

Return of Organization Exempt From Income Tax

2007

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning **January**, 2007, and ending **December**, 20 **07**

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization
United States of America Deaf Basketball, Inc.
 (Delivered to street address) Room/suite

D Employer identification number
48 1138210

E Telephone number
 [REDACTED]

F Accounting method: Cash Accrual
 Other (specify) ▶

G Website: ▶ **www.usadb.us**

J Organization type (check only one) ▶ 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check here ▶ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **165,268**

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? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)					
Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Contributions to donor advised funds	1a		0	
	b Direct public support (not included on line 1a)	1b		80	
	c Indirect public support (not included on line 1a)	1c		0	
	d Government contributions (grants) (not included on line 1a)	1d		0	
	e Total (add lines 1a through 1d) (cash \$ 80 noncash \$ 0)			1e	80
	2 Program service revenue including government fees and contracts (from Part VII, line 93)			2	138,740
	3 Membership dues and assessments			3	25,440
	4 Interest on savings and temporary cash investments			4	0
	5 Dividends and interest from securities			5	0
	6a Gross rents	6a		0	
	b Less: rental expenses	6b		0	
c Net rental income or (loss). Subtract line 6b from line 6a			6c	0	
7 Other investment income (describe ▶)			7	0	
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	0	8a	0		
	0	8b	0		
	0	8c	0		
d Net gain or (loss). Combine line 8c, columns (A) and (B)			8d	0	
9 Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>					
	a Gross revenue (not including \$ 0 of contributions reported on line 1b)	9a		0	
	b Less: direct expenses other than fundraising expenses	9b		0	
c Net income or (loss) from special events. Subtract line 9b from line 9a			9c	0	
10a Gross sales of inventory, less returns and allowances	10a		0		
	b Less: cost of goods sold	10b		0	
	c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			10c	0
11 Other revenue (from Part VII, line 103)			11	1,008	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	165,268	
Expenses	13 Program services (from line 44, column (B))			13	136,813
	14 Management and general (from line 44, column (C))			14	9,997
	15 Fundraising (from line 44, column (D))			15	0
	16 Payments to affiliates (attach schedule)			16	100
	17 Total expenses. Add lines 16 and 44, column (A)			17	146,910
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12			18	18,358
	19 Net assets or fund balances at beginning of year (from line 73, column (A))			19	5,707
	20 Other changes in net assets or fund balances (attach explanation)			20	(3,994)
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20			21	20,071

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. (See the instructions.)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	0	0		
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	0	0		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0	0		
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	500	0	500	0
25b	Compensation of former officers, directors, key employees, etc. listed in Part V-B	0	0	0	0
25c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
26	Salaries and wages of employees not included on lines 25a, b, and c	0	0	0	0
27	Pension plan contributions not included on lines 25a, b, and c	0	0	0	0
28	Employee benefits not included on lines 25a - 27	0	0	0	0
29	Payroll taxes	0	0	0	0
30	Professional fundraising fees	0	0	0	0
31	Accounting fees	0	0	0	0
32	Legal fees	0	0	0	0
33	Supplies	754	126	628	0
34	Telephone	0	0	0	0
35	Postage and shipping	225	66	159	0
36	Occupancy	0	0	0	0
37	Equipment rental and maintenance	0	0	0	0
38	Printing and publications	7,056	6,937	119	0
39	Travel	79,645	73,911	5,734	0
40	Conferences, conventions, and meetings	1,538	0	1,538	0
41	Interest	0	0	0	0
42	Depreciation, depletion, etc. (attach schedule)	0	0	0	0
43	Other expenses not covered above (Itemize):				
a	Insurance, Bank & Filing Fees & NSF Checks	1,395	646	749	0
b	Apparel & Uniforms	6,051	5,593	458	0
c	Sponsorship	112	0	112	0
d	Other National Tournament-Related Expenses	16,523	16,523	0	0
e	Professional Service Fees & Staff Stipends	19,535	19,535	0	0
f	Gym Rental & Insurance Fees	12,562	12,562	0	0
g	Trading Pins	914	914	0	0
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	146,810	136,813	9,997	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 (See the instructions.)

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.

What is the organization's primary exempt purpose? ► Develop basketball services for deaf youths and adults	Program Service Expenses
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.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a Develop participation in local, region and national deaf basketball competitions and recreational events. According to Constitution 2.01 - 1a, USADB collaborated with the affiliated regions to accomplish regional tournaments which led into the achievement of developing and providing national deaf basketball tournament. USADB with assistance from the regions served over 1,200 members. In addition, USADB had to establish ad-hoc region, USADB-FW, to meet the status quo of 8 regions for national tournament qualifying. (Grants and allocations \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/>	54,232
b Simulate healthful physical, moral and cultural education for deaf sports enthusiasts in the United States According to Constitution 2.01 - 1b, USADB simulated youth deaf basketball participants by developing and hosting Elite Camp and East/West All-Star. Elite Camp consists 24 youth deaf players who were trained by adult deaf basketball coaches to prepare them for International and/or recreational competitions. (Grants and allocations \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/>	8,817
c Simulate healthful physical, moral and cultural education for deaf sports enthusiasts in the United States According to Constitution 2.01 - 1b, USADB simulated deaf basketball participants by developing and providing resources for International participants to play competitive basketball events overseas against various countries. The events include Pan-Am, World Deaf Basketball Championship and Deaflympics. These events were and are collaborated with USADB's paid affiliate fee with USADSF that oversees all deaf sport organizations that develops and provides resources for international sporting competitions. (Grants and allocations \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/>	69,525
d Simulate healthful physical, moral and cultural education for deaf sports enthusiasts in the United States According to Constitution 2.01 - 1b, USADB simulated youth deaf basketball participants by developing and hosting East/West All-Star. East/West All-Star is an event within annual national basketball tournament which the event consists 40 youth deaf girl and boy players along with 8 coaches to play two games before national championship games. (Grants and allocations \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/>	4,239
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). . . . ►	136,813

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)
		Beginning of year		End of year
Assets	45 Cash—non-interest-bearing	5,707	45	20,071
	46 Savings and temporary cash investments	0	46	0
	47a Accounts receivable	47a 0		
	b Less: allowance for doubtful accounts	47b 0	0	47c 0
	48a Pledges receivable	48a 0		
	b Less: allowance for doubtful accounts	48b 0	0	48c 0
	49 Grants receivable	0	49	0
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)	0	50a	0
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	0	50b	0
	51a Other notes and loans receivable (attach schedule)	51a 0		
	b Less: allowance for doubtful accounts	51b 0	0	51c 0
	52 Inventories for sale or use	0	52	0
	53 Prepaid expenses and deferred charges	0	53	0
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54a	0
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54b	0
	55a Investments—land, buildings, and equipment: basis	55a 0		
	b Less: accumulated depreciation (attach schedule)	55b 0	0	55c 0
	56 Investments—other (attach schedule)	0	56	0
	57a Land, buildings, and equipment: basis	57a 0		
b Less: accumulated depreciation (attach schedule)	57b 0	0	57c 0	
58 Other assets, including program-related investments (describe ►)	0	58	0	
59 Total assets (must equal line 74). Add lines 45 through 58	5,707	59	20,071	
Liabilities	60 Accounts payable and accrued expenses	0	60	0
	61 Grants payable	0	61	0
	62 Deferred revenue	0	62	0
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0
	64a Tax-exempt bond liabilities (attach schedule)	0	64a	0
	b Mortgages and other notes payable (attach schedule)	0	64b	0
	65 Other liabilities (describe ►)	0	65	0
66 Total liabilities. Add lines 60 through 65	0	66	0	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds	5,707	70	20,071
	71 Paid-in or capital surplus, or land, building, and equipment fund	0	71	0
	72 Retained earnings, endowment, accumulated income, or other funds	0	72	0
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	5,707	73	20,071	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	5,707	74	20,071	

Part VI Other Information (continued)		Yes	No
82a	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?		✓
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		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b		
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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		
d	Section 162(e) lobbying and political expenditures		
	85d		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	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?		
	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		
	86a		
b	Gross receipts, included on line 12, for public use of club facilities		
	86b		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders		
	87a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	87b		
88a	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		✓
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0; section 4912 ▶ 0; section 4955 ▶ 0		
b	501(c)(3) and 501(c)(4) orgs. 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		
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		✓
	89e		
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		✓
	89f		
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		✓
	89g		
90a	List the states with which a copy of this return is filed		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b	0
91a	The books are in care of ▶ Ladimer Baird Telephone no. ▶ (866) 790-7844 Located at ▶ Sioux Falls, SD ZIP + 4 ▶ 57105		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	91b	✓
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)

Yes No

- c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
If "Yes," enter the name of the foreign country ▶
- 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** |

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a International					77,676
b Elite Camp					6,325
c National Tournament & East/West All-Star					52,513
d USADB-FW					2,226
e _____					
f Medicare/Medicaid payments					0
g Fees and contracts from government agencies					0
94 Membership dues and assessments					25,440
95 Interest on savings and temporary cash investments					0
96 Dividends and interest from securities					0
97 Net rental income or (loss) from real estate:					
a debt-financed property					0
b not debt-financed property					0
98 Net rental income or (loss) from personal property					0
99 Other investment income					0
100 Gain or (loss) from sales of assets other than inventory					0
101 Net income or (loss) from special events					0
102 Gross profit or (loss) from sales of inventory					0
103 Other revenue: a Processing Fees & Apparel					1,008
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		0	165,188
105 Total (add line 104, columns (B), (D), and (E))					165,188

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See 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).
93	Contributed to the accomplishment of complying USADB's general goals & objectives per Constiution 2.01.
94	Fees assisted the accomplishment of complying USADB's general goals & objectives per Constiution 2.01.
103	Providing regions services resulting in processing fees. It is part of promotion of regions' mutual interest of receiving support.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See 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
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See 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).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.


				Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a	----- -----				
b	----- -----				
c	----- -----				
Totals					


107 Did the reporting organization **receive** any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

				Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a	----- -----				
b	----- -----				
c	----- -----				
Totals					

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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.


Date 11-17-08



Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Inst. X)
Firm's name (or yours if self-employed), address, and ZIP + 4	EIN	Phone no. ()	

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2007

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization United States of America Deaf Basketball, Inc.	Employer identification number 48 : 1138210
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 . ▶				

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services ▶		

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

- a** Sale, exchange, or leasing of property?
- b** Lending of money or other extension of credit?
- c** Furnishing of goods, services, or facilities?
- d** Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
- e** Transfer of any part of its income or assets?

3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)

3a

b Did the organization have a section 403(b) annuity plan for its employees?

3b

c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c

d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d

4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

4a

b Did the organization make any taxable distributions under section 4966?

4b

c Did the organization make a distribution to a donor, donor advisor, or related person?

4c

d Enter the total number of donor advised funds owned at the end of the tax year ▶ 0

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ 0

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ 0

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ 0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) **more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) **no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	80	14,335	13,392	13,350	41,157
16 Membership fees received	25,440	0	0	0	25,440
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	138,740	46,516	58,321	28,171	271,748
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	0	0	0	23	23
19 Net income from unrelated business activities not included in line 18.	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	1,008	0	0	0	0
23 Total of lines 15 through 22	165,268	60,851	71,713	41,544	339,376
24 Line 23 minus line 17	80	14,335	13,392	13,373	41,180
25 Enter 1% of line 23	1,653	609	717	415	4,384

26 Organizations described on lines 10 or 11:

a Enter 2% of amount in column (e), line 24 ▶ **26a** _____

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ **26b** _____

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ **26c** _____

d Add: Amounts from column (e) for lines: 18 _____ 19 _____
22 _____ 26b _____ ▶ **26d** _____

e Public support (line 26c minus line 26d total) ▶ **26e** _____

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶ **26f** _____ %

27 Organizations described on line 12:

a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:

(2006) **0** (2005) **0** (2004) **0** (2003) **0**

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:

(2006) **0** (2005) **0** (2004) **0** (2003) **0**

c Add: Amounts from column (e) for lines: 15 <u>41,157</u> 16 <u>25,440</u> 17 <u>271,748</u> 20 <u>0</u> 21 <u>0</u> ▶	27c	338,345
d Add: Line 27a total <u>0</u> and line 27b total <u>0</u> ▶	27d	0
e Public support (line 27c total minus line 27d total) ▶	27e	338,345
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶	27f	339,376
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	27g	99.7 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶	27h	0.007 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

LIST OF PAYMENT TO AFFILIATE
AS OF DECEMBER 31, 2007

LINE# 16

#	ORGANIZATION NAME	ADDRESS	CITY	ST	ZIP	\$	PURPOSE
1	USADSF					100	Mother Organization for International

Accts Payable & Receivable Balance
As of Dec 31, 2007
LINE #20

Accts Receivable - General

Payee	Description	2006 Balance	Pymt Rcvd	Write-Off	Net Change	2007 Balance	Date Paid	Date Rcvd
SFAD	LV Hotel Lodging	\$ 174.19	\$ 174.19	\$ -	\$ -	\$ -	6/23/2005	4/10/2007
Unaccounted	Unauthorized & Unaccounted Use of Funds	\$ 5,213.12	\$ -	\$ -	\$ -	\$ 5,213.12	SEP'06-DEC'06	
Unaccounted	Unauthorized & Unaccounted Use of Funds	\$ -	\$ -	\$ -	\$ 3,488.74	\$ 3,488.74	JAN-DEC'07	
Mike Heft	Overpaid Official Fees - Indy Tourney	\$ -	\$ -	\$ -	\$ 60.00	\$ 60.00	4/17/2007	
Riverside	NSF Checks - USADB-FW Registration Fees	\$ -	\$ -	\$ -	\$ 515.00	\$ 515.00	3/5/2007	
Total		\$ 5,387.31	\$ 174.19	\$ -	\$ 4,063.74	\$ 9,276.86		

Accts Payable - General

Payee	Description	2006 Balance	Pymt Made	Write-Off	Net Change	2007 Balance	Date Dep	Date Paid
NWADB	Duplicate Mshp Fee	\$ 10.00	\$ -	\$ -	\$ -	\$ 10.00	JAN '06	
WDB	Duplicate Mshp Fee	\$ 15.00	\$ -	\$ -	\$ -	\$ 15.00	MAR '06	
Bay Area	Practice Insurance Refund - Overpaid	\$ 25.00	\$ -	\$ -	\$ -	\$ 25.00	SEP '06	
Panellas	Refund - Combo Tickets - Orlando	\$ -	\$ -	\$ -	\$ 80.00	\$ 80.00	12/11/2007	
EAAD	Regional Tourney Team Insurance Fees - Overpaid	\$ -	\$ -	\$ -	\$ 14.00	\$ 14.00	2/20/2007	
NEAAD	Individual Membership Fees Refund - Duplicates	\$ -	\$ -	\$ -	\$ 70.00	\$ 70.00	2/12/2007	
FSAD	Invitational Tourney Team Insurance Fees - Overpaid	\$ -	\$ -	\$ -	\$ 6.00	\$ 6.00	10/10/2007	
Total		\$ 50.00	\$ -	\$ -	\$ 170.00	\$ 220.00		

Accounts Payable - USSSA

Payee	Description	2006 Balance	Pymt Made	Write-Off	Net Change	2007 Balance	Date Dep	Date Paid
USSSA	Sanction Fee - Invitational - 2005	\$ 400.00	\$ -	\$ 400.00	\$ -	\$ 800.00	SEP-DEC'05	WAIVED PER USSSA
USSSA	Sanction Fee - Regional - 2007 - EAAD	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	12/11/2006	2/21/2007
USSSA	Sanction Fee - Invitational - 2007 - Devils	\$ 100.00	\$ 100.00	\$ -	\$ -	\$ -	12/11/2006	1/8/2007
USSSA	Sanction Fee - Invitational - 2007 - Warriors	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	12/11/2006	
USSSA	Insurance - Invitational - 2007 - Devils & Warriors	\$ 224.00	\$ 224.00	\$ -	\$ -	\$ -	12/11/2006	
USSSA	Sanction Fee - Regional - 2007 - NEAAD	\$ -	\$ -	\$ -	\$ 100.00	\$ 100.00	1/3/2007	
USSSA	Sanction Fee - Regional - 2007 - NWADB	\$ -	\$ -	\$ -	\$ 100.00	\$ 100.00	2/5/2007	
USSSA	Sanction Fee - Invitational - 2007 - FSAD	\$ -	\$ -	\$ -	\$ 100.00	\$ 100.00	10/10/2007	
USSSA	Sanction Fee - Invitational - 2008 - Bridgeport	\$ -	\$ -	\$ -	\$ 100.00	\$ 100.00	12/11/2007	
USSSA	Sanction Fee - Invitational - 2008 - NEAAD	\$ -	\$ -	\$ -	\$ 100.00	\$ 100.00	12/11/2007	
USSSA	Insurance - Invitational - 2007 - Lady Warriors	\$ -	\$ -	\$ -	\$ 154.00	\$ 154.00	2/1/07 & 3/20/07	
Total		\$ 924.00	\$ 324.00	\$ 400.00	\$ 654.00	\$ 1,654.00		

Accounts Payable - USADSF

Payee	Description	2006 Balance	Pymt Made	Write-Off	Net Change	2007 Balance	Date Dep	Date Paid
USADSF	2006 Mshp Fee - Non-Player	\$ 16.00	\$ 16.00	\$ -	\$ -	\$ -	MAY '06	3/15/2007
USADSF	2006 Mshp Fee - Player	\$ 16.00	\$ 16.00	\$ -	\$ -	\$ -	APR '06	3/15/2007
USADSF	2006 Mshp Fee - Officials	\$ 192.00	\$ 192.00	\$ -	\$ -	\$ -	APR '06	3/15/2007
USADSF	2008 Mshp Fee - Region Officers	\$ -	\$ -	\$ -	\$ 20.00	\$ 20.00	12/11/2007	
Total		\$ 224.00	\$ 224.00	\$ -	\$ 20.00	\$ 20.00		

2006 Total Net Asset/(Loss)	\$ 4,189.31	\$ (373.81)	\$ (400.00)	\$ 3,219.74	\$ 7,382.86
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Line #20 - Other Changes in Net Assets or Fund Balances	\$ 3,993.55
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UNITED STATES OF AMERICA DEAF BASKETBALL, INC.
BALANCE SHEET
AS OF DECEMBER 31, 2007

PART IV - LINE#45

Assets	Note	Balance
Cash - Checking Account - Wells Fargo - General	Recon	\$ 10,164.31
Cash - Checking Account - Wells Fargo - International	Recon	\$ 8,150.88
Cash - Paypal Account	Recon	\$ 1,756.07
Total Assets		\$ 20,071.26
Liabilities		\$ -
Fund Balance		\$ 20,071.26

UNITED STATES OF AMERICA DEAF BASKETBALL, INC.
 LIST OF CURRENT OFFICERS
 AS OF DECEMBER 31, 2007

PART V-A

#	FIRST NAME	LAST NAME	ADDRESS	CITY	ST	ZIP	TITLE	AVG HRS	(C)	(D)	(E)
1	Ira	Hendon III					President	12	0	0	0
2	David	Hamilton					Vice President	12	0	0	0
3	Keith	Westhoelter					Secretary	12	0	0	0
4	Ladimer	Baird					Treasurer	12	500	0	0
5	Susan	Margolian					Dir of Public Relations	12	0	0	0
6	Tom	Morrison					Men's Commissioner	12	0	0	0
7	Mary	Perrodin					Women's Commissioner	12	0	0	0