

Return of Organization Exempt From Income Tax

2006

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning and ending

B Check if applicable

Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
UNITED STATES SPECIALTY SPORTS ASSOC INC

D Employer identification number
54-0979285

E Telephone number
800-741-3014

F Accounting method Cash Accrual
 Other (specify) _____

G Website: WWW.USSSA.COM

J Organization type (check only one) 501(c) (04) (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 **6,768,079.**

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 N/A
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
I Group Exemption Number N/A

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

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Contributions to donor advised funds	1a			
	b	Direct public support (not included on line 1a)	1b	376,230.		
	c	Indirect public support (not included on line 1a)	1c			
	d	Government contributions (grants) (not included on line 1a)	1d	40,000.		
	e	Total (add lines 1a through 1d) (cash \$ 416,230. noncash \$)	1e		416,230.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		3,882,826.	
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4		4,918.	
	5	Dividends and interest from securities	5		221,513.	
	6a	Gross rents	6a			
	6b	Less: rental expenses	6b			
6c	Net rental income or (loss). Subtract line 6b from line 6a	6c				
7	Other investment income (describe)	7				
8a	Gross amount from sales of assets other than inventory	(A) Securities	8a			
		(B) Other	8b			
			8c			
8d	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 <input type="checkbox"/>	a Gross revenue (not including \$ of contributions reported on line 1b)	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			
10a	Gross sales of inventory, less returns and allowances	10a	734,191.			
		b Less: cost of goods sold	10b	592,619.		
		c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c	STMT 1	141,572.	
11	Other revenue (from Part VII, line 103)	11		1,508,401.		
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		6,175,460.		
Expenses	13	Program services (from line 44, column (B))	13		3,175,977.	
	14	Management and general (from line 44, column (C))	14		1,277,887.	
	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		4,453,864.	
18	Excess or (deficit) for the year. Subtract line 17 from line 12	18		1,721,596.		
Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		6,912,869.	
	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		8,634,465.	

SCANNED JUN 11 2008

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A STMT 3	941,330.	413,316.	528,014.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
c 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)				
26 Salaries and wages of employees not included on lines 25a, b, and c	650,716.	461,116.	189,600.	
27 Pension plan contributions not included on lines 25a, b, and c	52,057.	36,888.	15,169.	
28 Employee benefits not included on lines 25a - 27	104,622.	104,622.		
29 Payroll taxes	63,164.	45,148.	18,016.	
30 Professional fundraising fees				
31 Accounting fees	9,325.		9,325.	
32 Legal fees	105,341.		105,341.	
33 Supplies	11,294.	11,294.		
34 Telephone	88,354.	88,354.		
35 Postage and shipping	20,561.	20,561.		
36 Occupancy	76,800.	49,920.	26,880.	
37 Equipment rental and maintenance	3,227.	3,227.		
38 Printing and publications	72,344.	72,344.		
39 Travel	413,894.	361,050.	52,844.	
40 Conferences, conventions, and meetings	272,294.	272,294.		
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)	138,041.	89,727.	48,314.	
43 Other expenses not covered above (itemize):				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g SEE STATEMENT 2	1,430,500.	1,146,116.	284,384.	
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	4,453,864.	3,175,977.	1,277,887.	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 \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

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? ► SEE STATEMENT 4	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 THE ASSOCIATION PROMOTES THE GAMES OF SOFTBALL, BASEBALL FLAG FOOTBALL, SOCCER, GOLF, VOLLEYBALL & BASKETBALL BY REGISTERING PLAYERS & UMPIRES, ORGANIZING TOURNAMENTS PROVIDING RULEBOOKS & UMPIRE APPAREL.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	3,175,977.
b	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
c	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
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) ►	3,175,977.

Form 990 (2006)

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) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	5,533,459.	45	2,749,014.
	46 Savings and temporary cash investments	458,540.	46	427,883.
	47 a Accounts receivable	47a 435,160.		
	b Less: allowance for doubtful accounts	47b	47c	435,160.
	48 a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	37,800.
	53 Prepaid expenses and deferred charges	44,319.	53	34,418.
	54 a Investments - publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b Investments - other securities STMT 7 <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV	0.	54b	4,919,089.
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 1,056,962.			
b Less: accumulated depreciation STMT 5	57b 500,148.	57c	556,814.	
58 Other assets, including program-related investments (describe <input type="checkbox"/>)		58	0.	
59 Total assets (must equal line 74). Add lines 45 through 58	7,365,410.	59	9,160,178.	
Liabilities	60 Accounts payable and accrued expenses	19,820.	60	124,559.
	61 Grants payable		61	
	62 Deferred revenue	372,721.	62	401,154.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable STMT 6	60,000.	64b	
	65 Other liabilities (describe <input type="checkbox"/>)		65	
66 Total liabilities. Add lines 60 through 65	452,541.	66	525,713.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	6,912,869.	67	8,634,465.
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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 and column (B) must equal line 21)	6,912,869.	73	8,634,465.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	7,365,410.	74	9,160,178.	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

Table with 5 main rows (a-e) and sub-rows for adjustments. Row a: Total revenue, gains, and other support per audited financial statements. Row b: Amounts included on line a but not on Part I, line 12. Row c: Subtract line b from line a. Row d: Amounts included on Part I, line 12, but not on line a. Row e: Total revenue (Part I, line 12). Add lines c and d. Total revenue is N/A.

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

Table with 5 main rows (a-e) and sub-rows for adjustments. Row a: Total expenses and losses per audited financial statements. Row b: Amounts included on line a but not on Part I, line 17. Row c: Subtract line b from line a. Row d: Amounts included on Part I, line 17, but not on line a. Row e: Total expenses (Part I, line 17). Add lines c and d. Total expenses is N/A.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions)

Table with 5 columns: (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 plans, (E) Expense account and other allowances. Row 1: SEE STATEMENT 8, 941,330., 17,600., 0.

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

	Yes	No
75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ <u>11</u>		
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b	X
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." If "Yes," attach a statement that includes the information described in the instructions.	75c	X
d Does the organization have a written conflict of interest policy?	75d	X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
NONE				

Part VI Other Information *(See the instructions.)*

	Yes	No
76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	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?	78b	X
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 <u>N/A</u>		
81 a Enter direct or indirect political expenditures. (See line 81 instructions.) and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt	81a	0.
b Did the organization file Form 1120-POL for this year?	81b	X

Part VI Other Information (continued)	Yes	No
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? 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.)	82a	X
82b <u>N/A</u>		
83 a 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 quid pro quo contributions?	83a	X
83b <u>N/A</u>	83b	
84 a 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?	84a	X
84b <u>N/A</u>	84b	
85 501(c)(4), (5), or (6) organizations. a 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.	85a	X
85b <u>N/A</u>	85b	X
85c <u>N/A</u>		
85d <u>N/A</u>		
85e <u>N/A</u>		
85f <u>N/A</u>		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? 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?	85g	
85h <u>N/A</u>	85h	
86 501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 12 b Gross receipts, included on line 12, for public use of club facilities	86a	
86a <u>N/A</u>	86b	
86b <u>N/A</u>	87a	
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87a	
87b <u>N/A</u>	87b	
88 a 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	88a	X
88b <u>N/A</u>	88b	X
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>N/A</u> ; section 4912 <u>N/A</u> ; section 4955 <u>N/A</u> 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 c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u> d Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u> e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? 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?	89a	
89b <u>N/A</u>	89b	X
89c <u>0.</u>		
89d <u>0.</u>		
89e <u>N/A</u>	89e	X
89f <u>N/A</u>	89f	X
89g <u>N/A</u>	89g	X
90 a List the states with which a copy of this return is filed FL b Number of employees employed in the pay period that includes March 12, 2006	90b	11
91 a The books are in care of DONALD DEDONATIS Telephone no. 321-939-7640 Located at 611 LINE DR , KISSIMMEE, FL ZIP + 4 34744 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 N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

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 ▶ N/A

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 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) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a REGISTRATION FEES			07	65,360.	3,817,466.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14		4,918.
96 Dividends and interest from securities			14		221,513.
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	453000				141,572.
103 Other revenue:					
a EXPENSE REIMBURSEMENT			41	241,065.	
b ROYALTIES			15	1,038,609.	
c INSURANCE ADMIN	524292	203,264.			
d ADVERTISING	516110	25,463.			
e					
104 Subtotal (add columns (B), (D), and (E))		228,727.		1,345,034.	4,185,469.
105 Total (add line 104, columns (B), (D), and (E))					5,759,230.

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).
▼	SEE STATEMENT 9

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) Na	(D)	(E)
	%			
N/A	%			
	%			
	%			

Part X Information Regarding Transfers Associated

(a) Did the organization, during the year, receive any funds, directly or indirectly, from a disqualified person?

(b) Did the organization, during the year, pay premiums, directly or indirectly, on behalf of a disqualified person?

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). **N/A**

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.

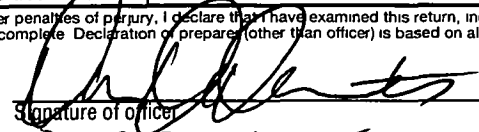
				Yes	No
(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer		
a					
b					
c					
Totals					

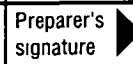
107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

				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?

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.

Please Sign Here:  Date: 4/15/08
 Type or print name and title: Don DeDonatis Executive Director

Paid Preparer's Use Only: Preparer's signature:  Date:
 Firm's name (or yours if self-employed), address, and ZIP + 4: GOODMAN & COMPANY
 131 TEMPLE LAKE DRIVE, SUITE 1
 COLONIAL HEIGHTS, VA 23834
 Check if self-employed:
 Preparer's SSN or PTIN (See Gen Inst X):
 EIN:
 Phone no.: (804) 526-3257

2006 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 2

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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	Current Year Deduction
1	COMPUTER/PRINTER	050101	200DB	5.00	17	2,328.			2,328.	2,182.		146.
2	COMP SOFTWARE	050101	200DB	5.00	17	8,038.			8,038.	7,535.		503.
3	COMP SOFTWARE	060199	200DB	5.00	17	5,458.			5,458.	5,458.		0.
4	COMP SOFTWARE	060198	200DB	5.00	17	14,738.			14,738.	14,738.		0.
5	COMP SYSTEM	060198	200DB	5.00	17	23,568.			23,568.	23,568.		0.
6	SLIMNOTE LAPTOP	113097	200DB	5.00	17	3,152.			3,152.	3,152.		0.
7	HP DESKJET 340	091797	200DB	5.00	17	333.			333.	333.		0.
8	2 ACER PENT COM	072997	200DB	5.00	17	2,740.			2,740.	2,740.		0.
9	COMPUTER-MAIN	070997	200DB	5.00	17	1,357.			1,357.	1,357.		0.
10	COMPUTER RAM	070997	200DB	5.00	17	1,546.			1,546.	1,546.		0.
11	COMPUTER PRINTER	041197	200DB	5.00	17	448.			448.	448.		0.
12	TELEPHONE	101098	200DB	5.00	17	157.			157.	157.		0.
13	PHONES/ANS MACH	100198	200DB	5.00	17	266.			266.	266.		0.
14	COMPUTER	091098	200DB	5.00	17	3,006.			3,006.	3,006.		0.
15	CARPETING	111396	200DB	7.00	17	370.			370.	370.		0.
16	4 STENO CHARIS	100796	200DB	7.00	17	334.			334.	334.		0.
17	COMPUTER MODEM	093096	200DB	5.00	17	167.			167.	167.		0.
18	TASK CHAIR	080796	200DB	5.00	17	73.			73.	61.		0.

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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	Current Year Deduction
19	EXEC CHAIR	070196	200DB	5.00	17	402.			402.	368.		0.
20	ACERVIEW MONITOR	013196	200DB	5.00	17	271.			271.	271.		0.
21	PENTIUM MINITOW	010996	200DB	5.00	17	2,374.			2,374.	2,374.		0.
22	OKIDATA PRINTER	010996	200DB	5.00	17	459.			459.	459.		0.
23	PENTIUM MINITOW	010996	200DB	5.00	17	2,875.			2,875.	2,875.		0.
24	SOFTWARE	033102	150DB	15.00	17	535,446.			535,446.	167,713.		36,773.
25	DELL COMPUTERS	020702	200DB	5.00	17	2,306.			2,306.	1,921.		257.
26	DELL COMPUTERS	020702	200DB	5.00	17	2,306.			2,306.	1,921.		257.
27	DELL COMPUTERS	020702	200DB	5.00	17	2,306.			2,306.	1,921.		257.
28	DELL COMPUTERS	020702	200DB	5.00	17	2,306.			2,306.	1,921.		257.
29	DELL COMPUTERS	020702	200DB	5.00	17	2,306.			2,306.	1,921.		257.
30	DELL COMPUTERS	020702	200DB	5.00	17	2,306.			2,306.	1,921.		257.
31	DELL COMPUTERS	020702	200DB	5.00	17	2,306.			2,306.	1,921.		257.
32	DELL COMPUTERS	020702	200DB	5.00	17	2,306.			2,306.	1,921.		257.
33	COMPUTER EQUIPMENT	091102	200DB	5.00	17	935.			935.	779.		104.
34	COMPUTER EQUIPMENT	091102	200DB	5.00	17	5,011.			5,011.	4,174.		558.
35	DELL FLAT MONITORS (3)	080103	200DB	5.00	17	1,172.			1,172.	834.		135.
36	DEL COMPUTER	072403	200DB	5.00	17	742.			742.	528.		86.

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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	Current Year Deduction
37	DELL COMPUTERS	040303	200DB	5.00	17	768.			768.	547.		88.
38	DELL COMPUTERS	040303	200DB	5.00	17	768.			768.	547.		88.
39	SUNTRACKER PC32	050903	200DB	5.00	17	45,122.			45,122.	32,127.		5,198.
40	COPIER	082903	200DB	5.00	17	3,065.			3,065.	2,182.		353.
41	COMPUTER SERVER	061603	200DB	5.00	17	4,441.			4,441.	3,162.		512.
42	COMPUTER & MONITOR	120703	200DB	5.00	17	3,083.			3,083.	2,195.		355.
43	COMPUTER	071404	200DB	5.00	17	2,695.			2,695.	1,401.		518.
44	OFFICE FURNITURE	081005	200DB	7.00	17	107,194.			107,194.	15,313.		26,252.
45	DELL COMPUTERS	081005	200DB	5.00	17	61,910.			61,910.	12,382.		19,811.
46	SIGNAGE	072805	200DB	7.00	17	4,015.			4,015.	574.		983.
47	ENGRAVING MACHINE	100305	200DB	7.00	17	12,995.			12,995.	1,856.		3,183.
48	MANNEQUINS	030405	200DB	7.00	17	13,505.			13,505.	1,929.		3,307.
49	DISPLAYS	061505	200DB	7.00	17	74,185.			74,185.	10,598.		18,168.
50	TELEPHONE SYSTEM	031605	200DB	7.00	17	3,461.			3,461.	494.		848.
51	LEASEHOLD IMPROVEMENTS	101905	SL	39.00	17	5,436.			5,436.	29.		139.
52	2005 GMC YUKON	081005	200DB	5.00	17	38,025.			38,025.	7,605.		12,168.
53	DISPLAYS	022897	200DB	7.00	17	2,298.			2,298.	2,214.		0.
54	DISPLAYS	050198	200DB	7.00	17	2,482.			2,482.	2,482.		0.

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	Current Year Deduction
55	DISPLAYS	050101	200DB	7.00	17	1,685.			1,685.	1,309.		150.
56	UTILITY CART	013106	200DB	7.00	19C	9,202.			9,202.			1,315.
57	OFFICE FURNITURE	093006	200DB	7.00	19C	11,187.			11,187.			1,598.
58	COMPUTER DELL OPTIPLEX GX520	013106	200DB	5.00	19B	2,012.			2,012.			402.
59	COMPUTER DELL DIMENSION 1100	013106	200DB	5.00	19B	994.			994.			199.
60	COMPUTER DELL 2300MP PROJECTOR	102806	200DB	5.00	19B	1,879.			1,879.			376.
61	COMPUTER DELL INSPIRON 9300	022706	200DB	5.00	19B	2,064.			2,064.			413.
62	COMPUTER DELL INSPIRON 9300	022706	200DB	5.00	19B	2,063.			2,063.			413.
63	COMPUTER DELL OPTIPLEX GX520	102806	200DB	5.00	19B	1,143.			1,143.			229.
64	COMPUTER DELL OPTIPLEX 745	113006	200DB	5.00	19B	1,927.			1,927.			385.
65	COMPUTER DELL 2300MP PROJECTOR	113006	200DB	5.00	19B	1,144.			1,144.			229.
* TOTAL 990 PAGE 2 DEPR						1,056,962.		0.	1,056,962.	362,107.	0.	138,041.

FORM 990

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 10

STATEMENT 1

INCOME

1. GROSS RECEIPTS	734,191	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		734,191
4. COST OF GOODS SOLD (LINE 13)	592,619	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		141,572

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	0	
7. MERCHANDISE PURCHASED	630,419	
8. COST OF LABOR		
9. MATERIALS AND SUPPLIES		
10. OTHER COSTS		
11. ADD LINES 6 THROUGH 10		630,419
12. INVENTORY AT END OF YEAR	37,800	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12).		592,619

FORM 990	OTHER EXPENSES			STATEMENT 2
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
BANK FEES	98,215.		98,215.	
TAXES & LICENSES	18,302.		18,302.	
TEAM/LEAGUE PROMOTION & SPONSORSHIP EXPENSE	764,871.	764,871.		
RELOCATION	14,097.		14,097.	
OFFICE EXPENSE	136,726.		136,726.	
DIRECTOR/UMPIRE FEES	225,994.	225,994.		
INSURANCE	51,063.	34,019.	17,044.	
BAT TESTING FEES	97,342.	97,342.		
WEB SERVICE	14,369.	14,369.		
BAD DEBT	9,521.	9,521.		
TOTAL TO FM 990, LN 43	1,430,500.	1,146,116.	284,384.	

FORM 990

OFFICER COMPENSATION ALLOCATION
PART II, LINE 25A

STATEMENT 3

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
DONALD DEDONATIS	477,830.	17,600.		495,430.
A. PROGRAM SERVICES	167,241.			167,241.
B. MANAGEMENT AND GENERAL	310,589.			310,589.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JIM SWINT	92,000.			92,000.
A. PROGRAM SERVICES	32,200.			32,200.
B. MANAGEMENT AND GENERAL	59,800.			59,800.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
DAN BROWN	92,000.			92,000.
A. PROGRAM SERVICES	32,200.			32,200.
B. MANAGEMENT AND GENERAL	59,800.			59,800.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
ROBERT BOUDREAU	42,500.			42,500.
A. PROGRAM SERVICES	27,625.			27,625.
B. MANAGEMENT AND GENERAL	14,875.			14,875.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
RICK FORTUNA	42,500.			42,500.
A. PROGRAM SERVICES	27,625.			27,625.
B. MANAGEMENT AND GENERAL	14,875.			14,875.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
MARK LINNEMANN	31,500.			31,500.
A. PROGRAM SERVICES	20,475.			20,475.
B. MANAGEMENT AND GENERAL	11,025.			11,025.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JIM MCCARRON	28,000.			28,000.
A. PROGRAM SERVICES	18,200.			18,200.
B. MANAGEMENT AND GENERAL	9,800.			9,800.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
RON NEELY	27,000.			27,000.
A. PROGRAM SERVICES	17,550.			17,550.
B. MANAGEMENT AND GENERAL	9,450.			9,450.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
KEVIN NAEGELE	27,000.			27,000.
A. PROGRAM SERVICES	17,550.			17,550.
B. MANAGEMENT AND GENERAL	9,450.			9,450.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JOEY ODOM	27,000.			27,000.
A. PROGRAM SERVICES	17,550.			17,550.
B. MANAGEMENT AND GENERAL	9,450.			9,450.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
TOM TURLEY	31,500.			31,500.
A. PROGRAM SERVICES	20,475.			20,475.
B. MANAGEMENT AND GENERAL	11,025.			11,025.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
GARY WALLICK	15,000.			15,000.
A. PROGRAM SERVICES	9,750.			9,750.
B. MANAGEMENT AND GENERAL	5,250.			5,250.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JERRY STOUT	7,500.			7,500.
A. PROGRAM SERVICES	4,875.			4,875.
B. MANAGEMENT AND GENERAL	2,625.			2,625.
C. FUNDRAISING				
TOTAL PROGRAM SERVICES				413,316.
TOTAL MANAGEMENT AND GENERAL				528,014.
TOTAL FUNDRAISING				
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PART II, LINE 25A				941,330.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 4
PART III

EXPLANATION

THE REGISTRATION FEES ALLOW PARTICIPANTS, LEAGUES & TEAMS TO PARTICIPATE IN THE VARIOUS SPORTING EVENT TOURNAMENTS AND COMPETITIONS FOR ALL AGES.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 5

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER/PRINTER	2,328.	2,328.	0.
COMP SOFTWARE	8,038.	8,038.	0.
COMP SOFTWARE	5,458.	5,458.	0.
COMP SOFTWARE	14,738.	14,738.	0.
COMP SYSTEM	23,568.	23,568.	0.
SLIMNOTE LAPTOP	3,152.	3,152.	0.
HP DESKJET 340	333.	333.	0.
2 ACER PENT COM	2,740.	2,740.	0.
COMPUTER-MAIN	1,357.	1,357.	0.
COMPUTER RAM	1,546.	1,546.	0.
COMPUTER PRINTER	448.	448.	0.
TELEPHONE	157.	157.	0.
PHONES/ANS MACH	266.	266.	0.

COMPUTER	3,006.	3,006.	0.
CARPETING	370.	370.	0.
4 STENO CHARIS	334.	334.	0.
COMPUTER MODEM	167.	167.	0.
TASK CHAIR	73.	61.	12.
EXEC CHAIR	402.	368.	34.
ACERVIEW MONITOR	271.	271.	0.
PENTIUM MINITOW	2,374.	2,374.	0.
OKIDATA PRINTER	459.	459.	0.
PENTIUM MINITOW	2,875.	2,875.	0.
SOFTWARE	535,446.	204,486.	330,960.
DELL COMPUTERS	2,306.	2,178.	128.
DELL COMPUTERS	2,306.	2,178.	128.
DELL COMPUTERS	2,306.	2,178.	128.
DELL COMPUTERS	2,306.	2,178.	128.
DELL COMPUTERS	2,306.	2,178.	128.
DELL COMPUTERS	2,306.	2,178.	128.
DELL COMPUTERS	2,306.	2,178.	128.
DELL COMPUTERS	2,306.	2,178.	128.
COMPUTER EQUIPMENT	935.	883.	52.
COMPUTER EQUIPMENT	5,011.	4,732.	279.
DELL FLAT MONITORS (3)	1,172.	969.	203.
DEL COMPUTER	742.	614.	128.
DELL COMPUTERS	768.	635.	133.
DELL COMPUTERS	768.	635.	133.
SUNTRACKER PC32	45,122.	37,325.	7,797.
COPIER	3,065.	2,535.	530.
COMPUTER SERVER	4,441.	3,674.	767.
COMPUTER & MONITOR	3,083.	2,550.	533.
COMPUTER	2,695.	1,919.	776.
OFFICE FURNITURE	107,194.	41,565.	65,629.
DELL COMPUTERS	61,910.	32,193.	29,717.
SIGNAGE	4,015.	1,557.	2,458.
ENGRAVING MACHINE	12,995.	5,039.	7,956.
MANNEQUINS	13,505.	5,236.	8,269.
DISPLAYS	74,185.	28,766.	45,419.
TELEPHONE SYSTEM	3,461.	1,342.	2,119.
LEASEHOLD IMPROVEMENTS	5,436.	168.	5,268.
2005 GMC YUKON	38,025.	19,773.	18,252.
DISPLAYS	2,298.	2,214.	84.
DISPLAYS	2,482.	2,482.	0.
DISPLAYS	1,685.	1,459.	226.
UTILITY CART	9,202.	1,315.	7,887.
OFFICE FURNITURE	11,187.	1,598.	9,589.
COMPUTER DELL OPTIPLEX GX520	2,012.	402.	1,610.
COMPUTER DELL DIMENSION 1100	994.	199.	795.
COMPUTER DELL 2300MP PROJECTOR	1,879.	376.	1,503.
COMPUTER DELL INSPIRON 9300	2,064.	413.	1,651.
COMPUTER DELL INSPIRON 9300	2,063.	413.	1,650.
COMPUTER DELL OPTIPLEX GX520	1,143.	229.	914.
COMPUTER DELL OPTIPLEX 745	1,927.	385.	1,542.
COMPUTER DELL 2300MP PROJECTOR	1,144.	229.	915.
TOTAL TO FORM 990, PART IV, LN 57	1,056,962.	500,148.	556,814.

FORM 990 OTHER NOTES AND LOANS PAYABLE STATEMENT 6

LENDER'S NAME TERMS OF REPAYMENT
 GEORGE JOCHUM MONTHLY

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
03/31/02	11/30/06	280,000.	.00%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN
 SOFTWARE/WEBSERVICE

RELATIONSHIP OF LENDER

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	0.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B

FORM 990 OTHER SECURITIES STATEMENT 7

SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
INVESTMENT SECURITIES	COST	4,919,089.
TO FORM 990, LINE 54B, COL B		4,919,089.

FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 8

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DONALD DEDONATIS 611 LINE DR KISSIMMEE, FL 34744	EXECUTIVE DIRECTOR/CEO 50.00	477,830.	17,600.	0.
JIM SWINT 6319 NW 82ND CT KANSAS CITY, MO 64151	ASSIST. EXECUTIVE DIRECTOR 35.00	92,000.	0.	0.
DAN BROWN 3861 BURRWOOD COURT CONCONR, CA 94521	NATL PRES & ASST EXEC DIR 35.00	92,000.	0.	0.
ROBERT BOUDREAUX 108 INNISBROOK DR BROUSSARD, LA 70518	EXECUTIVE VICE PRESIDENT 20.00	42,500.	0.	0.
RICK FORTUNA 6324 N. CHATHAM AVE #136 KANSAS CITY, MO 64151	EXECUTIVE VICE PRESIDENT 20.00	42,500.	0.	0.
MARK LINNEMANN PO BOX 75091 CINNCINNATI, OH 45275	EXECUTIVE VICE PRESIDENT 20.00	31,500.	0.	0.
JIM MCCARRON 4827 CONDUIT ROAD COLONIAL HEIGHTS, VA 23834	EXECUTIVE VICE PRESIDENT 20.00	28,000.	0.	0.
RON NEELY 504 GILTIN DR ARLINGTON, TX 76006	EXECUTIVE VICE PRESIDENT 20.00	27,000.	0.	0.
KEVIN NAEGELE PO BOX 621 HOBBS, NM 88240	EXECUTIVE VICE PRESIDENT 20.00	27,000.	0.	0.
JOEY ODOM 614 S LAKE CT DRIVE LAKE CHARLES, LA 70605	EXECUTIVE VICE PRESIDENT 20.00	27,000.	0.	0.
TOM TURLEY 20000 JOHNSON DR SHAWNEE, KS 66218	EXECUTIVE VICE PRESIDENT 20.00	31,500.	0.	0.

GARY WALLICK PO BOX 660596 ARCADIA, CA 91006	EXECUTIVE VICE PRESIDENT 20.00	15,000.	0.	0.
JERRY STOUT 1893 SIR LANCELOT CIRCLE ST CLOUD, FL 34772	EXECUTIVE VICE PRESIDENT 20.00	7,500.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		941,330.	17,600.	0.

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO STATEMENT 9
 ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
	PARTICIPATE IN SOFTBALL, BASEBALL, BASKETBALL, GOLF, SOCCER, FLAG FOOTBALL & VOLLEYBALL TOURNAMENTS AND COMPETITIONS. ASSOCIATION. UMPIRES ARE REQUIRED TO WEAR APPAREL THAT IS SPECIFIED BY THE ASSOCIATION. SPORTS SUPPLIES ARE SOLD TO THE TEAMS, LEAGUES & TOURNAMENTS THAT PARTICIPATE IN THE ASSOCIATIONS TOURNAMENTS & COMPETITIONS.
93	THE REGISTRATION FEES ALLOW PARTICIPANTS, LEAGUES AND TEAMS TO
102	THE ASSOCIATION SELLS UMPIRE APPAREL TO UMPIRES THAT WORK FOR THE