

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2014**  
**Open to Public Inspection**

**Do not enter social security numbers on this form as it may be made public.**  
**Information about Form 990 and its instructions is at www.irs.gov/form990.**

**A For the 2014 calendar year, or tax year beginning** , **and ending**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization U.S.A. NATIONAL KARATE-DO FEDERATION, INC.		<b>D</b> Employer identification number 91-1646543
	Doing business as		<b>E</b> Telephone number 719-477-6925
	Number and street (or P.O. box if mail is not delivered to street address) 1631 MESA AVENUE, A-1	Room/suite	<b>G</b> Gross receipts\$ 950,929
	City or town, state or province, country, and ZIP or foreign postal code COLORADO SPRINGS CO 80906		
<b>F</b> Name and address of principal officer:			<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) <b>t</b> (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: <b>u</b> WWW.USANKF.ORG			<b>H(c)</b> Group exemption number <b>u</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <b>u</b>		<b>L</b> Year of formation: 1994	<b>M</b> State of legal domicile: CO

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SPONSORS NATIONAL KARATE COMPETITIONS AND PARTICIPATES IN INTERNATIONAL COMPETITION.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	3
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	199,332	166,091
	9 Program service revenue (Part VIII, line 2g)	740,489	784,838
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	939,821	950,929
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	95,513	99,087
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) <b>u</b>	0	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	956,323	750,992
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,051,836	850,079	
19 Revenue less expenses. Subtract line 18 from line 12	-112,015	100,850	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 68,658	End of Year 152,859
	21 Total liabilities (Part X, line 26)	78,870	62,221
	22 Net assets or fund balances. Subtract line 21 from line 20	-10,212	90,638

**Part II Signature Block**

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.

<b>Sign Here</b>	Signature of officer	Date
	PHIL HAMPEL Type or print name and title	CHIEF EXECUTIVE OFFICER

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN	
	MARK W. ROHN, CPA	MARK W. ROHN, CPA			P01212805	
	Firm's name	Firm's EIN				
	ROHN CPA GROUP, PC	45-3016534				
	1160 LAKE PLAZA DR STE 200					
	Firm's address	Phone no.				
	COLORADO SPRINGS, CO 80906-3507	719-574-7930				

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: SPONSORS NATIONAL KARATE COMPETITIONS AND PARTICIPATES IN INTERNATIONAL COMPETITION.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 782,994 including grants of \$ ) (Revenue \$ ) SPONSORS NATIONAL COMPETITIONS AND PARTICIPATES IN INTERNATIONAL COMPETITION.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.) (Expenses \$ 5,526 including grants of \$ ) (Revenue \$ )

4e Total program service expenses u 788,520

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules** (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Input box for Schedule O response

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 1a-1b, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, and 14a-14b.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed u NONE
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: u

THE ORGANIZATION 1631 MESA AVENUE CO 80906 719-477-6925
COLORADO SPRINGS

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PHIL HAMPEL ..... CEO	40.00 ..... 0.00	X						42,500	0	0
(2) JOHN DIPASQUALE ..... PRESIDENT	0.00 ..... 0.00	X						0	0	0
(3) TOKEY HILL ..... COACH DIRECTOR	0.00 ..... 0.00	X						0	0	0
(4) MATTHEW RALPH ..... INDEPENDENT DIRECTOR	0.00 ..... 0.00	X						0	0	0
(5) ROGER JARRETT ..... AFFILIATES DIRECTOR	0.00 ..... 0.00	X						0	0	0
(6) ALEX MILADI ..... REFEREE DIRECTOR	0.00 ..... 0.00	X						0	0	0
(7) BRIAN MERTEL ..... ATHLETE DIRECTOR	0.00 ..... 0.00	X						0	0	0
(8) CHERYL MURPHY ..... ATHLETE DIRECTOR	0.00 ..... 0.00	X						0	0	0
(9) DOUG STEIN ..... AT-LARGE DIRECTOR	0.00 ..... 0.00	X						0	0	0
(10) JESSICA LUNA ..... SECRETARY	40.00 ..... 0.00			X				35,287	0	0
(11) .....										

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
<b>1b Sub-total</b>							77,787			
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							77,787			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u** 0

	Yes	No
3 Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u**

0



**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>	120,470			
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>	27,425			
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	18,196			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		17,404			
	<b>h Total.</b> Add lines 1a-1f	<b>u</b>	166,091			
	<b>Program Service Revenue</b>	<b>2a</b> TOURNAMENT FEES	<b>Busn. Code</b>	753,318	753,318	
<b>b</b> COMMISSION INCOME ON PROMOTIO			31,520	31,520		
<b>c</b>						
<b>d</b>						
<b>e</b>						
<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f		<b>u</b>	784,838			
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts)	<b>u</b>			
	<b>4</b> Income from investment of tax-exempt bond proceeds	<b>u</b>				
	<b>5</b> Royalties	<b>u</b>				
	<b>6a</b> Gross rents	(i) Real				
		(ii) Personal				
	<b>b</b> Less: rental exps.					
	<b>c</b> Rental inc. or (loss)					
	<b>d</b> Net rental income or (loss)	<b>u</b>				
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	<b>b</b> Less: cost or other basis & sales exps.					
	<b>c</b> Gain or (loss)					
	<b>d</b> Net gain or (loss)	<b>u</b>				
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>				
		<b>b</b> Less: direct expenses	<b>b</b>			
<b>c</b> Net income or (loss) from fundraising events		<b>u</b>				
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>					
	<b>b</b> Less: direct expenses	<b>b</b>				
	<b>c</b> Net income or (loss) from gaming activities	<b>u</b>				
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
	<b>b</b> Less: cost of goods sold	<b>b</b>				
	<b>c</b> Net income or (loss) from sales of inventory	<b>u</b>				
Miscellaneous Revenue		<b>Busn. Code</b>				
<b>11a</b>						
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue						
<b>e Total.</b> Add lines 11a-11d	<b>u</b>					
<b>12 Total revenue.</b> See instructions.	<b>u</b>	950,929	784,838	0	0	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	92,511	69,383	23,128	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	6,576	4,932	1,644	
11 Fees for services (non-employees):				
a Management				
b Legal	18,020	13,515	4,505	
c Accounting	9,335	4,667	4,668	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	14,000	14,000		
12 Advertising and promotion				
13 Office expenses	2,894	1,447	1,447	
14 Information technology				
15 Royalties				
16 Occupancy	30,250	15,125	15,125	
17 Travel	4,378	4,378		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	10,537	10,537		
23 Insurance	66,579	65,247	1,332	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a TOURNAMENT EXPENSES	539,613	539,613		
b BANK & CREDIT CARD FEES	29,180	29,180		
c BOARD EXPENSES	13,352	6,676	6,676	
d SUPPLIES	4,071	2,035	2,036	
e All other expenses	8,783	7,785	998	
25 Total functional expenses. Add lines 1 through 24e	850,079	788,520	61,559	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year		
<b>Assets</b>	1	Cash—non-interest bearing	48,612	1	109,610	
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4	12,111	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	203,467		
	b	Less: accumulated depreciation	10b	172,329	10c	31,138
	11	Investments—publicly traded securities			11	
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		68,658	16	152,859	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	41,511	17	30,674	
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		37,359	25	31,547
	26	<b>Total liabilities.</b> Add lines 17 through 25		78,870	26	62,221
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>					
	27	Unrestricted net assets	-10,212	27	90,638	
	28	Temporarily restricted net assets		28		
	29	Permanently restricted net assets		29		
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>					
	30	Capital stock or trust principal, or current funds		30		
	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
	32	Retained earnings, endowment, accumulated income, or other funds		32		
33	<b>Total net assets or fund balances</b>		-10,212	33	90,638	
34	<b>Total liabilities and net assets/fund balances</b>		68,658	34	152,859	

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	950,929
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	850,079
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	100,850
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	-10,212
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	90,638

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
**u Attach to Form 990 or Form 990-EZ.**

OMB No. 1545-0047

**2014**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**u** Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

U.S.A. NATIONAL KARATE-DO  
FEDERATION, INC.

Employer identification number

91-1646543

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  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 exempt 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)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6</b> Public support. Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>11 Total support.</b> Add lines 7 through 10						

**12** Gross receipts from related activities, etc. (see instructions) 12

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
<b>15</b> Public support percentage from 2013 Schedule A, Part II, line 14	<b>15</b>	%

**16a 33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**b 33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**17a 10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

**b 10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	149,678	140,893	176,504	199,332	166,091	832,498
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	673,141	647,908	813,577	740,489	784,838	3,659,953
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	822,819	788,801	990,081	939,821	950,929	4,492,451
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6.)						4,492,451

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>9</b> Amounts from line 6	822,819	788,801	990,081	939,821	950,929	4,492,451
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	822,819	788,801	990,081	939,821	950,929	4,492,451

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	100.00 %
<b>16</b> Public support percentage from 2013 Schedule A, Part III, line 15	<b>16</b>	100.00 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2013 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
<b>b</b> Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
<b>c</b> Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
<b>10a</b> Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
<b>b</b> Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		



**Part IV Supporting Organizations** (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .		

**Section B. Type I Supporting Organizations**

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

**Section C. Type II Supporting Organizations**

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

**Section D. All Type III Supporting Organizations**

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		

**Section E. Type III Functionally-Integrated Supporting Organizations**

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> ):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
2	Activities Test. <b>Answer (a) and (b) below.</b>		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

<b>Section D - Distributions</b>		<b>Current Year</b>		
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes			
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations			
<b>4</b>	Amounts paid to acquire exempt-use assets			
<b>5</b>	Qualified set-aside amounts (prior IRS approval required)			
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions.			
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.			
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.			
<b>9</b>	Distributable amount for 2014 from Section C, line 6			
<b>10</b>	Line 8 amount divided by Line 9 amount			
<b>Section E - Distribution Allocations (see instructions)</b>		<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2014</b>	<b>(iii) Distributable Amount for 2014</b>
<b>1</b>	Distributable amount for 2014 from Section C, line 6			
<b>2</b>	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
<b>3</b>	Excess distributions carryover, if any, to 2014:			
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>	From 2013 . . . .			
<b>f</b>	<b>Total</b> of lines 3a through e			
<b>g</b>	Applied to underdistributions of prior years			
<b>h</b>	Applied to 2014 distributable amount			
<b>i</b>	Carryover from 2009 not applied (see instructions)			
<b>j</b>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b>	Distributions for 2014 from Section D, line 7: \$			
<b>a</b>	Applied to underdistributions of prior years			
<b>b</b>	Applied to 2014 distributable amount			
<b>c</b>	Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b>	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
<b>6</b>	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
<b>7</b>	<b>Excess distributions carryover to 2015.</b> Add lines 3j and 4c.			
<b>8</b>	Breakdown of line 7:			
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>	Excess from 2013 . . .			
<b>e</b>	Excess from 2014 . . .			

Schedule A (Form 990 or 990-EZ) 2014



# Schedule of Contributors

# 2014

u Attach to Form 990, Form 990-EZ, or Form 990-PF.

u Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**Name of the organization**

U.S.A. NATIONAL KARATE-DO  
FEDERATION, INC.

**Employer identification number**

91-1646543

**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub> % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ► \$ .....

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> U.S.A. NATIONAL KARATE-DO	<b>Employer identification number</b> 91-1646543
--	---

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EL POMAR FOUNDATION 10 LAKE CIRCLE COLORADO SPRINGS CO 80906	\$ 6,904	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	SHERMAN & HOWARD, LLC 633 17TH STREET 3000 DENVER CO 80202	\$ 10,500	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization U.S.A. NATIONAL KARATE-DO	Employer identification number 91-1646543
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	OFFICE SPACE ..... ..... .....	\$ ..... 6,904	.....
2	LEGAL SERVICES ..... ..... .....	\$ ..... 10,500	.....
.....	..... ..... .....	\$ .....	.....
.....	..... ..... .....	\$ .....	.....
.....	..... ..... .....	\$ .....	.....
.....	..... ..... .....	\$ .....	.....

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. u Attach to Form 990.

u Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

U.S.A. NATIONAL KARATE-DO FEDERATION, INC.

Employer identification number

91-1646543

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate values, and questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.



**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII  Yes  No

**Part V Endowment Funds.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment      %
  - b Permanent endowment      %
  - c Temporarily restricted endowment      %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		203,467	172,329	31,138
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)			<b>u</b>	31,138

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) <b>u</b>		

**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) <b>u</b>		

**Part IX Other Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) <b>u</b>	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) CREDIT CARDS PAYABLE	28,285	
(3) PAYROLL TAXES PAYABLE	3,262	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) <b>u</b>	31,547	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII





**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

**2014**

Department of the Treasury  
Internal Revenue Service

**u** Attach to Form 990 or 990-EZ.

**Open to Public  
Inspection**

**u** Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

U.S.A. NATIONAL KARATE-DO  
FEDERATION, INC.

Employer identification number

91-1646543

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

SPONSORS NATIONAL COMPETITIONS AND PARTICIPATES IN INTERNATIONAL  
COMPETITION.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990  
NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION  
THE ORGANIZATIONS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE  
AVAILABLE TO THE PUBLIC BY BEING PUBLISH ON IT'S WEB SITE. THE GOVERNING  
DOCUMENTS ARE AVAILABLE TO PUBLIC INSPECTION AT IT'S ADMINISTRATIVE OFFICE  
DURING NORMAL BUSINESS HOURS.

Form **4562**

Department of the Treasury  
Internal Revenue Service (99)

**Depreciation and Amortization**  
**(Including Information on Listed Property)**

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at [www.irs.gov/form4562](http://www.irs.gov/form4562).

OMB No. 1545-0172

**2014**

Attachment  
Sequence No. **179**

Name(s) shown on return **U.S.A. NATIONAL KARATE-DO  
FEDERATION, INC.**

Identifying number  
**91-1646543**

Business or activity to which this form relates

**INDIRECT DEPRECIATION**

**Part I Election To Expense Certain Property Under Section 179**

**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2013 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12	13	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	833
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2014	17	6,685
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/> u <input type="checkbox"/>		

**Section B—Assets Placed in Service During 2014 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		834	5.0	HY	200DB	167
c 7-year property		19,962	7.0	HY	200DB	2,852
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

**Section C—Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	<b>Total.</b> Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	10,537
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**For Paperwork Reduction Act Notice, see separate instructions.**

Form **4562** (2014)

# Federal Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>5-year GDS Property:</b>									
67	PROJECTORS	4/15/14	1,000		X	500	5 HY 200DB	0	600
68	NETWORK SWITCH FOR PHONE SYST	6/27/14	245		X	123	5 HY 200DB	0	147
69	LASER JET PRO 200 PRINTER	7/28/14	422		X	211	5 HY 200DB	0	253
			<u>1,667</u>			<u>834</u>		<u>0</u>	<u>1,000</u>
<b>7-year GDS Property:</b>									
70	MATS	4/15/14	19,962			19,962	7 HY 200DB	0	2,852
			<u>19,962</u>			<u>19,962</u>		<u>0</u>	<u>2,852</u>
<b>Prior MACRS:</b>									
1	LAPTOP COMPUTER	2/26/07	1,500			1,500	5 HY 200DB	1,500	0
2	FAX/SCANNER/COPIER	6/13/07	445			445	5 HY 200DB	445	0
3	SCOREBOARD FOR NATIONALS	7/03/07	5,880			5,880	5 HY 200DB	5,880	0
4	LAMINATORS	7/12/07	508			508	5 HY 200DB	508	0
5	COMPETITION MATS	9/10/98	23,274			23,274	7 HY S/L	23,274	0
6	TOURNAMENT SCOREBOARDS	11/01/98	2,068			2,068	5 HY S/L	2,068	0
7	COMPETITION MATS	1/05/99	10,621			10,621	7 HY S/L	10,621	0
8	COMPETITION MATS	3/20/00	13,610			13,610	7 HY S/L	13,610	0
9	SCORE CARDS	5/31/01	1,345			1,345	7 HY S/L	1,345	0
10	CAMERA	11/12/02	441		X	309	7 HY S/L	441	0
11	HEADSETS	1/03/02	1,509		X	1,056	10 HY S/L	1,509	0
12	MAT BAGS	12/19/03	10,008		X	5,004	7 HY S/L	9,327	0
13	MATS	8/21/03	10,325		X	5,162	7 HY S/L	9,764	0
14	SCORE BOARDS	9/12/06	2,234			2,234	7 HY S/L	2,234	0
15	(2) PHONES & CD ROM	5/15/01	1,489			1,489	5 HY S/L	1,489	0
16	AIR CLEANERS	8/06/01	514			514	7 HY S/L	514	0
17	VCR	10/24/01	280		X	196	5 HY S/L	280	0
18	HEADSETS	10/26/01	654		X	458	7 HY S/L	610	0
19	DISPLAY CASE	11/26/01	1,518		X	1,063	7 HY S/L	1,415	0
20	COMPUTER	11/26/01	1,781		X	1,247	5 HY S/L	1,781	0
21	REFRIGERATOR	11/27/01	800		X	560	7 HY S/L	746	0
22	MONITOR	11/27/01	929		X	650	5 HY S/L	929	0
23	(3) CHAIRS & MATS	11/28/01	705		X	493	7 HY S/L	657	0
24	(2) COMPUTERS, FAX, (2) PRINTERS	12/09/01	4,898		X	3,429	5 HY S/L	4,898	0
25	(2) MONITORS	12/09/01	1,284		X	899	5 HY S/L	1,284	0
26	MONITOR	12/11/01	870		X	609	5 HY S/L	870	0
27	FILE CABINET	12/13/01	353		X	247	7 HY S/L	329	0
28	TEAM VIDEO	7/14/02	5,936		X	4,155	10 HY S/L	5,444	0
29	GSM CELLPHONE	8/03/02	457		X	320	7 HY S/L	457	0
30	PORTABLE COMPUTER	8/05/02	3,955		X	2,768	7 HY S/L	3,955	0
31	INTERNET HUB	8/06/02	438		X	307	7 HY S/L	438	0
32	PRINTERS	10/18/02	326		X	228	7 HY S/L	326	0
33	TELEPHONE	12/03/02	261		X	183	7 HY S/L	261	0
34	TELEPHONE	12/04/02	435		X	304	7 HY S/L	435	0
35	ID SYSTEM	5/01/02	7,282		X	5,097	10 HY S/L	6,765	0
36	WINDOWS XP PRO	8/26/02	218		X	153	3 HY S/L	218	0
37	TRAVEL SUITCASE	11/19/02	392		X	274	7 HY S/L	392	0
38	COMPUTER	12/15/03	1,632		X	816	5 HY S/L	1,333	0
39	RADIOS (5)	11/21/03	1,983		X	991	5 HY S/L	1,620	0
40	COMPUTER	5/06/03	3,412		X	1,706	5 HY S/L	3,184	0
41	DIGITAL CAMERA	12/30/03	6,781		X	3,390	5 HY S/L	5,425	0
42	PROJECTOR	5/12/04	1,706		X	853	5 HY S/L	1,706	0
43	LAPTOP	11/05/04	1,163		X	581	5 HY S/L	1,163	0
44	LAPTOP	5/12/05	2,118			2,118	5 HY S/L	2,118	0
45	MOVIE CAMERA	6/04/05	721			721	5 HY S/L	721	0
46	OFFICE DECOR	10/30/98	1,847			1,847	7 HY S/L	1,847	0
47	OFFICE FURNITURE	11/05/98	4,210			4,210	7 HY S/L	4,210	0
48	FILE CABINET & PHONE	9/14/00	1,196			1,196	5 HY S/L	1,196	0
49	FILE CABINET	1/23/02	468		X	328	10 HY S/L	443	0
50	ID CARD PRINTER	4/23/07	2,767			2,767	5 HY S/L	2,767	0
51	PRINTER	6/08/08	300		X	150	5 HY S/L	300	0
52	COMPUTER	10/23/09	999		X	499	5 MQ S/L	600	100
53	COMPUTER	11/09/09	623		X	311	5 MQ S/L	375	62
54	COMPUTER	11/09/09	344		X	172	5 MQ S/L	207	34
55	MATS	2/04/10	2,500			2,500	7 HY S/L	1,429	357
56	COMPUTERS	4/01/10	5,000			5,000	5 HY S/L	4,000	1,000

# Federal Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
57	MONITORS	6/23/10	3,960			3,960	5 HY S/L	3,168	792
58	COMPUTER	7/14/10	322			322	5 HY S/L	258	64
59	TV MONITORS	6/01/10	3,200			3,200	5 HY S/L	2,560	640
60	COMPUTERS	10/01/11	4,290			4,290	5 MQ S/L	1,823	858
61	RADIOS (2)	8/26/12	620			620	5 MQ S/L	171	124
62	COMPUTERS & EQUIPMENT	10/05/12	4,902			4,902	5 MQ S/L	1,103	980
63	APPLE MACBOOK COMPUTER	1/21/13	2,407			2,407	5 HY 200DB	481	771
64	APPLE MACBOOK COMPUTER	1/23/13	2,151			2,151	5 HY 200DB	430	688
65	OFFICE 2011 SOFTWARE	1/21/13	293			293	5 HY 200DB	59	93
66	HEADSETS & MISC PHONE EQUIP	1/23/13	380			380	5 HY 200DB	76	122
			<u>181,838</u>			<u>151,340</u>		<u>161,792</u>	<u>6,685</u>
	<b>Grand Totals</b>		203,467			172,136		161,792	10,537
	<b>Less: Dispositions and Transfers</b>		0			0		0	0
	<b>Less: Start-up/Org Expense</b>		0			0		0	0
	<b>Net Grand Totals</b>		<u>203,467</u>			<u>172,136</u>		<u>161,792</u>	<u>10,537</u>



# AMT Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>5-year GDS Property:</b>									
67	PROJECTORS	4/15/14	1,000		X	500	5 HY 200DB	0	600
68	NETWORK SWITCH FOR PHONE SYST	6/27/14	245		X	123	5 HY 200DB	0	147
69	LASER JET PRO 200 PRINTER	7/28/14	422		X	211	5 HY 200DB	0	253
			<u>1,667</u>			<u>834</u>		<u>0</u>	<u>1,000</u>
<b>7-year GDS Property:</b>									
70	MATS	4/15/14	19,962			19,962	7 HY 150DB	0	2,139
			<u>19,962</u>			<u>19,962</u>		<u>0</u>	<u>2,139</u>
<b>Prior MACRS:</b>									
1	LAPTOP COMPUTER	2/26/07	1,500			1,500	5 HY 200DB	1,500	0
2	FAX/SCANNER/COPIER	6/13/07	445			445	5 HY 200DB	445	0
3	SCOREBOARD FOR NATIONALS	7/03/07	5,880			5,880	5 HY 200DB	5,880	0
4	LAMINATORS	7/12/07	508			508	5 HY 200DB	508	0
5	COMPETITION MATS	9/10/98	23,274			23,274	7 HY S/L	23,274	0
6	TOURNAMENT SCOREBOARDS	11/01/98	2,068			2,068	5 HY S/L	2,068	0
7	COMPETITION MATS	1/05/99	10,621			10,621	7 HY S/L	10,621	0
8	COMPETITION MATS	3/20/00	13,610			13,610	7 HY S/L	13,610	0
9	SCORE CARDS	5/31/01	1,345			1,345	7 HY S/L	1,345	0
10	CAMERA	11/12/02	441		X	309	7 HY S/L	441	0
11	HEADSETS	1/03/02	1,509		X	1,056	10 HY S/L	1,509	0
12	MAT BAGS	12/19/03	10,008		X	5,004	7 HY S/L	9,327	0
13	MATS	8/21/03	10,325		X	5,162	7 HY S/L	9,764	0
14	SCORE BOARDS	9/12/06	2,234			2,234	7 HY S/L	2,234	0
15	(2) PHONES & CD ROM	5/15/01	1,489			1,489	5 HY S/L	1,489	0
16	AIR CLEANERS	8/06/01	514			514	7 HY S/L	514	0
17	VCR	10/24/01	280		X	196	5 HY S/L	280	0
18	HEADSETS	10/26/01	654		X	458	7 HY S/L	610	0
19	DISPLAY CASE	11/26/01	1,518		X	1,063	7 HY S/L	1,415	0
20	COMPUTER	11/26/01	1,781		X	1,247	5 HY S/L	1,781	0
21	REFRIGERATOR	11/27/01	800		X	560	7 HY S/L	746	0
22	MONITOR	11/27/01	929		X	650	5 HY S/L	929	0
23	(3) CHAIRS & MATS	11/28/01	705		X	493	7 HY S/L	657	0
24	(2) COMPUTERS, FAX, (2) PRINTERS	12/09/01	4,898		X	3,429	5 HY S/L	4,898	0
25	(2) MONITORS	12/09/01	1,284		X	899	5 HY S/L	1,284	0
26	MONITOR	12/11/01	870		X	609	5 HY S/L	870	0
27	FILE CABINET	12/13/01	353		X	247	7 HY S/L	329	0
28	TEAM VIDEO	7/14/02	5,936		X	4,155	10 HY S/L	5,444	0
29	GSM CELLPHONE	8/03/02	457		X	320	7 HY S/L	457	0
30	PORTABLE COMPUTER	8/05/02	3,955		X	2,768	7 HY S/L	3,955	0
31	INTERNET HUB	8/06/02	438		X	307	7 HY S/L	438	0
32	PRINTERS	10/18/02	326		X	228	7 HY S/L	326	0
33	TELEPHONE	12/03/02	261		X	183	7 HY S/L	261	0
34	TELEPHONE	12/04/02	435		X	304	7 HY S/L	435	0
35	ID SYSTEM	5/01/02	7,282		X	5,097	10 HY S/L	6,765	0
36	WINDOWS XP PRO	8/26/02	218		X	153	3 HY S/L	218	0
37	TRAVEL SUITCASE	11/19/02	392		X	274	7 HY S/L	392	0
38	COMPUTER	12/15/03	1,632		X	816	5 HY S/L	1,333	0
39	RADIOS (5)	11/21/03	1,983		X	991	5 HY S/L	1,620	0
40	COMPUTER	5/06/03	3,412		X	1,706	5 HY S/L	3,184	0
41	DIGITAL CAMERA	12/30/03	6,781		X	3,390	5 HY S/L	5,425	0
42	PROJECTOR	5/12/04	1,706		X	853	5 HY S/L	1,706	0
43	LAPTOP	11/05/04	1,163		X	581	5 HY S/L	1,163	0
44	LAPTOP	5/12/05	2,118			2,118	5 HY S/L	2,118	0
45	MOVIE CAMERA	6/04/05	721			721	5 HY S/L	721	0
46	OFFICE DECOR	10/30/98	1,847			1,847	7 HY S/L	1,847	0
47	OFFICE FURNITURE	11/05/98	4,210			4,210	7 HY S/L	4,210	0
48	FILE CABINET & PHONE	9/14/00	1,196			1,196	5 HY S/L	1,196	0
49	FILE CABINET	1/23/02	468		X	328	10 HY S/L	443	0
50	ID CARD PRINTER	4/23/07	2,767			2,767	5 HY S/L	2,767	0
51	PRINTER	6/08/08	300		X	150	5 HY S/L	300	0
52	COMPUTER	10/23/09	999		X	499	5 MQ S/L	600	100
53	COMPUTER	11/09/09	623		X	311	5 MQ S/L	375	62
54	COMPUTER	11/09/09	344		X	172	5 MQ S/L	207	34
55	MATS	2/04/10	2,500			2,500	7 HY S/L	1,429	357
56	COMPUTERS	4/01/10	5,000			5,000	5 HY S/L	4,000	1,000

# Depreciation Adjustment Report

## All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
<b>MACRS Adjustments:</b>						
Page 1	1	1	LAPTOP COMPUTER	0	0	0
Page 1	1	2	FAX/SCANNER/COPIER	0	0	0
Page 1	1	3	SCOREBOARD FOR NATIONALS	0	0	0
Page 1	1	4	LAMINATORS	0	0	0
Page 1	1	5	COMPETITION MATS	0	0	0
Page 1	1	6	TOURNAMENT SCOREBOARDS	0	0	0
Page 1	1	7	COMPETITION MATS	0	0	0
Page 1	1	8	COMPETITION MATS	0	0	0
Page 1	1	9	SCORE CARDS	0	0	0
Page 1	1	10	CAMERA	0	0	0
Page 1	1	11	HEADSETS	0	0	0
Page 1	1	12	MAT BAGS	0	0	0
Page 1	1	13	MATS	0	0	0
Page 1	1	14	SCORE BOARDS	0	0	0
Page 1	1	15	(2) PHONES & CD ROM	0	0	0
Page 1	1	16	AIR CLEANERS	0	0	0
Page 1	1	17	VCR	0	0	0
Page 1	1	18	HEADSETS	0	0	0
Page 1	1	19	DISPLAY CASE	0	0	0
Page 1	1	20	COMPUTER	0	0	0
Page 1	1	21	REFRIGERATOR	0	0	0
Page 1	1	22	MONITOR	0	0	0
Page 1	1	23	(3) CHAIRS & MATS	0	0	0
Page 1	1	24	(2) COMPUTERS, FAX, (2) PRINTERS	0	0	0
Page 1	1	25	(2) MONITORS	0	0	0
Page 1	1	26	MONITOR	0	0	0
Page 1	1	27	FILE CABINET	0	0	0
Page 1	1	28	TEAM VIDEO	0	0	0
Page 1	1	29	GSM CELLPHONE	0	0	0
Page 1	1	30	PORTABLE COMPUTER	0	0	0
Page 1	1	31	INTERNET HUB	0	0	0
Page 1	1	32	PRINTERS	0	0	0
Page 1	1	33	TELEPHONE	0	0	0
Page 1	1	34	TELEPHONE	0	0	0
Page 1	1	35	ID SYSTEM	0	0	0
Page 1	1	36	WINDOWS XP PRO	0	0	0
Page 1	1	37	TRAVEL SUITCASE	0	0	0
Page 1	1	38	COMPUTER	0	0	0
Page 1	1	39	RADIOS (5)	0	0	0
Page 1	1	40	COMPUTER	0	0	0
Page 1	1	41	DIGITAL CAMERA	0	0	0
Page 1	1	42	PROJECTOR	0	0	0
Page 1	1	43	LAPTOP	0	0	0
Page 1	1	44	LAPTOP	0	0	0
Page 1	1	45	MOVIE CAMERA	0	0	0
Page 1	1	46	OFFICE DECOR	0	0	0
Page 1	1	47	OFFICE FURNITURE	0	0	0
Page 1	1	48	FILE CABINET & PHONE	0	0	0
Page 1	1	49	FILE CABINET	0	0	0
Page 1	1	50	ID CARD PRINTER	0	0	0
Page 1	1	51	PRINTER	0	0	0
Page 1	1	52	COMPUTER	100	100	0
Page 1	1	53	COMPUTER	62	62	0
Page 1	1	54	COMPUTER	34	34	0
Page 1	1	55	MATS	357	357	0
Page 1	1	56	COMPUTERS	1,000	1,000	0
Page 1	1	57	MONITORS	792	792	0
Page 1	1	58	COMPUTER	64	64	0
Page 1	1	59	TV MONITORS	640	640	0
Page 1	1	60	COMPUTERS	858	858	0
Page 1	1	61	RADIOS (2)	124	124	0
Page 1	1	62	COMPUTERS & EQUIPMENT	980	980	0
Page 1	1	63	APPLE MACBOOK COMPUTER	771	614	157
Page 1	1	64	APPLE MACBOOK COMPUTER	688	548	140
Page 1	1	65	OFFICE 2011 SOFTWARE	93	75	18
Page 1	1	66	HEADSETS & MISC PHONE EQUIP	122	97	25
Page 1	1	67	PROJECTORS	600	600	0

# Depreciation Adjustment Report

## All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
Page 1	1	68	NETWORK SWITCH FOR PHONE SYSTEM	147	147	0
Page 1	1	69	LASER JET PRO 200 PRINTER	253	253	0
Page 1	1	70	MATS	2,852	2,139	713
				<u>10,537</u>	<u>9,484</u>	<u>1,053</u>

# Future Depreciation Report    FYE: 12/31/15

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
<b>Prior MACRS:</b>					
1	LAPTOP COMPUTER	2/26/07	1,500	0	0
2	FAX/SCANNER/COPIER	6/13/07	445	0	0
3	SCOREBOARD FOR NATIONALS	7/03/07	5,880	0	0
4	LAMINATORS	7/12/07	508	0	0
5	COMPETITION MATS	9/10/98	23,274	0	0
6	TOURNAMENT SCOREBOARDS	11/01/98	2,068	0	0
7	COMPETITION MATS	1/05/99	10,621	0	0
8	COMPETITION MATS	3/20/00	13,610	0	0
9	SCORE CARDS	5/31/01	1,345	0	0
10	CAMERA	11/12/02	441	0	0
11	HEADSETS	1/03/02	1,509	0	0
12	MAT BAGS	12/19/03	10,008	0	0
13	MATS	8/21/03	10,325	0	0
14	SCORE BOARDS	9/12/06	2,234	0	0
15	(2) PHONES & CD ROM	5/15/01	1,489	0	0
16	AIR CLEANERS	8/06/01	514	0	0
17	VCR	10/24/01	280	0	0
18	HEADSETS	10/26/01	654	0	0
19	DISPLAY CASE	11/26/01	1,518	0	0
20	COMPUTER	11/26/01	1,781	0	0
21	REFRIGERATOR	11/27/01	800	0	0
22	MONITOR	11/27/01	929	0	0
23	(3) CHAIRS & MATS	11/28/01	705	0	0
24	(2) COMPUTERS, FAX, (2) PRINTERS	12/09/01	4,898	0	0
25	(2) MONITORS	12/09/01	1,284	0	0
26	MONITOR	12/11/01	870	0	0
27	FILE CABINET	12/13/01	353	0	0
28	TEAM VIDEO	7/14/02	5,936	0	0
29	GSM CELLPHONE	8/03/02	457	0	0
30	PORTABLE COMPUTER	8/05/02	3,955	0	0
31	INTERNET HUB	8/06/02	438	0	0
32	PRINTERS	10/18/02	326	0	0
33	TELEPHONE	12/03/02	261	0	0
34	TELEPHONE	12/04/02	435	0	0
35	ID SYSTEM	5/01/02	7,282	0	0
36	WINDOWS XP PRO	8/26/02	218	0	0
37	TRAVEL SUITCASE	11/19/02	392	0	0
38	COMPUTER	12/15/03	1,632	0	0
39	RADIOS (5)	11/21/03	1,983	0	0
40	COMPUTER	5/06/03	3,412	0	0
41	DIGITAL CAMERA	12/30/03	6,781	0	0
42	PROJECTOR	5/12/04	1,706	0	0
43	LAPTOP	11/05/04	1,163	0	0
44	LAPTOP	5/12/05	2,118	0	0
45	MOVIE CAMERA	6/04/05	721	0	0
46	OFFICE DECOR	10/30/98	1,847	0	0
47	OFFICE FURNITURE	11/05/98	4,210	0	0
48	FILE CABINET & PHONE	9/14/00	1,196	0	0
49	FILE CABINET	1/23/02	468	0	0
50	ID CARD PRINTER	4/23/07	2,767	0	0
51	PRINTER	6/08/08	300	0	0
52	COMPUTER	10/23/09	999	100	100
53	COMPUTER	11/09/09	623	62	62
54	COMPUTER	11/09/09	344	35	35
55	MATS	2/04/10	2,500	357	357
56	COMPUTERS	4/01/10	5,000	0	0
57	MONITORS	6/23/10	3,960	0	0
58	COMPUTER	7/14/10	322	0	0
59	TV MONITORS	6/01/10	3,200	0	0
60	COMPUTERS	10/01/11	4,290	859	859
61	RADIOS (2)	8/26/12	620	124	124
62	COMPUTERS & EQUIPMENT	10/05/12	4,902	981	981
63	APPLE MACBOOK COMPUTER	1/21/13	2,407	462	429
64	APPLE MACBOOK COMPUTER	1/23/13	2,151	413	384
65	OFFICE 2011 SOFTWARE	1/21/13	293	57	52
66	HEADSETS & MISC PHONE EQUIP	1/23/13	380	73	68
67	PROJECTORS	4/15/14	1,000	160	160
68	NETWORK SWITCH FOR PHONE SYSTEM	6/27/14	245	39	39

**Future Depreciation Report    FYE: 12/31/15**  
**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
69	LASER JET PRO 200 PRINTER	7/28/14	422	68	68
70	MATS	4/15/14	19,962	4,888	3,819
			<u>203,467</u>	<u>8,678</u>	<u>7,537</u>
	<b>Grand Totals</b>		<u>203,467</u>	<u>8,678</u>	<u>7,537</u>

Form **990****Two Year Comparison Report****2013 & 2014**

For calendar year 2014, or tax year beginning , ending

Name

Taxpayer Identification Number

U.S.A. NATIONAL KARATE-DO  
FEDERATION, INC.

91-1646543

		2013	2014	Differences
<b>Revenue</b>	1. Contributions, gifts, grants	1. 64,576	45,621	-18,955
	2. Membership dues and assessments	2. 134,756	120,470	-14,286
	3. Government contributions and grants	3.		
	4. Program service revenue	4. 740,489	784,838	44,349
	5. Investment income	5.		
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7.		
	8. Net income or (loss) from fundraising events	8.		
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11.		
	<b>12. Total revenue.</b> Add lines 1 through 11	<b>12.</b>	<b>939,821</b>	<b>950,929</b>
<b>Expenses</b>	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.		
	16. Salaries, other compensation, and employee benefits	16. 95,513	99,087	3,574
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 43,126	41,355	-1,771
	19. Occupancy, rent, utilities, and maintenance	19. 25,795	30,250	4,455
	20. Depreciation and Depletion	20. 6,224	10,537	4,313
	21. Other expenses	21. 881,178	668,850	-212,328
	<b>22. Total expenses.</b> Add lines 13 through 21	<b>22.</b>	<b>1,051,836</b>	<b>850,079</b>
<b>23. Excess or (Deficit).</b> Subtract line 22 from line 12	<b>23.</b>	<b>-112,015</b>	<b>100,850</b>	<b>212,865</b>
<b>Other Information</b>	24. Total exempt revenue	24. 939,821	950,929	11,108
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 740,489	784,838	44,349
	27. Total assets	27. 68,658	152,859	84,201
	28. Total liabilities	28. 78,870	62,221	-16,649
	29. Retained earnings	29. -10,212	90,638	100,850
	30. Number of voting members of governing body	30. 9	9	
31. Number of independent voting members of governing body	31.	9		
32. Number of employees	32. 2	3		
33. Number of volunteers	33.			

Form **990T****Two Year Comparison Report****2013 & 2014**

For calendar year 2014, or tax year beginning , ending

Name

Taxpayer Identification Number

U.S.A. NATIONAL KARATE-DO  
FEDERATION, INC.

91-1646543

		2013	2014	Differences	
<b>Revenue</b>	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.			
	10. Other income	10.			
	<b>11. Total trade or business income.</b> Combine lines 1 through 10	<b>11.</b>			
<b>Expenses</b>	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.			
	<b>23. Total deductions.</b> Add lines 12 through 22	<b>23.</b>			
	<b>24. Taxable income before NOL.</b> Subtract line 23 from 11	<b>24.</b>			
	25. Net operating loss deduction	25.			
	26. Specific deduction	26.	1,000		-1,000
	<b>27. Unrelated business taxable income.</b>	<b>27.</b>	-1,000		1,000
	<b>Tax &amp; Credits</b>	28. Income tax (corporate or trust)	28.		
29. Proxy tax		29.			
30. Alternative minimum tax		30.			
<b>31. Total taxes</b>		<b>31.</b>			
32. Other credits		32.			
33. General business credit		33.			
34. Credit for prior year minimum tax		34.			
<b>35. Total credits</b>		<b>35.</b>			
<b>36. Net tax after credits</b>		<b>36.</b>			
37. Recapture taxes		37.			
<b>38. Total Taxes</b>	<b>38.</b>				
<b>Due/Refund</b>	39. Prior year overpayment and estimated tax payments	39.			
	40. Payment made with extension	40.			
	41. Backup withholding and foreign withholding	41.			
	42. Other payments	42.			
	<b>43. Total payments</b>	<b>43.</b>			
	<b>44. Balance due/(Overpayment)</b>	<b>44.</b>			
	45. Overpayment applied to next year	45.			
	46. Penalties	46.			
	<b>47. Total due/(Refund)</b>	<b>47.</b>			

## Federal Statements

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONTRACT SERVICES	\$ 14,000	\$ 14,000	\$	\$
TOTAL	\$ 14,000	\$ 14,000	\$ 0	\$ 0

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
DUES & MEMBERSHIPS	\$ 3,068	\$ 3,068	\$	\$
BAD DEBT	2,473	2,473		
MISCELLANEOUS EXPENSE	1,684	842	842	
TELEPHONE	1,558	1,402	156	
TOTAL	\$ 8,783	\$ 7,785	\$ 998	\$ 0



**Federal Statements****Schedule A, Part III, Line 1(e)**

Description	<u>Amount</u>
MEMBERSHIP DUES	\$ 112,385
CLUB MEMBERSHIPS	8,085
SPONSORSHIP	27,425
FUNDRAISING	792
EL POMAR FOUNDATION	
OFFICE SPACE	6,904
SHERMAN & HOWARD, LLC	
LEGAL SERVICES	10,500
TOTAL	<u>\$ 166,091</u>

**Schedule A, Part III, Line 2(e)**

Description	<u>Amount</u>
TOURNAMENT FEES	\$ 753,318
COMMISSION INCOME ON PROMOTIO	31,520
TOTAL	<u>\$ 784,838</u>