Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2003

Open to Public Inspection

A For the 2003 calendar year, or tax year beginning OCT 1, 2003 and ending SEP 30, 2004

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return ☒ Amended return ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: NORTH AMERICAN FLYBALL ASSOCIATION, INC.

Number and street (or P.O. box if mail is not delivered to street address): 1400 W DEVON AVE — Room/suite: 512

City or town, state or country, and ZIP + 4: CHICAGO, IL 60660

D Employer identification number: 38-3257568

E Telephone number: 800-318-6312

F Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? N/A ☐ Yes ☐ No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

G Website: ▶ WWW.FLYBALL.ORG

J Organization type (check only one) ▶ ☒ 501(c) (4) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

I Group Exemption Number ▶

M Check ▶ ☒ if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 133,502.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a			
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c			
	d	**Total** (add lines 1a through 1c) (cash $ ___ noncash $ ___)			1d	0.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	106,974.
	3	Membership dues and assessments			3	22,123.
	4	Interest on savings and temporary cash investments			4	1,785.
	5	Dividends and interest from securities			5	
	6 a	Gross rents	6a			
	b	Less: rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
	7	Other investment income (describe ▶)			7	
	8 a	Gross amount from sales of assets other than inventory — (A) Securities: ___; (B) Other: ___	8a			
	b	Less: cost or other basis and sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	
	9	Special events and activities (attach schedule). If any amount is from **gaming**, check here ▶ ☐				
	a	Gross revenue (not including $ ___ of contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
	10 a	Gross sales of inventory, less returns and allowances	10a	2,605.		
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) STMT 1			10c	2,605.
	11	Other revenue (from Part VII, line 103)			11	15.
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	133,502.
Expenses	13	Program services (from line 44, column (B))			13	66,393.
	14	Management and general (from line 44, column (C))			14	46,637.
	15	Fundraising (from line 44, column (D))			15	
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** (add lines 16 and 44, column (A))			17	113,030.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	20,472.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	287,558.
	20	Other changes in net assets or fund balances (attach explanation)			20	0.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	308,030.

Part II **Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) cash $ noncash $	22				
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc.	25	0.	0.	0.	0.
26 Other salaries and wages	26	13,700.		13,700.	
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32	1,373.		1,373.	
33 Supplies	33	25,263.	19,080.	6,183.	
34 Telephone	34	1,228.	1,228.		
35 Postage and shipping	35	10,686.	2,322.	8,364.	
36 Occupancy	36				
37 Equipment rental and maintenance	37	1,829.	1,829.		
38 Printing and publications	38	5,743.	5,743.		
39 Travel	39	15,758.		15,758.	
40 Conferences, conventions, and meetings	40	3,263.	3,263.		
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	32,558.	32,558.		
43 Other expenses not covered above (itemize):					
a BANK CHARGES	43a	394.		394.	
b INSURANCE	43b	865.		865.	
c VIDEO	43c	370.	370.		
d	43d				
e	43e				
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	113,030.	66,393.	46,637.	0.

Joint Costs. Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ Yes ☒ No

If "Yes," enter **(i)** the aggregate amount of these joint costs $ ______ ; **(ii)** the amount allocated to Program services $ ______ ;

(iii) the amount allocated to Management and general $ ______ ; and **(iv)** the amount allocated to Fundraising $ ______

Part III **Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose? ▶ SUPPORT RESPONSIBLE DOG OWNERSHIP

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a SEE STATEMENT 2 (Grants and allocations $)	52,008.
b REGISTERED 1434 NEW DOGS TO PARTICIPATE IN THE SPORT AND REGISTERED 57 NEW CLUBS ACROSS THE US AND CANADA (Grants and allocations $)	3,550.
c PROVIDE MAINTENANCE FOR 22 ELECTRONIC JUDGING SYSTEMS AND 18 MEASURING DEVICES THAT ARE SHIPPED TO TOURNAMENTS ACROSS THE US AND CANADA (Grants and allocations $)	1,829.
d PUBLISHED NAFA NEWS TO 362 ACTIVE CLUBS AND THEIR DELEGATES 4 TIMES DURING THE YEAR. (Grants and allocations $)	5,743.
e Other program services (attach schedule) STATEMENT 3 (Grants and allocations $)	3,263.
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	66,393.

Part IV Balance Sheets

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets					
45 Cash - non-interest-bearing			27,993.	45	32,714.
46 Savings and temporary cash investments			157,199.	46	190,027.
47 a Accounts receivable	47a	5,986.			
b Less: allowance for doubtful accounts	47b		3,707.	47c	5,986.
48 a Pledges receivable	48a				
b Less: allowance for doubtful accounts	48b			48c	
49 Grants receivable				49	
50 Receivables from officers, directors, trustees, and key employees				50	
51 a Other notes and loans receivable	51a				
b Less: allowance for doubtful accounts	51b			51c	
52 Inventories for sale or use				52	
53 Prepaid expenses and deferred charges				53	
54 Investments - securities ▶ ☐ Cost ☐ FMV				54	
55 a Investments - land, buildings, and equipment: basis	55a				
b Less: accumulated depreciation	55b			55c	
56 Investments - other				56	
57 a Land, buildings, and equipment: basis	57a	177,023.			
b Less: accumulated depreciation STMT 4	57b	96,702.	105,236.	57c	80,321.
58 Other assets (describe ▶)				58	
59 **Total assets** (add lines 45 through 58) (must equal line 74)			294,135.	59	309,048.
Liabilities					
60 Accounts payable and accrued expenses			6,577.	60	1,018.
61 Grants payable				61	
62 Deferred revenue				62	
63 Loans from officers, directors, trustees, and key employees				63	
64 a Tax-exempt bond liabilities				64a	
b Mortgages and other notes payable				64b	
65 Other liabilities (describe ▶)				65	
66 **Total liabilities** (add lines 60 through 65)			6,577.	66	1,018.
Net Assets or Fund Balances					
Organizations that follow SFAS 117, check here ▶ [X] and complete lines 67 through 69 and lines 73 and 74.					
67 Unrestricted			287,558.	67	308,030.
68 Temporarily restricted				68	
69 Permanently restricted				69	
Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
70 Capital stock, trust principal, or current funds				70	
71 Paid-in or capital surplus, or land, building, and equipment fund				71	
72 Retained earnings, endowment, accumulated income, or other funds				72	
73 **Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72; column (A) **must** equal line 19; column (B) **must** equal line 21)			287,558.	73	308,030.
74 **Total liabilities and net assets / fund balances** (add lines 66 and 73)			294,135.	74	309,048.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

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12-17-03

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements	a	N/A
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments $		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify): $		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify): $		
	Add amounts on lines (1) and (2)	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	N/A
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify): $		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify): $		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 5		0.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? If "Yes," attach schedule. ▶ [ ] Yes [X] No

Part VI Other Information

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78 a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ ________ and check whether it is ☐ exempt or ☐ nonexempt.			
81 a	Enter direct or indirect political expenditures. See line 81 instructions — 81a: 0.			
b	Did the organization file **Form 1120-POL** for this year?	81b		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) — 82b: N/A			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b		
85	*501(c)(4), (5), or (6) organizations.* a Were substantially all dues nondeductible by members?	85a	X	
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b	X	
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members — 85c: N/A			
d	Section 162(e) lobbying and political expenditures — 85d: N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices — 85e: N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85f: N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	*501(c)(7) organizations.* Enter: a Initiation fees and capital contributions included on line 12 — 86a: N/A			
b	Gross receipts, included on line 12, for public use of club facilities — 86b: N/A			
87	*501(c)(12) organizations.* Enter: a Gross income from members or shareholders — 87a: N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) — 87b: N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89 a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A			
b	*501(c)(3) and 501(c)(4) organizations.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0.			
90 a	List the states with which a copy of this return is filed ▶ NONE			
b	Number of employees employed in the pay period that includes March 12, 2003 — 90b: 0			
91	The books are in care of ▶ DALE SMITH Telephone no. ▶ 402-468-4804 Located at ▶ 6137 N RIDGE ROAD, FORT CALHOUN, NE ZIP + 4 ▶ 68023			
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041**- Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92: N/A			

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: *Enter gross amounts unless otherwise indicated.*

	Unrelated business income (A) Business code	Unrelated business income (B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	Excluded by section 512, 513, or 514 (D) Amount	(E) Related or exempt function income
93 Program service revenue:					
a TOURNAMENT SANCTIONING					106,974.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					22,123.
95 Interest on savings and temporary cash investments			14	1,785.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					2,605.
103 Other revenue:					
a ROYALTY-NAFA LOGO					15.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		1,785.	131,717.

105 Total (add line 104, columns (B), (D), and (E)) ▶ 133,502.

Note: *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	SEE STATEMENT 6

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
N/A	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).*

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

▶ Dale Smith | 2/15/06 ▶ Dale Smith Treasurer

Signature of officer | Date | Type or print name and title.

Paid Preparer's Use Only

Preparer's signature ▶ Steven Mueller CPA | Date 2/14/06 | Check if self-employed ▶ ☐ | Preparer's SSN or PTIN

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ SEIM, JOHNSON, SESTAK & QUIST, LLP
8807 INDIAN HILLS DRIVE, SUITE 300
OMAHA, NE 68114-4123

EIN ▶

Phone no. ▶ (402)330-2660

323161 12-17-03

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	RACING EQUIPMENT	100101	SL	5.00	16	45,872.			45,872.	18,348.		9,174.
2	RACING EQUIPMENT	100102	SL	5.00	16	61,829.			61,829.	12,366.		12,366.
3	RACING EQUIPMENT	100103	SL	5.00	16	7,644.			7,644.			1,529.
4	RACING EQUIPMENT	100199	SL	5.00	16	10,155.			10,155.	8,124.		2,031.
5	RACING EQUIPMENT	100100	SL	5.00	16	32,547.			32,547.	19,527.		6,509.
6	TRADEMARK COSTS	100195	SL	20.00	16	9,332.			9,332.	3,734.		467.
7	TRADEMARK COSTS	100196	SL	20.00	16	1,055.			1,055.	370.		53.
8	TRADEMARK COSTS	100197	SL	20.00	16	1,086.			1,086.	325.		54.
9	TRADEMARK COSTS	100198	SL	20.00	16	1,639.			1,639.	410.		82.
10	TRADEMARK COSTS	100199	SL	20.00	16	1,000.			1,000.	200.		50.
11	TRADEMARK COSTS	100100	SL	20.00	16	2,203.			2,203.	330.		110.
12	INCORPORATION COSTS	010193	SL	20.00	16	500.			500.	232.		25.
13	TRADEMARK COSTS	100101	SL	20.00	16	1,405.			1,405.	140.		70.
14	TRADEMARK COSTS	100102	SL	20.00	16	756.			756.	38.		38.
	* TOTAL 990 PAGE 2 DEPR					177,023.		0.	177,023.	64,144.	0.	32,558.

328102
05-01-03

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction

FORM 990 INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10 STATEMENT 1

INCOME

1. GROSS RECEIPTS	2,605	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		2,605
4. COST OF GOODS SOLD (LINE 13)		
5. GROSS PROFIT (LINE 3 LESS LINE 4)		2,605

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	
7. MERCHANDISE PURCHASED	
8. COST OF LABOR	
9. MATERIALS AND SUPPLIES	
10. OTHER COSTS	
11. ADD LINES 6 THROUGH 10	
12. INVENTORY AT END OF YEAR	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12). .	

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 2

DESCRIPTION OF PROGRAM SERVICE ONE

SANCTIONED 305 EVENTS ACROSS THE US AND CANADA WHERE 45,560 DOGS AND THEIR OWNERS COMPETED. NAFA PROVIDED EJS SYSTEMS, CONSISTENT RULES & JUDGES AND AWARDS FOR 5340 TITLES EARNED INCLUDING CERTIFICATES, PINS AND PLAQUES.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		52,008.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 3

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
EXPOSED FLYBALL TO NEW TRAINERS AND PROSPECTIVE HANDLERS AT APDT WITH A WELL-RECEIVED BOOTH		3,263.
TOTAL TO FORM 990, PART III, LINE E		3,263.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 4

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
RACING EQUIPMENT	45,872.	27,522.	18,350.
RACING EQUIPMENT	61,829.	24,732.	37,097.
RACING EQUIPMENT	7,644.	1,529.	6,115.
RACING EQUIPMENT	10,155.	10,155.	0.
RACING EQUIPMENT	32,547.	26,036.	6,511.
TRADEMARK COSTS	9,332.	4,201.	5,131.
TRADEMARK COSTS	1,055.	423.	632.
TRADEMARK COSTS	1,086.	379.	707.
TRADEMARK COSTS	1,639.	492.	1,147.
TRADEMARK COSTS	1,000.	250.	750.
TRADEMARK COSTS	2,203.	440.	1,763.
INCORPORATION COSTS	500.	257.	243.
TRADEMARK COSTS	1,405.	210.	1,195.
TRADEMARK COSTS	756.	76.	680.
TOTAL TO FORM 990, PART IV, LN 57	177,023.	96,702.	80,321.

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 5

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
STEVE MCAVOY 1002 E SAMUEL AVE PEORIA HEIGHTS, IL 61614	EXECUTIVE DIRECTOR/CEO 5	0.	0.	0.
SAM FORD PO BOX 1338 LA PORTE, TX 77572	CHAIRMAN 5	0.	0.	0.
ULE JAMES 4517 SAGE ROAD ROCHESTER, IL 62563	VICE CHAIRMAN 4	0.	0.	0.
GLEN HAMILTON 3983 IRWIN STREET INNISFIL, ON L9S2T5	SECRETARY 4	0.	0.	0.
JEFF KINSLEY 6699 HIGHWAY HH ROBERTSVILLE, MO 63072	BOARD MEMBER 4	0.	0.	0.
KEN ELDRIDGE 48 WESTAWAY PL HAMILTON, ON L9C2G1, AK 00000	BOARD MEMBER 4	0.	0.	0.
BRIAN FAY 60 ESTHER LORRIE DR, #104 REXDALE, ON M9W4T9, AK 00000	BOARD MEMBER 4	0.	0.	0.
AARON HUGHES 2253 AMHERST AVE SYDNEY, BC V8L2G5, AK 00000	BOARD MEMBER 4	0.	0.	0.
LEE HEIGHTON 10390 LINDSEY ROAD CASCO, MI 48064	BOARD MEMBER 4	0.	0.	0.
TODD MORNINGSTAR 10090 FAR RD MILAN, MI 48160	TREASURER 5	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		0.	0.	0.

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES STATEMENT 6

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	FOR EACH SANCTIONED TOURNAMENT HELD, FEES WERE ASSESSED TO COVER TRACKING OF POINTS AND ISSUING OF AWARDS FOR VARIOUS TITLES RECEIVED AS A RESULT OF THE SANCTIONED COMPETITION. ELECTRONIC TIMING SYSTEMS ARE ALSO PROVIDED FOR THESE EVENTS WHICH ARE FUNDED FROM THIS INCOME.
94	FEES ARE CHARGED FOR EACH DOG AND CLUB REGISTERED WITH NAFA. ONCE A DOG OR CLUB IS REGISTERED, THE REGISTRATION IS GOOD INDEFINITELY. REGISTRATION FEES GO TO DEFRAY ONE-TIME SETUP AND PROCESSING EFFORTS FOR EACH DOG/CLUB REGISTERED. INITIAL RULES AND DOCUMENTS ARE PROVIDED TO THE REGISTRANT SUPPORTED BY THESE FEES.
102	UNIQUE PATCHES ARE PROVIDED TO RECOGNIZE MEMBER'S TITLES EARNED IN COMPETITION. THESE PATCHES ARE PURCHASED IN VOLUME SO THEY CAN BE ACQUIRED COST-EFFECTIVELY BY MEMBERS.
103A	THE NAFA LOGO, A REGISTERED TRADEMARK, WAS USED TO PRODUCE CLOTHING ITEMS. A NOMINAL FEE WAS CHARGED TO PROTECT THE ORGANIZATION'S INTEREST IN THE REGISTERED TRADEMARK.