Return of Organization Exempt from Income Tax

OMB No. 1545 0047 2003

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection ► The organization may have to use a copy of this return to satisfy state reporting requirements. 2003, and ending For the 2003 calendar year, or tax year beginning D Employer Identification Number Check if applicable 72-0629934 United States Judo Assn Inc Address change IRS label or print or type. See specific instruc-21 N Union Blvd Telephone number Name change Colorado Springs, CO 80909 719-633-7750 Initial return Accounting method: X Cash Final return tions. Amended return Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A H and Lare not applicable to section 527 organizations. Application pending H (a) Is this a group return for affiliates? (Form 990 or 990-EZ). H (b) If 'Yes,' enter number of affiliates . Web site: ► N/A H (c) Are all affiliates included?..... (If 'No,' attach a list. See instructions) Organization type 3 ◀ (insert no) 501(c) 4947(a)(1) or (check only one) H (d) Is this a separate return filed by an Check here ► If the organization's gross receipts are normally not more than organization covered by a group ruling? \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return. Group Exemption Number... Check > X if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF). Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 816, 532. Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions) Contributions, gifts, grants, and similar amounts received: 15,935 a Direct public support 1a 1 b **b** Indirect public support 1 c c Government contributions (grants) 15,935. noncash \$ 15,935. Total (add lines la through 1c) (cash \$ _____ 80,939. 2 Program service revenue including government fees and contracts (from Part VII, line 93). 2 3 304,058. Membership dues and assessments. 4 333. Interest on savings and temporary cash investments 5 Dividends and interest from securities 6a 6a Gross rents . 6b **b** Less: rental expenses 60 c Net rental income or (loss) (subtract line 6b from line 6a) 7 Other investment income (describe. . . . (B) Other (A) Securities 8a Gross amount from sales of assets other 327,500. 8a 308,230. 8b b Less: cost or other basis and sales expenses 19,270. c Gain or (loss) (attach schedule) Statement 1 d Net gain or (loss) (combine line 8c, columns (A) and (B)) 8d 19,270. 9 Special events and activities (attach schedule). If any amount is from gaming, check here . . . a Gross revenue (not including of contributions reported on line 1a). 9Ь **b** Less: direct expenses other than fundraising expenses.... c Net income or (loss) from special events (subtract line 9b from line 9a) 10a 87,767 10a Gross sales of inventory, less returns and allowances 55,981 **b** Less: cost of goods sold 31,786. c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10p from time atement 10 c Other revenue (from Part VII, line 103) 11 11 452,321. 12 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, 284,398. Program services (from line 44, column (B)) . 13 194,650. Management and general (from line 44, column (C)) . . 14 15 Fundraising (from line 44, column (D)) 15 16 16 Payments to affiliates (attach schedule) 17 479,048. Total expenses (add lines 16 and 44, column (A)) . 17 -26,727. 18 Excess or (deficit) for the year (subtract line 17 from line 12) 18 9,828. Net assets or fund balances at beginning of year (from line 73, column (A)) 19 19 Other changes in net assets or fund balances (attach explanation).... 20 20 -16,899. Net assets or fund balances at end of year (combine lines 18, 19, and 20) 21

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0107L 10/03/03

Form 990 (2003)

2003) United States Judo Assn Inc 72-0629934

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

Ĺ	Oo not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22	Grants and allocations (att sch)					, , , , , , , , , , , , , , , , , , , ,	
	(cash \$						
	non-cash \$)	22					
23	Specific assistance to individuals (att sch)	23					
24	Benefits paid to or for members (att sch)	24				<u> </u>	
25	Compensation of officers, directors, etc	25	56,375.	28,188.	28,187.		
26	Other salaries and wages	26	108,176.	54,088.	54,088.		
27	Pension plan contributions	27	600.	300.	300.		
28	Other employee benefits	28	15,797.	7,899.	7,898.		
29	Payroll taxes	29	14,796.	7,398.	7,398.	<u> </u>	
30	Professional fundraising fees	30					
31	Accounting fees	31	3,559.	1,780.	1,779.		
32	Legal fees	32					
33	Supplies	33	15,242.	7,621.	7,621.		
34	Telephone	34	_10,583.	5,292.	5,291.		
35	Postage and shipping	35	14,424.	7,212.	7,212.		
36	Occupancy:	36	27,316.	13,658.	13,658.	<u> </u>	
37	Equipment rental and maintenance.	37	20,725.	10,363.	10,362.		
38	Printing and publications	38	28,878.	14,439.	14,439.		
39	Travel	39	7,962.	3,981.	3,981.		
40	Conferences, conventions, and meetings	40					
41	Interest	41	19,317.	9,659.	9,658.		
42	Depreciation, depletion, etc (attach schedule)	42	11,145.	5,573.	5,572.		
	Other expenses not covered above (itemize).						
	See Statement 3	43a	124,153.	106,947.	17,206.		
b		43b					
C		43 c					
d		43 d					
e	T-17-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	43 e					
	Total functional expenses (add lines 22 - 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	479,048.	284,398.	194,650.	0.	
	Costs. Check ► If you are following:						
	iny joint costs from a combined educational					► Yes X No	
	s,' enter (i) the aggregate amount of these			; (ii) the an	nount allocated to Progr	am services	
\$_ *a.E	g; (iii) the amount allow andraising \$	cated	to Management and gene	erai Ş	; and (iv) the	e amount allocated	
	Statement of Program Serv	ico A	ccomplishments				
	is the organization's primary exempt purpo			·+ 1		Program Service Expenses	
All or client	ganizations must describe their exempt pures s served, publications issued, etc. Discuss ns and 4947(a)(1) nonexempt charitable tri	pose a achiev asts m	achievements in a clear a ements that are not meas ust also enter the amount	nd concise manner. States surable. (Section 501(c)(of grants & allocations	e the number of 3) & (4) organ- to others.)	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)	
	Services provided to memb						
			(Grants and	allocations \$)	284,398.	
b							
_			(Grants and	allocations \$			
C							
	(Grants and allocations \$						
d	d						
			(Grants and	allocations \$			
е	Other program services		. (Grants and	allocations \$)		
f	Total of Program Service Expenses (shou	ld equ	al line 44, column (B), Pr	ogram services)		284,398.	

Balance Sheets (See Instructions) (A) Beginning of year (B) Where required, attached schedules and amounts within the description Note: End of year column should be for end-of-year amounts only. 7,402 1,348. 45 Cash - non-interest-bearing. . 4,892 42,210. Savings and temporary cash investments 46 1,675 47 a 47 a Accounts receivable 1,675. 47 b 47 c **b** Less: allowance for doubtful accounts . . . 48 a 48 c **b** Less. allowance for doubtful accounts 48 b 49 49 Grants receivable Receivables from officers, directors, trustees, and key 50 employees (attach schedule) . 51 a 51 a Other notes & loans receivable (attach sch) **b** Less: allowance for doubtful accounts . . . 51 b 51 c 7,615. 52 7,615. 52 Inventories for sale or use 6,500. 53 53 Prepaid expenses and deferred charges 54 Cost FM∨ 54 Investments - securities (attach schedule) 55 a 55 a Investments - land, buildings, & equipment: basis **b** Less: accumulated depreciation 55 b 55 c (attach schedule)...... 56 56 Investments - other (attach schedule)..... 57 a Land, buildings, and equipment: basis 9,614 b Less: accumulated depreciation
Statement 5 8,510. ,104 296,870 57 c 58 Other assets (describe > 67,858. 316,779 59 59 Total assets (add lines 45 through 58) (must equal line 74) 110,085. 71,373. 60 60 Accounts payable and accrued expenses. 61 61 Grants payable. LIABILITIES 62 62 Deferred revenue ... 63 63 Loans from officers, directors, trustees, and key employees (attach schedule) 64a 64 a Tax-exempt bond liabilities (attach schedule) 196,866 64b 13,384. **b** Mortgages and other notes payable (attach schedule) 65 65 Other liabilities (describe ►. 306,951 84.757. 66 66 Total liabilities (add lines 60 through 65) Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74. Unrestricted 4,936. 67 -16,899. 4,892. 68 68 Temporarily restricted... 69 69 Permanently restricted Organizations that do not follow SFAS 117, check here and complete lines R 70 through 74. E DE 70 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72

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

9,828

316,779.

73

74

-16,899.

67,858.

Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)

Total liabilities and net assets/fund balances (add lines 66 and 73)

Form	990 (2003) United States Ju	do Assn Inc			72-0	6299	934 Page 4
Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)			Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return				
a	Total revenue, gains, and other support per audited financial statements	a N/A	а	Total expenses and financial statements	losses per audited	a	N/A
b	Amounts included on line a but not on line 12, Form 990:		b	Amounts included or on line 17, Form 990			
(1)	Net unrealized gains on investments \$		(1)	Donated services and use of facilities \$			•
(2)	Donated services and use of facilities \$		(2)	Prior year adjust- ments reported on line 20, Form 990 \$			
•	Recoveries of prior year grants \$		l .	Losses reported on line 20, Form 990 \$ Other (specify):		1	
,,	s			\$	Abrewet (A)	ь	
С	Add amounts on lines (1) through (4). Line a minus line b	b c	c	Add amounts on lines (1) Line a minus line b	(niough (4)	С	-10-77
d	Amounts included on line 12, Form 990 but not on line a:		d	Amounts included or Form 990 but not on	line 17, line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		(1)	Investment expenses not included on line 6b, Form 990 \$			
(2)	Other (specify):		(2	Other (specify):			,
	Add amounts on lines (1) and (2)	d		Add amounts on line	es (1) and (2)	d	
е	Total revenue per line 12, Form 990 (line c plus line d)	e	е	Total expenses per l		e	
Par		Trustees, and Key E	mp			ensate	ed, see instructions.)
	(A) Name and address	(B) Title and average hor per week devoted to position	urs	(C) Compensation (if not paid, enter -0-)	(D) Contributions employee benef plans and deferre compensation	it	(E) Expense account and other allowances
See	Statement 6						
				56,375.	60	0.	0.
						1	
		-					
		-					
		-					
			-			\dashv	
]					
			+			\dashv	
		_					
75	Did any officer, director, trustee, or ke than \$100,000 from your organization \$10,000 was provided by the related of the trusted of trusted of the trusted of the trusted of truste	and all related organizatio organizations?	gate of	compensation of more f which more than		▶ [Yes X No
BAA		NOTE:					Form 990 (2003)

Forr	n 990 (2003) United States Judo Assn Inc 72-062993	4	Page 5
P	art VI Other Information (See instructions.)		Yes No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76	х
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	X
	If 'Yes,' attach a conformed copy of the changes.		
78	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?	78 b	N/A
70	Was there a liquidation, dissolution, termination, or substantial contraction during the		
	year? If 'Yes,' attach a statement	79	X
	a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80 a	X
١	b If 'Yes,' enter the name of the organization ► N/A		
	and check whether it is exempt or nonexempt.	l	- 4
	a Enter direct and indirect political expenditures. See line 81 instructions		1
- 1	Did the organization file Form 1120-POL for this year?	81 ь	X
82	a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
ا	b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	x Ì
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
	a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
			<u> </u>
1	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	n/a
85		85a	N/A
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a		
	waiver for proxy tax owed for the prior year.		
•	Dues, assessments, and similar amounts from members. N/A	İ	
•	d Section 162(e) lobbying and political expenditures 85d N/A		
•	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		٠
	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A	1	
9	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85 g	N/A
١	n If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on	ľ	
	line 12		
	Gross receipts, included on line 12, for public use of club facilities		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A	-	1
ı	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88	x
20.	If 'Yes,' complete Part IX		
JJ 6	section 4911 ► 0. ; section 4912 ► 0. ; section 4955 ► 0.		
			1
	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89 b	х
	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
,	# Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 =			<u> </u>
	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.)	90ь	<u>0</u>
	The books are in care of ► United States Judo Assn Inc Telephone number ► 719-633-775		
	Located at ► 21 N Union Blvd, Colo Spgs, CO ZIP + 4 ► 80909	- -	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 – Check here	N/A	\ ₽ ∏
	and enter the amount of tax exempt interest received or accrued during the tax year		NI/A

	II Analysis of Income-Produc					
_		Unrelated	business inco	me Excluded by se	ction 512, 513, or 514	(E)
Note: En	iter gross amounts unless e indicated.	(A)	(B)	(C)	(D)	Related or exempt
Julei Wise	e marcatea.	Business code	Amoun	t Exclusion code	Amount	function income
	rogram service revenue.					
a (Certifications					4,110. 4,895.
b N	Martial Arts Services					
c I	Promotions				·	69,919.
	Sanctions					2,015.
e						
_	ledicare/Medicaid payments					
	1			-		
	ees & contracts from government agencies .					304,058.
	lembership dues and assessments			14	222	304,036.
	terest on savings & temporary cash invmnts			14	333.	
96 D	ividends & interest from securities					······
97 N	et rental income or (loss) from real estate:					
a de	ebt-financed property					
b ne	ot debt-financed property		-			
	et rental income or (loss) from pers prop					
	other investment income					
	iain or (loss) from sales of assets		-			
	ther than inventory					19,270.
	et income or (loss) from special events					
	ross profit or (loss) from sales of inventory			3	31,786.	
	other revenue: a					
b						
°.–						
е					20 110	404 067
	ubtotal (add columns (B), (D), and (E))				32,119.	404,267.
	otal (add line 104, columns (B), (D), a					436,386.
Note: Lin	ne 105 plus line 1d, Part I, should equa	al the amount	on line 12, Pai	t I		
Part VI	III Relationship of Activities t	o the Acco	mplishmen [,]	t of Exempt Purpos	Ses (See instructions.)	
Line No	Explain how each activity for which	income is rei	oorted in colum	n (F) of Part VII contrib	ited importantly to the	accomplishment
•	of the organization's exempt purpo	ses (other tha	in by providing	funds for such purposes	i).	
		•			 	
	See Statement 7					
						
Part I)	Information Regarding Tax	-bla Cuba		Dicronarded Entiti	00.00	
	a innomiation regarding rax	abie Subsi	giaries and	Distegatueu Littu	es (See instructions.)	
			giaries and			(E)
	(A)	(B)	-4	(C)	(D)	(E)
	(A) e, address, and EIN of corporation,	(B) Percentage	of Na		(D) Total	End-of-year
p	(A)	(B)	of Na	(C)	(D)	
p	(A) e, address, and EIN of corporation,	(B) Percentage	of Na erest	(C)	(D) Total	End-of-year
p	(A) e, address, and EIN of corporation,	(B) Percentage	of Na erest 용	(C)	(D) Total	End-of-year
p	(A) e, address, and EIN of corporation,	(B) Percentage	of Name of Nam	(C)	(D) Total	End-of-year
N/A	(A) e, address, and EIN of corporation, artnership, or disregarded entity	(B) Percentage ownership int	of Na	(C) ature of activities	(D) Total income	End-of-year assets
p	(A) e, address, and EIN of corporation, artnership, or disregarded entity	(B) Percentage ownership int	of Na	(C) ature of activities	(D) Total income	End-of-year assets
N/A Part X	(A) e, address, and EIN of corporation, artnership, or disregarded entity Information Regarding Tra	(B) Percentage ownership int	of erest Na % % % % % % % % % % % % % % % % % %	(C) ature of activities h Personal Benefit	(D) Total Income	End-of-year assets
Part X	(A) e, address, and EIN of corporation, artnership, or disregarded entity (Information Regarding Tra the organization, during the year, receive any fur	Percentage ownership into	of Name of Nam	(C) ature of activities h Personal Benefit niums on a personal benefit co	(D) Total Income Contracts (See Instr	End-of-year assets uctions.) Yes X No
Part > a Did b Did	(A) e, address, and EIN of corporation, artnership, or disregarded entity (Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay	Percentage ownership into the control of the contro	of erest Na % % % % % % Occiated with lirectly, to pay prer irectly or indirectly or indirectly.	(C) ature of activities h Personal Benefit niums on a personal benefit co	(D) Total Income Contracts (See Instr	End-of-year assets
Part > a Did b Did	(A) e, address, and EIN of corporation, artnership, or disregarded entity (Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay of 'Yes' to (b), file Form 8870 and Form	Percentage ownership into the commership into	of Name of Nam	(C) ature of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene	(D) Total Income Contracts (See Instract? fit contract?	uctions.) . Yes X No Yes X No
Part > a Did b Did	(A) e, address, and EIN of corporation, artnership, or disregarded entity (Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay of 'Yes' to (b), file Form 8870 and Form	Percentage ownership into the commership into	of Name of Nam	(C) ature of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene	(D) Total Income Contracts (See Instrintract? fit contract?	uctions.) Yes X No Yes X No
Part X a Did b Did Note:	(A) e, address, and EIN of corporation, artnership, or disregarded entity (Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay	Percentage ownership into the commership into	of Name of Nam	(C) ature of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene	(D) Total Income Contracts (See Instrintract? fit contract?	uctions.) Yes X No Yes X No
Part > a Did b Did Note:	(A) e, address, and EIN of corporation, artnership, or disregarded entity (Information Regarding Trathe organization, during the year, receive any furthe organization, during the year, paying the year or the organization, during the year or the organization, during the year or the organization of periory, I sector of all the true, for et, and complete. Declaration of organization organization of organization organiza	Percentage ownership into the commership into	of Name of Nam	(C) ature of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene	(D) Total Income Contracts (See Instruct? fit contract? ments, and to the best of my ker has any knowledge	uctions.) Yes X No Yes X No
Part > a Did b Did Note:	e, address, and EIN of corporation, artnership, or disregarded entity Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay if 'Yes' to (b), file Form 8870 and For Under benalties of perjuty, I sectare Lat I had true, for etc, and complete. Declaration of processing the section of the section	Percentage ownership into the commership into	of Name of Nam	(C) ature of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene	(D) Total Income Contracts (See Instrintract? fit contract?	uctions.) Yes X No Yes X No
Part > a Did b Did Note:	(A) e, address, and EIN of corporation, artnership, or disregarded entity (Information Regarding Trathe organization, during the year, receive any furthe organization, during the year, pay of Yes' to (b), file Form 8870 and For Under benatites of perjury, Lacture of at Lhattrue, for it, and complete. Declaration of progressions of the President JAMES	Percentage ownership into the commership into	of Name of Nam	(C) ature of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene	(D) Total Income Contracts (See Instruct? fit contract? ments, and to the best of my ker has any knowledge	uctions.) Yes X No Yes X No
Part > a Did b Did Note:	e, address, and EIN of corporation, artnership, or disregarded entity Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay if 'Yes' to (b), file Form 8870 and For Under benalties of perjuty, I sectare Lat I had true, for etc, and complete. Declaration of processing the section of the section	Percentage ownership into the commership into	of Name of Nam	ture of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene ompanying schedules and state all information of which prepare	Total income Contracts (See instruct? fit contract? ments, and to the best of my keep the same knowledge Date	uctions.) Yes X No Yes X No Inowledge and belief, it is
Part > a Did b Did Note: Please Sign lere	e, address, and EIN of corporation, artnership, or disregarded entity Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay of 'Yes' to (b), file Form 8870 and For Under benalties of perjury, Lactary of at I had true, for et, and complete, Declaration of processing the complete of the President AMES Type or print name and title	Percentage ownership into the commership into	of Name of Nam	ture of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene ompanying schedules and state all information of which prepare	(D) Total Income Contracts (See Instruct? fit contract? ments, and to the best of my keep for has any knowledge Date Check if	uctions.) Yes X No Yes X No
Part > a Did b Did Note: Please Sign Here	(A) e, address, and EIN of corporation, artnership, or disregarded entity (Information Regarding Trathe organization, during the year, receive any furthe organization, during the year, pay of Yes' to (b), file Form 8870 and For Under benatites of perjury, Lacture of at Lhattrue, for it, and complete. Declaration of progressions of the President JAMES	Percentage ownership into the commership into	of Name of Nam	ture of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene ompanying schedules and state all information of which prepare	Total income Contracts (See instruct? fit contract? fit contract? ments, and to the best of my ker has any knowledge Date Check if self	uctions.) Yes X No Yes X No
Part > a Did b Did Note: Please Sign Here	e, address, and EIN of corporation, artnership, or disregarded entity Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay if 'Yes' to (b), file Form 8870 and For Under benalties of periury, I actuary if at I have true, for et, and complete. Declaration of processing the control of the complete of the control of the	Percentage ownership into the commerce of the	of erest Name of the rest of t	ture of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene ompanying schedules and state all information of which prepare	(D) Total Income Contracts (See Instruct? fit contract? ments, and to the best of my ker has any knowledge Date Check if self	End-of-year assets uctions.) Yes X No Yes X No No X No Yes X No Yes X No Yes X No X N
Part > a Did b Did Note: Please Sign Here	e, address, and EIN of corporation, artnership, or disregarded entity Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay if 'Yes' to (b), file Form 8870 and For Under benefits of perjury, I activate that true, form it, and complete. Declaration of proceedings of the president AHES Signature of officer President AHES Type or print name and title Preparer's signature Firm's name (or MYCKOFA & Asyours if self	Percentage ownership into the commership into the commership into the commership into the commers and the comm	of Name of Nam	ture of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene ompanying schedules and state all information of which prepare	(D) Total Income Contracts (See Instract? fit contract? ments, and to the best of my keep the serious process of	End-of-year assets uctions.) Yes X No Yes X No No X No Yes X No Yes X No Yes X No X N
Part > a Did b Did Note: Please Sign Here Paid Pre- parer's Jse	e, address, and EIN of corporation, artnership, or disregarded entity Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay of the organization of printing the year of the organization of t	Percentage ownership into the commerce of the state of th	of Name of Nam	ture of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene ompanying schedules and state all information of which prepare	(D) Total Income Contracts (See Instruct? fit contract? ments, and to the best of my lear has any knowledge Date Check if self employed EIN N/A	End-of-year assets uctions.) Yes X No Yes X No No Yes X No No No Yes X No No No No Yes X No
Part > a Did b Did Note: Please Sign Here	e, address, and EIN of corporation, artnership, or disregarded entity Information Regarding Tra the organization, during the year, receive any fur the organization, during the year, pay of the organization of provide the organization of the or	Percentage ownership into the commerce of the state of th	of erest Name of the rest of t	ture of activities h Personal Benefit niums on a personal benefit co ctly, on a personal bene ompanying schedules and state all information of which prepare	(D) Total Income Contracts (See Instract? fit contract? ments, and to the best of my keep the serious process of	End-of-year assets uctions.) Yes X No Yes X No Inowledge and belief, it is POOF

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)

2003

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization		Employer identification number			
United States Judo Assn Inc			72-0629934		
Part I Compensation of the Five High (See instructions, List each one, If there	iest Paid Employees Othe are none, enter 'None.')	er Than Officers	, Directors, and	1 I rustees	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances	
None					
			:		
Total number of other employees paid over \$50,000)			
Part II Compensation of the Five High (See instructions, List each one (whether	est Paid Independent Co	entractors for Pro	ofessional Sen	vices	
(a) Name and address of each independent contra	· · · · · · · · · · · · · · · · · · ·		of service	(c) Compensation	
None		_			
	,				
		-			
Total number of others receiving over \$50,000 for professional services	C				

Sch	edul	e A (Form 990 or 990-EZ) 2003 United States Judo Assn Inc 72-062993	34	F	age
Pa	t II	Statements About Activities (See Instructions.)		Yes	No
1	to	ring the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid incurred in connection with the lobbying activities \hat{\sum} \\$ \hat{N/A}		u.	
		ust equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		X
	Org org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking 'Yes,' must complete Part VI-B AND attach a statement giving a detailed description of the obying activities.			
2	sul tax	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any bstantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any table organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal neficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)			
á	Sa	le, exchange, or leasing of property?	2a		Х
ı	Ler	nding of money or other extension of credit?	2b		Х
(: Fui	rnishing of goods, services, or facilities?	2c		Х
(l Pa	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		Х
		ansfer of any part of its income or assets?	2е		Х
3a	Do	you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an planation of how you determine that recipients qualify to receive payments.)	3a		Х
		you have a section 403(b) annuity plan for your employees?	3b		X
	Did	d you maintain any separate account for participating donors where donors have the right to provide advice the use or distribution of funds?	4		Х
Pai	TR				
5 6 7 8 9	orga 	Anization is not a private foundation because it is: (Please check only ONE applicable box.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's indicate	name,	city,	
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the Support Schedule in Part IV-A.)	170(b)	(1)(A)	(iv).
11 a		An organization that normally receives a substantial part of its support from a governmental unit or from the general p Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	ublic.		
11 t		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12	X	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	its sur	port	ots
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organ described in: (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) section 509(a)(3).)	nizatioi . (See	ns	
		Provide the following information about the supported organizations. (See instructions.)			
		(a) Name(s) of supported organization(s)	(b) Lir	e nun abov	
14	П	An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)	•		
		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			

72-0629934 Schedule A (Form 990 or 990-EZ) 2003 United States Judo Assn Inc Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting (e) Total Calendar year (or fiscal year beginning in)... Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) 349,930. 314,955 342,402 261,904. 254,617. 16 Membership fees received Gross receipts from admissions, merchandise sold or services performed. or furnishing of facilities in any activity that is related to the organization's 71,026. 99,439 94,947 204,736 470,148. charitable, etc, purpose Gross income from interest, dividends. amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organ-116 173 103. 448. 56 ization after June 30, 1975 Net income from unrelated business activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge . . Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. 547,241 1,732,500 Total of lines 15 through 22 325,699. 449,485. 410,075 254,673. 350,046. 315,128. 342,505. 1,262,352 Line 23 minus line 17 5,472 4,101. 3,257. 4,495. 25 Enter 1% of line 23 26 a 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24. N/A b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26 b c Total support for section 509(a)(1) test: Enter line 24, column (e). 26 c d Add: Amounts from column (e) for lines. 19 22 26b 26 d 26 e e Public support (line 26c minus line 26d total) ક f Public support percentage (line 26e (numerator) divided by line 26c (denominator)). Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year. ______<u>0.</u> (2001) ______<u>0.</u> (2000) ______<u>0</u>. (1999) ______<u>0</u>. b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2002) ______0. (2001) ____ c Add: Amounts from column (e) for lines. 470,148. 20 27 c 0. 27 d and line 27b total 0. d Add: Line 27a total 27 e ,052

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 0.03 27 h Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

e Public support (line 27c total minus line 27d total)

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)

g Public support percentage (line 27e (numerator) divided by line 27f (denominator))

27 g

.97

1,732,500

		2-0629934		Page (
Pai	Private School Questionnaire (See Instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/	A	
			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, by other governing instrument, or in a resolution of its governing body?	laws, 29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brocatalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?			
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media distribution for students, or during the registration period if it has no solicitation program, in a windless the policy known to all parts of the general community it serves?	ırıno		
22				
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32	a	_
1	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32	b	
(c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		С	
	d Copies of all material used by the organization or on its behalf to solicit contributions?	I	d	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
33	Does the organization discriminate by race in any way with respect to:	į		
•	a Students' rights or privileges?	33	a	
ı	b Admissions policies?	33	b	
•	c Employment of faculty or administrative staff?	33	c	
(d Scholarships or other financial assistance?	33	d	
•	B Educational policies?	33	е	-
1	f Use of facilities?	33	f	<u> </u>
	g Athletic programs?	33	g	
ı	h Other extracurricular activities?,,		h	ļ
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statem			
34 a	a Does the organization receive any financial aid or assistance from a governmental agency?		a	
ŧ	b Has the organization's right to such aid ever been revoked or suspended?	34	b	
35	If you answered 'Yes' to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of			
	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.) (To be completed ONLY by an eligible organization that filed Form 5768) N/A									
Che	ck ► a If the organi	zation belongs to an aff	liated group. Check	b If you	ı check	ed 'a' and '	imited cont	rol' provisions apply.	
	Limits on Lobbying Expenditures (a) Affiliated group totals To be completed for ALL electing								
36	`	·	·	<u> </u>	36			organizations	
37	Total lobbying expendite Total lobbying expendite	•			37				
38	Total lobbying expenditi	•	• •	-	38				
39	Other exempt purpose	•			39				
40	Total exempt purpose e	•			40				
41	Lobbying nontaxable an	•	•	le —	10			 	
•••	If the amount on line 40		lobbying nontaxable a						
	Not over \$500,000		of the amount on line					!	
	Over \$500,000 but not over \$1,		000 plus 15% of the excess of	I .				Ţ	
	Over \$1,000,000 but not over \$		000 plus 10% of the excess o	` ' [41				
	Over \$1,500,000 but not over \$		000 plus 5% of the excess ov						
	Over \$17,000,000		•	1				‡ ‡	
42	Grassroots nontaxable a	amount (enter 25% of lir	ne 41)		42				
43	Subtract line 42 from lin	ie 36. Enter -0- if line 42	s more than line 36		43				
44	Subtract line 41 from lin	ie 38. Enter -0- if line 41	is more than line 38		44				
	Caution: If there is an a	amount on either line 43	or line 44, you must fil	e Form 4720.					
	(Some organ	nizations that made a se	Averaging Period ection 501(h) election de the instructions for li	o not have to co	mplete	(h) all of the fiv	ve columns	below.	
			Lobbying Expen	ditures During 4	-Year A	Averaging F	eriod		
	Calendar year (or fiscal year beginning in) ►	(a) 2003	(b) 2002	(c) 2001			d) 000	(e) Total	
45	Lobbying nontaxable amount							-	
46	Lobbying ceiling amount (150% of line 45(e))								
47	Total lobbying expenditures								
48	Grassroots non- taxable amount		***************************************					<u> </u>	
49	Grassroots ceiling amount (150% of line 48(e))								
50	Grassroots lobbying expenditures		1 D . L !! . O !!!						
	Lobbying A (For reporting o							N/A	
atten	ng the year, did the organ npt to influence public op	inion on a legislative ma	atter or referendum, thr	ough the use of	inciuain	ig any	Yes No	Amount	
		n de de la compansa d						-	
	Paid staff or manageme Media advertisements				ugri n.).			-	
	: Media advertisements I Mailings to members, le	aislators or the public							
	i Mailings to members, le Publications, or publishe	-	nts				_		
	Grants to other organiza					• •			
	Direct contact with legisl	• • •							
_	Rallies, demonstrations,			-	าร	•			
	Total lobbying expenditu								
•	If 'Yes' to any of the abo	•	•				•		
			4		.,		1.1.4.4	000 000 571 0000	

Part VII	Information Regard Exempt Organizati	ding Tran ons (See i	sfers To and Transactions nstructions)	and Relationships With Nonch	naritable		
51 Did th	e reporting organization Code (other than section	directly or in	ndirectly engage in any of the follow organizations) or in section 527, rel	wing with any other organization describ lating to political organizations?	ed in section	n 501(c)
	•		to a noncharitable exempt organiza			Yes	No
(i) C	• •				51 a (i)		Х
***					. a (ii)		Х
	transactions.				7		
		ets with a n	oncharitable exempt organization		b (i)		Х
	-		able exempt organization		. b (ii)		X
			r assets.		b (iii)		X
• •	eimbursement arrangeme	•			b (iv)		X
	oans or loan guarantees				b (v)	 	X
• •	•						X
			ts, other assets, or paid employee		. C		X
				s Column (b) should always show the fair is e organization received less than fair m goods, other assets, or services received		of on	
(a) Line no.	ansaction or sharing arra (b) Amount involved	ĺ	now in column (d) the value of the (c) noncharitable exempt organization	(d)			
	Amount involved	TValitie UI	Tioriciantable exempt organization	T Description of transfers, transactions, as		gemen	
N/A							
descri	bed in section 501(c) of t s,' complete the following	he Code (ot		ection 527?		s X	No
	(a) Name of organization	,	(b) Type of organization	(c) Description of relati	onship		
N/A							
							
							
	<u> </u>						
							

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

See separate instructions. Attach to your tax return. OMB No 1545-0172

2003

Department of the Treasury Internal Revenue Service Identifying number Name(s) shown on return 72-0629934 United States Judo Assn Inc Business or activity to which this form relates Form 990/990-PF Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I. Part I \$100,000 1 1 Maximum amount. See instructions for a higher limit for certain businesses ... 2 Total cost of section 179 property placed in service (see instructions) 2 3 \$400,000. Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 separately, see instructions 6 (b) Cost (business use only) (c) Elected cost (a) Description of property 7 Listed property. Enter the amount from line 29 R 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7. Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2002 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 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 2004. 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.) Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 15 Property subject to section 168(f)(1) election (see instructions) 10,774 16 16 Other depreciation (including ACRS) (see instructions) 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 2003 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B — Assets Placed in Service During 2003 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) (e) Convention (g) Depreciation (a) Classification of property (business/investment use Recovery period deduction - see instructions) 19a 3-year property 371 200DB 7.408 5 MO **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L 25 yrs g 25-year property 27.5 yrs MM S/L h Residential rental

12 yrs b 12-year **c** 40-year 40 yrs MM Part IV Summary (see instructions)

21	1 Listed property. Enter amount from line 28	
22	2 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21	I. Enter here and on the appropriate lines
	of your return Partnerships and S corporations — see instructions	· · · · · · · · · · · · · · · · · · ·

23	For assets shown above and placed in service during the current the portion of the basis attributable to section 263A costs	year,	enter
	the portion of the basis attributable to section 263A costs		

11,145.

property.....

20 a Class life

i Nonresidential real

23

27.5 yrs

39 yrs

Section C - Assets Placed in Service During 2003 Tax Year Using the Alternative Depreciation System

MM

MM

MM

S/L

S/L

S/L

S/L

S/L

S/L

21

22

2003	Federal Statements			Page 1
	United States Judo Assn Inc			72-0629934
Statement 1 Form 990, Part I, Line 8 Net Gain (Loss) from Noninv	entory Sales			
Other Assets				
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis: Depreciation:	Office equipment Various Purchase 11/30/2003 Disposed 0. 10,845. 7,504.	Gain	(Loss)	-3,341.
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis: Depreciation:	Supply office equipment Various Purchase 11/30/2003 Disposed 0. 15,500. 12,271.	Gain	(Loss)	-3,229.
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis: Depreciation:	Printing equipment Various Purchase 2/28/2003 James R Triplett 2,500. 34,348. 34,348.	Gain	(Loss)	2,500.
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis: Depreciation:	Computer equipment Various Purchase 11/30/2003 Disposed 0. 45,646. 41,640.	Gain	(Loss)	-4,006.
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis: Depreciation:	Fax 3/15/1998 Purchase 11/30/2003 Disposed 0. 1,548. 891.	Gain	(Loss)	-657.
Description: Date Acquired: How Acquired: Date Sold:	21 N Union Blvd, Colo Springs, C 1/01/1999 Purchase 6/30/2003	CO 80909		

2003 Federal Statements				
	72-0629934			
Statement 1 (continued) Form 990, Part I, Line 8 Net Gain (Loss) from Noninv	entory Sales			
To Whom Sold: Gross Sales Price: Cost or Other Basis: Expenses of Sale: Depreciation:	James R Triplett 325,000. 296,997. 23,607. 28,350. Gain (Lo	ss) 32,746.		
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis: Depreciation:	Tshirt Press 4/11/2000 Purchase 11/30/2003 Disposed 0. 658. 241. Gain (Lo	ss) -417.		
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis: Depreciation:	Computer system 5/31/2000 Purchase 11/30/2003 Disposed 0. 4,000. 1,400. Gain (Lo	rss) -2,600.		
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis: Depreciation:	Computer system 8/31/2000 Purchase 11/30/2003 Disposed 0. 2,562. 836. Gain (Lo	ss) –1,726.		
	Total Gain (Loss) Other Ass Total Net Gain (Loss) From Noninventory Sa			
Statement 2 Form 990, Part I, Line 10 Gross Profit (Loss) From Sales Of Inventory				
	.,	\$ 87,767.		
Net Sales	es Of Inventory	\$ 87,767. \$ 87,767. 55,981. \$ 31,786.		

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_	u	u	•

Federal Statements

Page 3

United States Judo Assn Inc

72-0629934

Statement 3 Form 990, Part II, Line 43 Other Expenses

	(A)	(B)	(C)	(D)
	Total	Program <u>Services</u>	Management & General	<u>Fundraising</u>
Advertising Awards Bank charges Camp expenses Contract labor Credit card fees Dues Insurance Members insurance Penalties Severance pay Taxes, licenses Temporary staffing	1,747. 472. 665. 4,495. 12,000. 8,627. 1,500. 3,349. 85,250. 780. 3,800. 968. 500.	873. 236. 332. 4,495. 6,000. 4,313. 750. 1,674. 85,250. 390. 1,900. 484. 250.	874. 236. 333. 6,000. 4,314. 750. 1,675. 390. 1,900. 484. 250.	
comporary scarring	Total <u>\$ 124,153.</u>	\$ 106,947.	<u>\$ 17,206.</u>	\$ 0.

Statement 4 Form 990 , Part III Organization's Primary Exempt Purpose

Advancement of amateur athletic competition in the sport of Judo in the United States as well as the advancement of amateur athletic competition in the sport of Judo in international competition involving the citizens of the United States. Also, to develop the public interest and participation in the sport of Judo through a series of educational and instructional programs involving research, publications, clinics, tournaments, the establishment of scholarships and development of international cultural exchange programs.

Statement 5 Form 990, Part IV, Line 57 Land, Buildings, and Equipment

Category		Basis	Accum. Deprec.	Book <u>Value</u>
Machinery and Equipment	Total 💲	9,614. 9,614.	\$ 1,104. \$ 1,104.	\$ 8,510. \$ 8,510.

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Federal Statements

Page 4

United States Judo Assn Inc

72-0629934

Statement 6 Form 990, Part V List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	 Compen- sation	Contri- bution to EBP & DC	
Katrina Davis 4920 South Carefee Circle Colorado Springs, CO 80917	Gen Manager 40 hours	\$ 56,375.	\$ 600.	\$ 0.
James S Bregman 1121 Arlington Blvd, Ste 318 Arlington, VA 22209	President 1	0.	0.	0.
Terry J. Kelly P O Box 1781 Santa Rosa, CA 95404	Director 1	0.	0.	0.
Eugene S. Fodor 5535 Ketukkee Trail Toledo, OH 43611	Secretary 1	0.	0.	0.
Ernest R Smith 32780 Amarylis Ave Barstow, CA 92311	Director 1	0.	0.	0.
Steven R. Cunningham 58 Moon Road Ashford, CT 06278	Director 1	0.	0.	0.
Virgil J Bowles 645 S Franklin Rd Indianapolis, IN 46239	Director 1	0.	0.	0.
Patrick E. Szrejter 3010 Windrow Lane Mathews, NC 28104	Director 1	0.	0.	0.
Thomas V. Reiff 103 Oxford Road Summerville, SC 29485	Director 1	0.	0.	0.
George R Weers, Jr. 335 W Olive Street Canton, IL 61520	Director 1	0.	0.	0.
Michael L. Szrejter 2534 S. W. 12 Street Boynton Beach, FL 33426	Vice President 1	0.	0.	0.
Thomas A. Layon, Esq 125 West 15th Street Tulsa, OK 74119	Corp Counsel	0.	0.	0.

Statement 6 (continued) Form 990, Part V List of Officers, Directors, Trustees, and Key Employees Title and Contri- Exp	Page			
Form 990, Part V List of Officers, Directors, Trustees, and Key Employees Title and Average Hours Compension bution to EEP & DC Officers, Director Sation EEP & DC Officers, Director Sation Sation Seep & DC Officers, Director Sation Seep & DC Officers, Director Sation Seep & DC Officers, Director	-062993			
Name and Address Per Week Devoted Sation EBP & DC Other				
38548 Falkirk Drive Murrita, CA 92536 George L. Harris 412 Old Silverton Road Brick, NJ 08723 Total \$\frac{1}{2}\$ 56,375. \$\frac{1}{2}\$ 600. \$\frac{1}{2}\$ Statement 7 Form 990, Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes Line # Explanation of Activities 93a Certification of members in various judo classifications. 93b Promotion and certification in martial arts other than judo. 93c Promotion and sponsoring various judo competitions.	ount/			
Total \$\frac{1}{2}\$ \frac{1}{2}\$ \frac{1}{2}	0			
Statement 7 Form 990, Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes Line # Explanation of Activities 93a Certification of members in various judo classifications. 93b Promotion and certification in martial arts other than judo. 93c Promotion and sponsoring various judo competitions.	0			
Statement 7 Form 990, Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes Line # Explanation of Activities 93a Certification of members in various judo classifications. 93b Promotion and certification in martial arts other than judo. 93c Promotion and sponsoring various judo competitions.	0			
Form 990, Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes Line # Explanation of Activities 93a Certification of members in various judo classifications. 93b Promotion and certification in martial arts other than judo. 93c Promotion and sponsoring various judo competitions.				
93b Promotion and certification in martial arts other than judo. 93c Promotion and sponsoring various judo competitions.				
93c Promotion and sponsoring various judo competitions.				
93d Approval of competition events.	Promotion and sponsoring various judo competitions.			
	93d Approval of competition events.			

Form 8868	(12-2000)	Page 2
• If you a	re filing for an Additional (not automatic) 3-Month Extension, complete only Po	art II and check this box . ► X
Forn	r complete Part II if you have already been granted an automatic 3-month extends 8868.	
Part II	re filing for an Automatic 3-Month Extension, complete only Part I (on page 1) Additional (not automatic) 3-Month Extension of Time — Mu:	
i ait ii	Name of Exempt Organization	Employer identification number
Type or print	United States Judo Assn Inc Number, street, and room or suite number If a PO box, see instructions	72-0629934 For IRS Use Only
File by the extended due date for filing the return. See	21 N Union Blvd	,
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions Colorado Springs, CO 80909	
X Form 9 Form 9	e of return to be filed (file a separate application for each return). 90 Form 990-EZ Form 990-T (Section 401(a) or 408(a) trust)	Form 1041-A Form 5227 Form 8870 Form 4720 Form 6069
	rganization does not have an office or place of business in the United States, of	
whole grou	is for a Group Return , enter the organizations four digit Group Exemption Numbup, check this box Fig. 1 it is part of the group, check this box. Fig. 1 he extension is for	ber (GEN) If this is for the and attach a list with the names and EINs of all
	uest an additional 3-month extension of time until $11/15$, 20 0	04.
	alendar year 2003, or other tax year beginning , 20	and ending , 20
	s tax year is for less than 12 months, check reason.	Final return Change in accounting period
	ailable.	complete the return is not
	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentat efundable credits. See instructions	ive tax, less any \$
paym	s application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable crements made. Include any prior year overpayment allowed as a credit and any are 8868.	edits and estimated tax mount paid previously with \$
c Balai FTD	nce due. Subtract line 8b from line 8a. Include your payment with this form, or, coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Syste	em). See instructions \$
	Signature and Verification	n
Under penaltii correct, and o	es of perjury, I declare that I have examined this form, including accompanying schedules and statemen complete, and that I am authorized to prepage this form	nts, and to the best of my knowledge and belief, it is true,
	all-Will CPA	~ V/ad 04
Signature	Notice to Applicant — To be Complete	Date ► X/MI 04
We due elec	have approved this application. Please attach this form to the organization's ret have not approved this application. However, we have granted a 10-day grace part of the organization's return (including any prior extensions). This grace part of the organization is return and on a timely filed return. Please attach this	turn period from the later of the date shown below or the , eriod is considered to be a valid extension of time for form to the organization's return.
lime	have not approved this application. After considering the reasons stated in item to file. We are not granting a 10-day grace period.	The state of the s
We Othe	cannot consider this application because it was filed after the due date of the r er	
	By	
Director		Date
	Mailing Address — Enter the address if you want the copy of this application for ifferent than the one entered above	r an additional 3-month extension r gர்ம் ned to an
Type or	Wyckoff & Associates, P.C. Number and street (include suite, room, or apartment number) or a PO box number	
print	955 E Colorado Ave	
	City or town, province or state, and country (including postal or ZIP code)	
BAA	Colorado Springs, CO 80903	Form 8868 (Rev 12-2000)
	FIF20302L 01/05/04	1 01111 0000 (1/67 12-2000)