered for t	he organiz	ation		
	by:	-					-			Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	listed as require	d on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the									
Par	rt VI Investments - Land, Buildings				90, Part X, line	10.				
	Description of investment	(a) Cost o		1	ost or other		epreciatio	n	(d) Book	value
	-	basis (inve	stment)		sis (other)				-	
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment				L91,460.	-	185,0		6	,432.
	Other				292,210.		29,2		262	,989.
	I. Add lines 1a-1e. (Column (d) should equal For		olumn (B),		-				269	,421.

Schedule D (Form 990) 2008

Schedule D	

UNITED STATES RACQUETBALL ASSOCIATION

(a) Description of security or category	(b) Book value	(c) Method o	
(including name of security)		Cost or end-of-ye	ar market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
	+		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶			
Part VIII Investments - Program Related.	See Form 990, Part X, lin		
(a) Description of investment type	(b) Book value	(c) Method o Cost or end-of-ye	
	+		
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)	•		
Part IX Other Assets. See Form 990, Part X, lin		•	
(a) Description		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col (B)	line 15.)		▶
Part X Other Liabilities. See Form 990, Part X			
(a) Description of liability		(b) Amount	
Federal income taxes			
LINE OF CREDIT		2,369.	
Total. (Column (b) should equal Form 990, Part X, col (B)	line 25)	2,369.	

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. 832053 12-23-08

Sche	dule D (Form 990) 2008 UNITED STATES RACQUETBALL	ASSOCIATI	ON	73-0	0954204	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Financial Sta	tements	3		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		2,245,	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		2,021,	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		223,	710.
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses					
7	Prior period adjustments					
8	Other (Describe in Part XIV)					
9	Total adjustments (net). Add lines 4-8		9			0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9					710.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Reve	enue pe	r Return		
1	Total revenue, gains, and other support per audited financial statements			1	2,245,	480.
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				
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV)	2d				
е	Add lines 2a through 2d					0.
3	Subtract line 2e from line 1			3	2,245,	480.
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		0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)				2,245,	480.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme					
1	Total expenses and losses per audited financial statements			1	2,021,	770.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
	Donated services and use of facilities					
b	Prior year adjustments	2b				
С	Losses reported on Form 990, Part IX, line 25					
d	Other (Describe in Part XIV)	2d				
е	Add lines 2a through 2d					0.
3	Subtract line 2e from line 1			3	2,021,	770.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
	Investment expenses not included on Form 990, Part VIII, line 7b					
b	Other (Describe in Part XIV)	4b				-
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c . (This should equal Form 990, Part I, line 18.)			5	2,021,	770.
Pa	t XIV Supplemental Information					

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

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

2008	
Open To Public	
Inspection	

Internal Revenue Service	, , , , , ,			• •	,		Inspection				
Name of the organization						Employer ide	entification number				
UNITED	STATES RACQUETBALL	AS	SOC	IATION		73-0954	204				
Part I Fundraising Activities	. Complete if the organization answe	ered "\	∕es" to	o Form 990, Part IV,	line 17						
	e Solicitat f Solicitat g Special or oral agreement with any individual Part VII) or entity in connection with p	tion of tion of fundra (inclue profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru fundraising services?	stees o	Yes					
b If "Yes," list the ten highest paid inc						ndraiser is to	be				
compensated at least \$5,000 by the	e organization. Form 990-EZ filers are	e not re	quired	d to complete this ta	ble.						
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		or control of		or control of		(iv) Gross receipts from activity	tò (or fL	mount paid retained by) Indraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No								
Total											
3 List all states in which the organizati	on is registered or licensed to solicit	funds (or has	been notified it is ex	kempt	from registrat	ion or licensing.				

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-FZ line 6a. List events with gross receipts greater than \$5,000

		on Form 990-EZ, line 6a. List events with							
			(a) Event #1 FUNDRAISING CAMPAIGN	(b) Event #2	(c) Other Events NONE		Total col. (a col. (a) thro	
ē			(event type)	(event type)	(total number)	1	COI. (
Revenue	1	Gross receipts	43,542.				4	3,5	42.
	2	Less: Charitable contributions	16,203.				1	6,2	03.
	3	Gross revenue (line 1 minus line 2)	27,339.				2	7,3	39.
	4	Cash prizes							
lses	5	Non-cash prizes							
Direct Expenses	6	Rent/facility costs				<u> </u>			
Direct	7	Other direct expenses							
	8	Direct expense summary. Add lines 4 throug	h 7 in column (d)			()
	9	Net income summary. Combine lines 3 and 8	B in column (d)				2'	7,3	39.
Pa	irt I	Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or	reported more than	4			
		\$15,000 on Form 990-EZ, line 6a.	1	(b) Pull tabs/Instant		(d) To	tal na	mina	(Add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a)			
Rev									
	1	Gross revenue							
ő	2	Cash prizes							
bense	3	Non-cash prizes							
Direct Expenses	4	Rent/facility costs							
-	5	Other direct expenses							
	-		Yes %	Yes %	Yes%				
	6	Volunteer labor	Νο	Νο	No				
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		►	()
	8	Net gaming income summary. Combine lines	1 and 7 in column (d)						
_								Yes	No
		ter the state(s) in which the organization opera				-			
		he organization licensed to operate gaming ac No," Explain:	ctivities in each of these s	states?			9a		
~		,							
10a	We	ere any of the organization's gaming licenses re	evoked suspended or te	rminated during the tax	vear?	-	10a		
		Yes," Explain:		animated during the tax	you:	·····	100		
11		es the organization operate gaming activities v	with nonmembers?			-	11		
12		he organization a grantor, beneficiary or truste							
		minister charitable gaming?					12		

Schedule G (Form 990 or 990 EZ) 2008 UNITED STATES RACQUETBALL ASSOCIATION 73-0954204 Page 3

						Yes	NO
13	Indicate the percentage of gaming activity operated in:						
a	The organization's facility	13a		%			
	An outside facility	13b		%			
	Provide the name and address of the person who prepares the organization's gaming/special events bool		records:	<i>,</i> , , , , , , , , , , , , , , , , , ,			
••		to and	1000100.				
	Name						
				-			
	Address 🕨						
	Address 🕨						
15a	Does the organization have a contract with a third party from whom the organization receives gaming reve	enue?		15	5a		
		indo.					
h	o If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and	d the a	mount				
~	of gaming revenue retained by the third party \triangleright \$						
	c If "Yes," enter name and address:						
	Name 🕨						
				-			
	Address 🕨						
16	Gaming manager information:						
	Name						
	Name			-			
	Gaming manager compensation 🕨 \$						
	Description of services provided 🕨						
				-			
				-			
	Director/officer Employee Independent contractor						
17	Mandatory distributions:						
	I is the organization required under state law to make charitable distributions from the gaming proceeds to						
Ľ	retain the state gaming license?			17	7a		
F	Enter the amount of distributions required under state law distributed to other exempt organizations or sp						
	organization's own exempt activities during the tax year > \$	one in					

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE I			•						OMB No. 1	1545-0047
(Form 990)				l Other Assistance ments, and Individ	-	s,			200	08
Department of the Treasury Internal Revenue Service		Comp	lete if the organization	on answered "Yes Attach to For		art IV, lines 21 or 22.			Open to	
Name of the organizat	tion			Attach to For	m 990.			Employer	identificatio	
Name of the organizat		ATES RACO	UETBALL ASS	OCIATION				Employer	73-09	
Part I General I	nformation on Grants a									
1 Does the organi	zation maintain records	to substantiate the	e amount of the grants	s or assistance, the	e grantees' eligibili	ty for the grants or as	sistance, and the sele	ction		
	award the grants or assi								Yes	X No
	IV the organization's pr								_	
Part II Grants an	nd Other Assistance to	Governments and	d Organizations in the	e United States.	Complete if the org	anization answered "	Yes" on Form 990, Pa	rt IV, line 21	l, for any	
recipient t	that received more than	\$5,000. Check this	s box if no one recipie	nt received more th	nan \$5,000. Use P	art IV and Schedule I-	1 (Form 990) if additio	nal space i	s needed	
	ddress of organization overnment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance		Purpose of or assistance	
ST. JUDE CHILDREN 332 N. LAUDERDALM MEMPHIS, TN 3810	E	62-0646012	3	11,248.	0.	воок				
	ber of section 501(c)(3) a ber of other organization							 Þ	·	1.

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Schedule I (Form 990) 2008

UNITED STATES RACQUETBALL ASSOCIATION

73-0954204

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	5	2,750.	. 0.	воок	
PAYMENTS TO ATHLETES FOR TOURNAMENT RESULTS (CPRT)	12	4,560.	. 0.	воок	
PRIZE MONEY AND AWARDS PAID FOR IRF & WPRO		50.000			
FOURNAMENTS	2	58,000.	. 0.	воок	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Page **2**

NonCash Contributions

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. OMB No. 1545-0047

2008 Open to Public Inspection

Department of the Treasury Internal Revenue Service	
Name of the organization	n

Attach to Form 990.

UNITED STATES RACQUETBALL ASSOCIATION

Employer identification number 73 - 0954204

Pa	rt I Types of Property									
	· · · · · · · · · · · · · · · · · · ·	(a)	(b)	(c)		(d)				
		Check if	Number of	Revenues reported of Form 990, Part VIII, line	on	Method of dete		g		
		applicable	Contributions	Form 990, Part VIII, Ime	e ig	revenue	5			
1	Art - Works of art									
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications									
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded									
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution									
	(historic structures)									
14	Qualified conservation contribution (other)									
15	Real estate - Residential									
16	Real estate - Commercial									
17	Real estate - Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other (PORTABLE COUR)	Х	2	292,21						
26	Other \blacktriangleright (UNIFORMS & VE)	X	13	112,22	22.	COST				
27	Other ▶ ()									
28	Other ► (
29	Number of Forms 8283 received by the organi	zation durin	g the tax year	for contributions						
	for which the organization completed Form 82	83, Part IV,	Donee Acknow	vledgment	29					
								Yes	No	
30a	During the year, did the organization receive b	y contributio	on any propert	y reported in Part I, lines	s 1-28	B that it must hold for				
	at least three years from the date of the initial	contribution	, and which is	not required to be used	for e	xempt purposes for				
	the entire holding period?						30a		X	
b	If "Yes," describe the arrangement in Part II.									
31	Does the organization have a gift acceptance	policy that r	equires the rev	view of any non-standard	d con	tributions?	31		Х	
32a	Does the organization hire or use third parties	or related o	rganizations to	solicit, process, or sell	nonc	ash				
	contributions?						32a		Х	
b	If "Yes," describe in Part II.									
33	If the organization did not report revenues in c	olumn (c) fo	r a type of pro	perty for which column	(a) is	checked,				
	describe in Part II.									
LHA	For Privacy Act and Paperwork Reduction	n Act Notice	, see the Inst	ructions for Form 990.		Schedule M	(Form	990)	2008	

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008 Open to Public Inspection

Employer identification number

73-0954204

OMB No. 1545-0047

UNITED STATES RACQUETBALL ASSOCIATION

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SPORT OF RACQUETBALL IN THE UNITED STATES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DEVELOPMENT OF COMPETITIVE TEAMS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MEMBERSHIP - APPROXIMATELY 15,500 MEMBERS BENEFIT FROM THE ACTIVITIES

OF THE ASSOCIATION, INCLUDING THE PUBLICATION OF RULEBOOKS.

EXPENSES \$ 237398. INCLUDING GRANTS OF \$ 0. REVENUE \$ 559651.

INTL EVENTS - THE ASSOCIATION SPONSORS INTERNATIONAL COMPETITIONS FOR

ITS MEMBERS.

EXPENSES \$ 108009. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION IS A MEMBERSHIP ORGANIZATION AND HAS APPROXIMATELY 15,500 MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ARE ENCOURAGED TO VOTE TO ELECT BOARD MEMBERS EITHER VIA A WEBSITE OR USING A BALLOT WHICH IS DISTRIBUTED IN THE QUARTERLY MAGAZINE.

FORM 990, PART VI, SECTION A, LINE 10: MANAGEMENT AND THE TREASURER OF THE ORGANIZATION REVIEW THE FORM 990 PRIOR TO FILING THE RETURN. A COPY IS EMAILED TO THE EXECUTIVE BOARD AFTER THIS REVIEW BEFORE THE FORM IS FILED. SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. OMB No. 1545-0047

UNITED STATES RACQUETBALL ASSOCIATION

Employer identification number 73 - 0954204

FORM 990, PART VI, SECTION B, LINE 12C: A CONFLICT OF INTEREST STATEMENT

IS FILLED OUT ANNUALLY WHICH IS DISCUSSED AND EVALUATED.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS REVIEWS

COMPARATIVE DATA AND SETS THE EXECUTIVE DIRECTOR'S COMPENSATION. THE

EXECUTIVE DIRECTOR REVIEWS COMPARATIVE DATA AND DETERMINES COMPENSATION FOR

ALL OTHER EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 18: DOCUMENTS ARE PROVIDED ON THE

ORGANIZATION'S WEBSITE AND UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: SOME FINANCIAL INFORMATION IS

PROVIDED ON THE ORGANIZATION'S WEBSITE AND UPON REQUEST.

SCHEDULE R

(Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

▶ See separate instructions.

OMB No. 1545-0047 2008

Open to Public Inspection

Name of the organization

UNITED STATES RACQUETBALL ASSOCIATION

Employer identification number 73-0954204

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A)	(B)	(C)	(D)	(E)	(F)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity
UNITED STATES OLYMPIC COMITTEE - 13-1548339	TO ESTABLISH NATIONAL GOALS				
ONE OLYMPIC PLAZA	FOR AMATEUR ATHLETIC				
COLORADO SPRINGS, CO 80909	ACTIVITIES.	COLORADO	3		
	-				

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

Schedule R (Form 990) 2008 UNITED STATES RACQUETBALL ASSOCIATION

Part III Identification of Related Organizations Taxable as a Partnership

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(1	H)	(I)	(.	J)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, investment, unrelated)	Share of total income		ate allo	cations?	amount in box 20 of Schedule	Gene mana parti	aging ner?
		country)					Yes	No	K-1 (Form 1065)	Yes	No
											<u> </u>
											<u> </u>
											1
											1

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership

Schedule R (Form 990) 2008 UNITED STATES RACQUETBALL ASSOCIATION

Part V Transactions With Related Organizations

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV.			Yes	No
	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?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		Х
b	Gift, grant, or capital contribution to other organization(s)		1b		Х
с	Gift, grant, or capital contribution from other organization(s)		1c	Х	
d	Loans or loan guarantees to or for other organization(s)		1d		Х
е	Loans or loan guarantees by other organization(s)		1e		Х
f	Sale of assets to other organization(s)		1f		Х
g	Purchase of assets from other organization(s)		1g		Х
h	Exchange of assets		1h		Х
i	Lease of facilities, equipment, or other assets to other organization(s)		1 i		Х
j	Lease of facilities, equipment, or other assets from other organization(s)		1j		Х
k	Performance of services or membership or fundraising solicitations for other organization(s)		1k		Х
- 1	Performance of services or membership or fundraising solicitations by other organization(s)		11		Х
	Sharing of facilities, equipment, mailing lists, or other assets				Х
	Sharing of paid employees				Х
o	Reimbursement paid to other organization for expenses		1o		X
	Reimbursement paid by other organization for expenses				Х
q	Other transfer of cash or property to other organization(s)		1q		Х
r	Other transfer of cash or property from other organization(s)		1r		Х
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 tr	ansaction thresholds			
	(A)	(B)	(0	•	
	Name of other organization(s)	Transaction	Amount		d
		type (a-r)			
(1) T	INITED STATES OLYMPIC COMMITTEE	C	2	24,1	92.
(2)					
(3)					
(4)					
·					
(5)					
(-)					

Schedule R (Form 990) 2008

832163 12-23-08

(6)

Schedule R (Form 990) 2008 UNITED STATES RACQUETBALL ASSOCIATION

Part VI Unrelated Organizations Taxable as a Partnership

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)	(B)	(C)	(D)		(E)	(F	-)	(G)		H)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all section organiz		Share of end-of- year assets	Dispr tior alloca	opor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	eral or aging iner?
		country)	Yes			Yes	No	(Form 1065)	Yes	

Schedule R (Form 990) 2008

FC

FORM 990	LIST (OF STATES	RECEIVING	COPY OF	RETURN	STATEMENT	1
		PAR	r vi, line	17			

STATES

COLORADO

Department of the Treasury	Exempt Organization Bus (and proxy tax und			ax Return		OMB No. 1545-0687			
	calendar year 2008 or other tax year beginning		, and ending		Ę	501(c)(3) Organizations Only			
A Check box if address changed	Name of organization (Check box if name of	hanged	and see instructions.)		(Empl	over identification number ovees' trust, see instructions ock D on page 9.)			
B Exempt under section Print	UNITED STATES RACQUETE	BALL	ASSOCIATIO	N	7	3-0954204			
408A 530(a)	City or town, state, and ZIP code								
529(a)	COLORADO SPRINGS, CO	809	04		541	800			
	up exemption number (See instructions for Block F.)								
at end of year G Cher 702,872.									
H Describe the organization's prin	nary unrelated business activity. 🕨 🥵	EE	STATEMENT 2						
I During the tax year, was the con	rporation a subsidiary in an affiliated group or a pare	nt-subs	idiary controlled group?	► [Ye	s X No			
	ntifying number of the parent corporation.								
	THE ORGANIZATION		· · · ·	one number 🕨 (
	ide or Business Income		(A) Income	(B) Expenses	5	(C) Net			
 1 a Gross receipts or sales b Less returns and allowances 		10							
	c Balance ►	1c 2							
3 Gross profit. Subtract line 2		2							
•	ich Schedule D)	4a							
	Part II, line 17) (attach Form 4797)	4b							
	usts	4c							
	hips and S corporations (attach statement)	5							
6 Rent income (Schedule C)	· · · · · · · · · · · · · · · · · · ·	6							
7 Unrelated debt-financed inco	ome (Schedule E)	7							
8 Interest, annuities, royalties,	and rents from controlled organizations (Sch. F)	8							
9 Investment income of a sect	ion 501(c)(7), (9), or (17) organization								
		9							
	come (Schedule I)	10	1.61 1.0.6	<u> </u>	~~	100 100			
	le J)	11	161,196.	52,0	08.	109,188.			
	ons; attach schedule.)	12 13	161,196.	52,0	0.8	109,188.			
13 Total. Combine lines 3 thro Part II Deductions N	ugh 12 I ot Taken Elsewhere (see instructions fo		2	52,0	00.	109,100.			
	butions, deductions must be directly connecte			s income.)					
14 Compensation of officers, of	directors, and trustees (Schedule K)				14				
					15				
					16				
					17				
					18				
19 Taxes and licenses					19				
	ee instructions for limitation rules.)				20				
	4562)								
	on Schedule A and elsewhere on return				22b				
	ampanaatian plana				23				
	ompensation plans				24 25				
26 Excess exempt expenses (S	S Schadula IV				25				
27 Excess readership costs (S									
28 Other deductions (attach so									
29 Total deductions. Add li	, ines 14 through 28				28 29	109,188.			
30 Unrelated business taxable	•								
	on (limited to the amount on line 30)				31				
32 Unrelated business taxable	income before specific deduction. Subtract line 31 f	rom line	30		32	0.			
33 Specific deduction (Genera	lly \$1,000, but see instructions for exceptions)				33	1,000.			
	kable income. Subtract line 33 from line 32. If line	•				•			
					34	0.			
823701 3-09-09 LHA For Privacy A	ct and Paperwork Reduction Act Notice, see instruc	tions.				Form 990-T (2008)			

Part I	I Tax Computation							
35	Organizations Taxable as Corpor	ations. See instructions for tax co	omputation.					
	Controlled group members (section	ns 1561 and 1563) check here 🕨	See instructions and	1:				
а	Enter your share of the \$50,000, \$							
	(1) \$							
b	Enter organization's share of: (1)							
	(2) Additional 3% tax (not more th							_
	Income tax on the amount on line				► 35c			0.
36	Trusts Taxable at Trust Rates. Se							
		Schedule D (Form 1041)						
	Proxy tax. See instructions				37			
38	Alternative minimum tax				. 38			
	Total. Add lines 37 and 38 to line	35c or 36, whichever applies			. 39			0.
	V Tax and Payments							
	Foreign tax credit (corporations at			40a	_			
	Other credits (see instructions)			40b	_			
	General business credit. Attach Fo			40c				
	Credit for prior year minimum tax							
	Total credits. Add lines 40a throu							0.
41	Subtract line 40e from line 39 Other taxes. Check if from: F	orm 4055			41			0.
42 43								0.
	Payments: A 2007 overpayment of	raditad to 2008		44a	. 40			<u>.</u>
	2008 estimated tax payments			44a 44b	_			
	Tax deposited with Form 8868			44c	_			
	Foreign organizations: Tax paid or			44d	_			
	Backup withholding (see instructio			44e				
	Other credits and payments:	Form 2439						
•	Form 4136	Other	Total •	44f				
45	Total payments. Add lines 44a thr	Ough 44f			45			
46	Estimated tax penalty (see instruct	tions). Check if Form 2220 is attac	ched 🕨 🗌		46			
	Tax due. If line 45 is less than the							0.
	Overpayment. If line 45 is larger the				48			0.
	Enter the amount of line 48 you wa			Refunded	49			
Part V	Statements Regard	ing Certain Activities a	and Other Information	on (See instructions on pa	age 18)			
1 At a	ny time during the 2008 calendar y	ear, did the organization have an	interest in or a signature or ot	her authority over a financial	account	,	Yes I	No
(bar	k, securities, or other) in a foreign	country? If YES, the organization	may have to file Form TD F 90)-22.1, Report of Foreign Ban	k and			Х
Fina 2 Durir	ncial Accounts. If YES, enter the na	ame of the foreign country here 🕨	<u> </u>					
	ng the tax year, did the organization receins, see page 5 of the instructions for other	ve a distribution from, or was it the gran forms the organization may have to file	tor of, or transferor to, a foreign tru	st?				X
	r the amount of tax-exempt interes	9	,					
Sched	ule A - Cost of Goods S	Sold. Enter method of invent						
		i i i	N/A					
	ntory at beginning of year	1		r	. 6			
	chases	2	7 Cost of goods sold. Su					
	t of labor	3		and in Part I, line 2	. 7			
	itional section 263A costs	4a	8 Do the rules of section				Yes I	No
	er costs (attach schedule)	4b		cquired for resale) apply to				
5 Tota	al. Add lines 1 through 4b	5 that I have examined this return, includi		to to make and to the best of mult				X
Sign		f preparer (other than taxpayer) is based			nowledge a	nd belief, it is tr	rue,	_
Here		I		сл.	,	S discuss this r		h
nere	Signature of officer	Date	TREASUR			r shown below	`	
		υαισ	Date			s)? X Yes		No
Paid	Preparer's signature		Duit	Check if self-employed	•	SSN or PTIN 045083		
Prepare	r'S Firm's name (or LIA LIC)	H & GOODWIN, LL	 P			66527	0	
Use Only		GARDEN OF THE				00341		
		RADO SPRINGS, C				9) 590	0-07	77
		TTO DININGD' C	5 5 5 5 6 7	1	() 1	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, ,

Form 990-T (2008)	UNITED	STATES	RACQUETBALL	ASSOCIATION	73-0954204	Page
Schedule C	- Rent Inco	me (From I	Real Property and	Personal Property	Leased With Real Property)(see instr. of	on pg 19)

1 Description of property

(1)											
(2)											
(3)											
(4)											
	2	2 Rent received	or accrued								
(a) From personal property (if t	the percenta	age of	(b) F	rom real ar	nd personal proper	ty (if the perc	entage	e 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)			
rent for personal property is 10% but not more that	s more than n 50%)		` ´o	f rent for pe the rent	ersonal property ex t is based on profit	ceeds 50% c or income)	or if				
	,					,					
(1)											
(2)											
(3)											
(4)		•									
Total		0.	Total				0.	(h) Tatal dadua			
(c) Total income. Add totals of colu								(b) Total deduct Enter here and on p			
here and on page 1, Part I, line 6, co	olumn (A)		🕨				0.	Part I, line 6, colum	n (B)	• 0	
Schedule E - Unrelated	Debt-F	Financed	Incom	1e (See	instructions o	n page 19)				
								3 Deductions dire	ectly conn	ected with or allocable	
					2 Gross ind or allocable		(2)	to debt-financed property (a) Straight line depreciation (b) Other deduction			
Description of c	debt-finance	ed property			financed	property	(a)	(attach schedule)	auon	(attach schedule)	
(1)											
(2)											
(3)											
(4)							_				
4 Amount of average acquisition debt on or allocable to debt-financed	ł	5 Average of or a	adjusted ba llocable to	asis	6 Column by colu			7 Gross income reportable (column		8 Allocable deductions (column 6 x total of columns	
property (attach schedule)		debt-finar	nced proper schedule)	operty				2 x column 6)		3(a) and 3(b))	
		Juridon	(seriedale)								
(1)						%	0				
(2)						%	0				
(3)						%	, 0				
(4)						%	0				
					•		Enter h	ere and on page 1,		Enter here and on page 1,	
								ne 7, column (A).		Part I, line 7, column (B).	
Totals									0.	. 0	
Total dividends-received deduction	nns includ	led in column	8							0	
Schedule F - Interest, A	nnuitie	es. Roval	ties, ar	nd Ren	ts From C	ontrolle	d Orga	nizations (S	ee instr	-	
					t Controlled C			(3		dottorio on pago 20)	
4		2		Exemp	3		4	5		6	
1 Name of controlled organizatio	n	Employer ide			nrelated income Total of specified				connected with meetine		
		numb	ber	(loss) (s	see instructions)	paym	ents made	organization's g	ross inco	me in column 5	
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organiza	ations										
7 Taxable Income		Inrelated incom		9 Tot	tal of specified pay	ments		olumn 9 that is inclue		1 Deductions directly connected	
	(s	see instructions))		made		in the cor	trolling organization's gross income	\$	with income in column 10	
(1)											
(2)											
(3)											
(4)				I							
							Add columns			d columns 6 and 11.	
							Enter here ar line 8, colum	nd on page 1, Part I, n (A)		ter here and on page 1, Part I, e 8, column (B).	
Totals						►			0.	0	

Page 3

73-0954204

Page 4

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions on page 21)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).
Totals	0.			0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions on page 21)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).			
(1)									
(2)									
(3)									
(4)									
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.			
Totals	0.	Ο.				0.			
Schedule J - Advertising Income (see instructions on page 21)									

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more
	income	, , , , , , , , , , , , , , , , , , ,	cols. 5 through 7.			than column 4).
(1)						
(2)			1			
(3)						1
(4)						
	0	0				0
Totals (carry to Part II, line (5)) >	0.	0.			1	ι υ.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.			7 Excess readership costs (column 6 minus column 5, but not more than column 4).	
(1) RACQUETBALL							
(2) MAGAZINE	161,196.	52,008.	109,188.	72,235	. 19	5,651.	109,188.
(3)							
(4)							
(5) Totals from Part I	0.	0.					0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).					Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	161,196.	52,008.					109,188.
Schedule K - Compensatio	n of Officers,	Directors, and	d Trustees (see ir	nstructions on p	age 22)		
1 Name			2 Title				ensation attributable related business
					%		
					%		
					%		
					%		
Total Enter here and on name 1 Part II I	ine 1/						0.

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 2 BUSINESS ACTIVITY

ADVERTISING IN THE ASSOCIATION'S PUBLICATION MAILED TO THE MEMBERS TO PROMOTE THE SPORT OF RACQUETBALL.

TO FORM 990-T, PAGE 1