

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047

2020

Department of the Treasury
Internal Revenue Service

For calendar year 2020 or other tax year beginning _____, and ending _____
▶ Go to www.irs.gov/Form990T for instructions and the latest information.
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection
for 501(c)(3)
Organizations Only

A Check box if address changed.

B Exempt under section
 501(C) (3)
 408(e) 220(e)
 408A 530(a)
 529(a) 529A

Name of organization (Check box if name changed and see instructions.)
UNITED STATES FIELD HOCKEY ASSOCIATION, INC.

D Employer identification number
23-6299893

Print or Type
Number, street, and room or suite no. If a P.O. box, see instructions.
5540 N. ACADEMY BLVD., SUITE 100

E Group exemption number
(see instructions)

City or town, state or province, country, and ZIP or foreign postal code
COLORADO SPRINGS CO 80918

C Book value of all assets at end of year ▶ **5,012,938**

F Check box if an amended return.

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust Applicable reinsurance entity

H Check if filing only to ▶ Claim credit from Form 8941 Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ▶

J Enter the number of attached Schedules A (Form 990-T) ▶ **1**

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation

L The books are in care of ▶ **THE ORGANIZATION** Telephone number ▶ **719-866-4567**

Part I Total Unrelated Business Taxable income

1	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	47
2	Reserved	2	
3	Add lines 1 and 2	3	47
4	Charitable contributions (see instructions for limitation rules)	4	
5	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	47
6	Deduction for net operating loss. See instructions	6	0
7	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	47
8	Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000
9	Trusts. Section 199A deduction. See instructions	9	
10	Total deductions. Add lines 8 and 9	10	1,000
11	Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0

Part II Tax Computation

1	Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0
2	Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	0
3	Proxy tax. See instructions	3	
4	Other tax amounts. See instructions	4	
5	Alternative minimum tax (trusts only)	5	
6	Tax on noncompliant facility income. See instructions	6	
7	Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0

For Paperwork Reduction Act Notice, see instructions. Form **990-T** (2020)

Form 990-T (2020) **UNITED STATES FIELD HOCKEY**

23-6299893

Part III Tax and Payments

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a	
b Other credits (see instructions)	1b	
c General business credit. Attach Form 3800 (see instructions)	1c	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d	
e Total credits. Add lines 1a through 1d		1e
2 Subtract line 1e from Part II, line 7		2
3 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8811 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)		3
4 Total tax. Add lines 2 and 3 (see instructions) <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here		4
5 2020 net 985 tax liability paid from Form 985-A or Form 985-B, Part II, column (k), line 4		5
6a Payments: A 2019 overpayment credited to 2020	6a	
b 2020 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b	
c Tax deposited with Form 8868	6c	
d Foreign organizations: Tax paid or withheld at source (see instructions)	6d	
e Backup withholding (see instructions)	6e	
f Credit for small employer health insurance premiums (attach Form 8941)	6f	
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4138 <input type="checkbox"/> Other Total	6g	
7 Total payments. Add lines 6a through 6g		7
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		8
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed		9
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid		10
11 Enter the amount of line 10 you want: Credited to 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>		11


Part IV Statements Regarding Certain Activities and Other Information (see instructions)

	Yes	No
1 At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here		
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year		X
4a Did the organization change its method of accounting? (see instructions)		
b If 4a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V		X

Part V Supplemental Information

Provide the explanation required by Part IV, line 4b. Also, provide any other additional information. See instructions.

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, this return is correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here  7/27/21 **EXECUTIVE DIRECTOR**

Signature of officer: Lane S.W. McMullen Date: 7/27/21 Title: EXECUTIVE DIRECTOR

Paid Preparer Use Only

Preparer's name: LANE S.W. McMullen Preparer's signature: LANE S.W. McMullen Date: 07/26/21 Check self-employed PTIN: P01426981

Firm's name: MCMILLEN & COMPANY, PLLC Firm's EIN: 83-4556713

Firm's address: 2812 W. COLORADO AVE., SUITE 200 COLORADO SPRINGS, CO 80904 Phone no: 719-922-0064

Form 990-T (2020)

**SCHEDULE A
(Form 990-T)**

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

OMB No. 1545-0047

2020

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

A Name of the organization UNITED STATES FIELD HOCKEY	B Employer identification number 23-6299893
C Unrelated Business Activity Code (see instructions) ▶ 541800	D Sequence: 1 of 1

E Describe the unrelated trade or business ▶ UNRELATED BUSINESS ACTIVITY

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances c Balance ▶	1c		
2 Cost of goods sold (Part III, line 8)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions)	4a		
b Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from partnership and S corporation (attach statement)	5		
6 Rent income (Part IV)	6		
7 Unrelated debt-financed income (Part V)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9 Investment income of section 501(c)(7), (9), or (17) organization (Part VII)	9		
10 Exploited exempt activity income (Part VIII)	10		
11 Advertising income (Part IX)	11 42,400	28,871	13,529
12 Other income (see instructions; attach statement)	12		
13 Total. Combine lines 3 through 12	13 42,400	28,871	13,529

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) Deductions must be directly connected with the unrelated business income

1 Compensation of officers, directors, and trustees (Part X)	1		
2 Salaries and wages	2		
3 Repairs and maintenance	3		
4 Bad debts	4		
5 Interest (attach statement) (see instructions)	5		
6 Taxes and licenses	6		
7 Depreciation (attach Form 4562) (see instructions)	7		
8 Less depreciation claimed in Part III and elsewhere on return	8a	8b	0
9 Depletion	9		
10 Contributions to deferred compensation plans	10		
11 Employee benefit programs	11		
12 Excess exempt expenses (Part VIII)	12		
13 Excess readership costs (Part IX)	13		13,482
14 Other deductions (attach statement)	14		
15 Total deductions. Add lines 1 through 14	15		13,482
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16		47
17 Deduction for net operating loss (see instructions)	17		
18 Unrelated business taxable income. Subtract line 17 from line 16	18		47

For Paperwork Reduction Act Notice, see instructions. Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold

Enter method of inventory valuation ▶

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use (see instructions)

A _____
 B _____
 C _____
 D _____

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)	▶ _____			
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)	▶ _____			

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use (see instructions)

A _____
 B _____
 C _____
 D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	▶ _____			
9 Allocable deductions. Multiply line 3c by line 6				
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	▶ _____			
11 Total dividends-received deductions included in line 10	▶ _____			

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt/Nonexempt Controlled Organization			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Add columns 5 and 10. Enter here and on Part I, line 8, column (A)

Add columns 6 and 11. Enter here and on Part I, line 8, column (B)

Totals

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				

Add amounts in column 2. Enter here and on Part I, line 9, column (A)

Add amounts in column 5. Enter here and on Part I, line 9, column (B)

Totals

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity:	
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4
5 Gross income from activity that is not unrelated business income	5
6 Expenses attributable to income entered on line 5	6
7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7

Form 990-T	Business Income Activity Summary	2020
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Name UNITED STATES FIELD HOCKEY	Taxpayer Identification Number 23-6299893
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Business Activity Income (and allocation of Prior-2018 NOL)

- | | |
|--|-----|
| A. Total Pre-2018 Net Operating Losses Carried Forward | N/A |
| B. Total Pre-2018 Net Operating Loss allocated to Sch A activities | B. |
| C. Total Pre-2018 Net Operating Loss allocated to Form 990-T, Line 6 | C. |
| D. Pre-2018 Applied (Sum of B and C) | D. |
| E. Pre-2018 Remaining (Line A minus Line D) | E. |
| F. Pre-2018 Net Operating Losses Expiring this Year | F. |
| G. Pre-2018 Net Operating Losses Carried Forward | G. |

Unrelated Business Income Activity with Income	Code	Net Income	Allocated Pre2018 NOL
1. UNRELATED BUSINESS ACTIVITY	541800	47	
2. _____			
3. _____			
4. _____			
5. _____			
6. _____			
7. _____			
8. _____			
9. _____			
10. _____			
11. _____			
12. _____			
13. _____			
14. _____			
15. All other revenue _____			
16. Total taxable income		47	

Business Activity Losses

Unrelated Business Income Activity with Losses	Code	Current Year Loss
1. _____		1. _____
2. _____		2. _____
3. _____		3. _____
4. _____		4. _____
5. All other activities _____		5. _____
6. Totals		6. _____

Form 990	Two Year Comparison Report	2019 & 2020
For calendar year 2020, or tax year beginning _____, ending _____		

Name **UNITED STATES FIELD HOCKEY ASSOCIATION, INC.** Taxpayer Identification Number **23-6299893**

		2019	2020	Differences
Revenue	1. Contributions, gifts, grants	1,826,813	1,054,684	-772,129
	2. Membership dues and assessments			
	3. Government contributions and grants		416,388	416,388
	4. Program service revenue	7,266,723	4,432,425	-2,834,298
	5. Investment income	3,037	3,315	278
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory	2,509		-2,509
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming	38,541		-38,541
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue	40,020	7,000	-33,020
	12. Total revenue. Add lines 1 through 11	9,177,643	5,913,812	-3,263,831
Expenses	13. Grants and similar amounts paid	47,306		-47,306
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	343,105	337,850	-5,255
	16. Salaries, other compensation, and employee benefits	1,952,449	1,450,133	-502,316
	17. Professional fundraising fees			
	18. Other professional fees	1,409,728	773,827	-635,901
	19. Occupancy, rent, utilities, and maintenance	799,313	384,574	-414,739
	20. Depreciation and Depletion	89,675	79,101	-10,574
	21. Other expenses	4,706,422	2,139,964	-2,566,458
	22. Total expenses. Add lines 13 through 21	9,347,998	5,165,449	-4,182,549
	23. Excess or (Deficit). Subtract line 22 from line 12	-170,355	748,363	918,718
Other Information	24. Total exempt revenue	9,177,643	5,913,812	-3,263,831
	25. Total unrelated revenue	45,616	42,400	-3,216
	26. Total excludable revenue	7,305,214	4,400,340	-2,904,874
	27. Total assets	6,224,523	5,012,938	-1,211,585
	28. Total liabilities	3,685,425	1,455,715	-2,229,710
	29. Retained earnings	2,539,098	3,557,223	1,018,125
	30. Number of voting members of governing body	12	12	
31. Number of independent voting members of governing body	12	12		
32. Number of employees	31	25		
33. Number of volunteers	50	50		

Form 990T	Two Year Comparison Report	2019 & 2020
For calendar year 2020, or tax year beginning _____, ending _____		

Name **UNITED STATES FIELD HOCKEY ASSOCIATION, INC.** Taxpayer Identification Number **23-6299893**

		2019	2020	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rent income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Income from controlled organizations (net of expense)	6.			
	7. Section 501(c)(7)(9)(17) organization income (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.	15,633	13,529	-2,104
	10. Other income	10.			
	11. Total trade or business income. Combine lines 1 through 10	11.	15,633	13,529	-2,104
Expenses	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.			
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.			
	18. Charitable contributions	18.			
	19. Depreciation and Depletion	19.			
	20. Contributions to deferred compensation plans	20.			
	21. Employee benefit programs	21.			
	22. Other deductions	22.	15,633	13,482	-2,151
	23. Total deductions. Add lines 12 through 22	23.	15,633	13,482	-2,151
	24. Net income (990T/first activity); Subtract line 23 from 11	24.		47	47
	25. Number of unrelated business activities for this return	25.	1	1	
	26. Unrelated business taxable income from all trades	26.		47	47
	27. Disallowed employee fringe benefits	27.			
	28. Charitable contributions	28.			
	29. Taxable income before NOL loss	29.		47	47
	30. Net operating loss (pre-2018)	30.			
	31. Specific deduction	31.	1,000	1,000	
32. Unrelated business taxable income.	32.				
Tax & Credits	33. Income tax (corporate or trust)	33.			
	34. Proxy tax	34.			
	35. Other taxes	35.			
	36. Total taxes	36.			
	37. Other credits	37.			
	38. General business credit	38.			
	39. Credit for prior year minimum tax	39.			
	40. Total credits	40.			
	41. Net tax after credits	41.			
	42. Recapture taxes and 965 tax	42.			
	43. Total Taxes	43.			
Due/Refund	44. Prior year overpayment and estimated tax payments	44.			
	45. Payment made with extension	45.			
	46. Backup withholding and foreign withholding	46.			
	47. Other payments	47.			
	48. Total payments	48.			
	49. Balance due/(Overpayment)	49.			
	50. Overpayment applied to next year	50.			
	51. Penalties	51.			
	52. Total due/(Refund)	52.			

Form SchM	Two Year Comparison for Unrelated Business Activity	2019 & 2020
For calendar year 2020, or tax year beginning _____, ending _____		

Organization Name UNITED STATES FIELD HOCKEY	Taxpayer Identification Number 23-6299893
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Unincorporated Business Income Tax Code: **541800** Activity: **UNRELATED BUSINESS ACTIVITY**

		2019	2020	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rental income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Interest, and other income from controlled organizations (net of expense)	6.			
	7. Investment income of specific organizations (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.	15,633	13,529	-2,104
	10. Other income	10.			
	11. Total trade or business income. Combine lines 1 through 10	11.	15,633	13,529	-2,104
Expenses	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.			
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.			
	18. Depreciation and Depletion	18.			
	19. Contributions to deferred compensation plans	19.			
	20. Employee benefit programs	20.			
	21. Other deductions	21.	15,633	13,482	-2,151
	22. Total deductions. Add lines 12 through 22	22.	15,633	13,482	-2,151
	23. Taxable income before deductions. Subtract line 23 from 11	23.		47	47
	24. Deductible losses	24.			
	25. Unrelated business taxable income (loss)	25.		47	47

Form 990		Tax Return History				2020
Name UNITED STATES FIELD HOCKEY ASSOCIATION, INC.					Employer Identification Number 23-6299893	
	2016	2017	2018	2019	2020	2021
Contributions, gifts, grants				1,826,813	1,471,072	
Membership dues						
Program service revenue				7,266,723	4,432,425	
Capital gain or loss				2,509		
Investment income				3,037	3,315	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)				38,541		
Other revenue				40,020	7,000	
Total revenue				9,177,643	5,913,812	
Grants and similar amounts paid				47,306		
Benefits paid to or for members						
Compensation of officers, etc.				343,105	337,850	
Other compensation				1,952,449	1,450,133	
Professional fees				1,409,728	773,827	
Occupancy costs				799,313	384,574	
Depreciation and depletion				89,675	79,101	
Other expenses				4,706,422	2,139,964	
Total expenses				9,347,998	5,165,449	
Excess or (Deficit)				-170,355	748,363	
Total exempt revenue				9,177,643	5,913,812	
Total unrelated revenue				45,616	42,400	
Total excludable revenue				7,305,214	4,400,340	
Total Assets				6,224,523	5,012,938	
Total Liabilities				3,685,425	1,455,715	
Net Fund Balances			2,167,001	2,539,098	3,557,223	

Form 990T	Tax Return History	2020
Name UNITED STATES FIELD HOCKEY ASSOCIATION, INC.		Employer Identification Number 23-6299893

* Income shown net of expenses

	2016	2017	2018	2019	2020	2021
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income				15,633	13,529	
Total trade or business income.				15,633	13,529	
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						

Form 990T	Tax Return History	2020
Name UNITED STATES FIELD HOCKEY ASSOCIATION, INC.		Employer Identification Number 23-6299893

	2016	2017	2018	2019	2020	2021
Other deductions				15,633	13,482	
Net income (990T/first activity)					47	
UBTI from all trades	0	0	0	0	47	
Taxable employee fringe benefits						
Charitable contributions						
Net operating loss deduction						
Specific deduction				1,000	1,000	
Income after expense and deductions						
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST INCOME	\$ 3,315			14		
TOTAL	<u>\$ 3,315</u>					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
PROFESSIONAL FEES	\$ 84,917	\$ 51,476	\$ 33,441	\$
CONTRACT LABOR	228,131	216,266	11,865	
COACHES	70,921	70,921		
MEDICAL	9,715	9,715		
REG COACH DIRECTOR	87,789	87,789		
SECURITY	15,740	15,740		
TRAINERS	38,036	38,036		
UMPIRES	204,035	204,035		
ADVERTISING/PERIODICALS				
	5,063			5,063
	1,380			1,380
TOTAL	\$ 745,727	\$ 693,978	\$ 45,306	\$ 6,443

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
UNIFORMS	\$ 41,853	\$ 41,853	\$	\$
BACKGROUND CHECKS	40,652	40,652		
ALLOCATED READERSHIP COST	28,871			28,871
EQUIPMENT	27,519	26,118	1,401	
POSTAGE AND FREIGHT	27,417	17,131	10,286	
EXHIBITS & COLLECTIONS	23,121		23,121	
AWARDS AND APPAREL	19,057	19,057		
MISCELLANEOUS	16,859	5,529	11,330	
BAD DEBT EXPENSE	16,776		16,776	
SUPPLIES	11,466	11,466		
DUES AND SUBSCRIPTION	7,159		7,159	
AWARDS	6,330		6,330	
PARKING	5,698	5,580	118	
REGISTRATION & ENTRY FEES	5,000		5,000	
EXHIBITS AND COLLECTIONS	2,385	2,385		
IN KIND EXPENSES	1,900		1,685	215
DUES AND SUBSCRIPTION	1,795	1,795		

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Form 990, Part IX, Line 24e - All Other Expenses (continued)

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
REPAIR & MAINTENANCE	\$ 1,386	\$ 111	\$ 1,275	\$
BANK FEES	761		761	
LICENSES	510		510	
CREDIT CARD PROCESSING FE	273	273		
EDUCATIONAL CLASSES	270	270		
TOTAL	<u>\$ 287,058</u>	<u>\$ 172,220</u>	<u>\$ 85,752</u>	<u>\$ 29,086</u>

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Schedule A. Part III. Line 1(e)

<u>Description</u>	<u>Amount</u>
RELATED ORGANIZATIONS	\$ 120,155
GRANT FROM FOUNDATION	10,000
GRANT REVENUE	416,388
DONATIONS	53,957
RESTRICTED USOC WNT PERFORMANCE FUND	589,031
LICENSING/ROYALTIES USOC CONTENT LIC	150,000
USOC - OTHER GRANTS	32,415
INKIND REVENUE - EQUIPMENT	8,062
INKIND REVENUE - UNIFORMS	37,015
COMP MEALS	20,100
OTHER GRANTS	33,949
TOTAL	<u>\$ 1,471,072</u>

Schedule A. Part III. Line 2(e)

<u>Description</u>	<u>Amount</u>
REGISTRATION FEES	\$ 2,215,310
OTHER FEES	404,034
MEMBERSHIP DUES	1,369,300
REBATES	129,712
SPONSORSHIPS	165,268
OTHER PROGRAM SERVICES REVENUE	91,012
ADVERTISING/PERIODICALS	15,389
TOTAL	<u>\$ 4,390,025</u>

Schedule A. Part III. Line 3(e)

<u>Description</u>	<u>Amount</u>
GAMING ACTIVITIES	\$
TOTAL	<u>\$ 0</u>

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Schedule A. Part III. Line 7a - Support from Disqualified Persons

<u>Donor Name</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
CATHERINE BESSANT	\$	\$	\$	\$ 8,500	\$
PATRICK DURBIN				10,000	
DAVID WEBSTER				10,000	
BOARD AND OFFICERS	13,857	2,900	34,781		
TOTAL	\$ 13,857	\$ 2,900	\$ 34,781	\$ 28,500	\$ 0

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Schedule A. Part III. Line 7b - Excess Gross Receipts

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
PBCSC	\$	\$
2016	96,000	7,405
CITIBANK		
2018	100,000	3,959
2017	150,000	57,897
2016	188,800	100,205
TOTAL	<u>\$ 534,800</u>	<u>\$ 169,466</u>

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Schedule A, Part III, Line 10a(e)

<u>Description</u>	<u>Amount</u>
INTEREST INCOME	\$ 3,315
LICENSING / ROYALTIES	7,000
TOTAL	<u>\$ 10,315</u>

Schedule A, Part III, Line 11

<u>Description</u>	<u>Amount</u>
ADVERTISING/PERIODICALS	\$ 47
LESS: DEDUCTIONS	-1,000
TOTAL	<u>\$ -953</u>