

# Return of Organization Exempt From Income Tax

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

2007

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A For the 2007 calendar year, or tax year beginning**

08-01, 2007, and ending

07-31, 2008

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

<b>Please use IRS label or print or type. See Specific Instructions.</b>	<b>C Name of organization</b> ZONA VOLLEYBALL CLUB INC	
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite
	2470 N ADRON AVENUE	
	City or town, state or country, and ZIP + 4 TUCSON AZ 85715	

<b>D Employer identification number</b> 86-0803853
<b>E Telephone number</b> (520) 885-9866
<b>F Accounting method:</b> <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates ▶

**H(c)** Are all affiliates included?  Yes  No  
(If "No," attach a list. See instructions.)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**G Website:** ▶

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

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

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 305,067

**I** Group Exemption Number ▶

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

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions.)

	<p><b>1</b> Contributions, gifts, grants, and similar amounts received:</p> <p><b>a</b> Contributions to donor advised funds</p> <p><b>b</b> Direct public support (not included on line 1a)</p> <p><b>c</b> Indirect public support (not included on line 1a)</p> <p><b>d</b> Government contributions (grants) (not included on line 1a)</p> <p><b>e Total</b> (add lines 1a through 1d) (cash \$ _____ noncash \$ _____)</p>			
		<b>1a</b>		
		<b>1b</b>		
		<b>1c</b>		
		<b>1d</b>		
			<b>1e</b>	
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)		<b>2</b>	300,160
	<b>3</b> Membership dues and assessments		<b>3</b>	
	<b>4</b> Interest on savings and temporary cash investments		<b>4</b>	
	<b>5</b> Dividends and interest from securities		<b>5</b>	
	<b>6a</b> Gross rents	<b>6a</b>		
	<b>b</b> Less: rental expenses	<b>6b</b>		
	<b>c</b> Net rental income or (loss). Subtract line 6b from line 6a		<b>6c</b>	
	<b>7</b> Other investment income (describe ▶ _____)		<b>7</b>	
	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
		<b>8a</b>		
	<b>b</b> Less: cost or other basis and sales expenses	<b>8b</b>		
	<b>c</b> Gain or (loss) (attach schedule)	<b>8c</b>		
	<b>d</b> Net gain or (loss). Combine line 8c, columns (A) and (B)		<b>8d</b>	
	<b>9</b> Special events and activities (attach schedule). If any amount is from <b>gaming</b> , check here <input type="checkbox"/>			
	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1b)	<b>9a</b>		
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>		
	<b>c</b> Net income or (loss) from special events. Subtract line 9b from line 9a		<b>9c</b>	
	<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>	4,907	
	<b>b</b> Less: cost of goods sold	<b>10b</b>	4,614	
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a		<b>10c</b>	293
	<b>11</b> Other revenue (from Part VII, line 103)		<b>11</b>	
	<b>12 Total revenue.</b> Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11		<b>12</b>	300,453
E X P E N S E S	<b>13</b> Program services (from line 44, column (B))		<b>13</b>	292,892
	<b>14</b> Management and general (from line 44, column (C))		<b>14</b>	5,794
	<b>15</b> Fundraising (from line 44, column (D))		<b>15</b>	0
	<b>16</b> Payments to affiliates (attach schedule)		<b>16</b>	
	<b>17 Total expenses.</b> Add lines 16 and 44, column (A)		<b>17</b>	298,686
N E T A S S E T S	<b>18</b> Excess or (deficit) for the year. Subtract line 17 from line 12		<b>18</b>	1,767
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))		<b>19</b>	44,171
	<b>20</b> Other changes in net assets or fund balances (attach explanation)		<b>20</b>	(2,187)
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18, 19, and 20		<b>21</b>	43,751

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
<b>22 a</b>	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b>				
<b>22 b</b>	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b>				
<b>23</b>	Specific assistance to individuals (attach schedule)	<b>23</b>				
<b>24</b>	Benefits paid to or for members (attach schedule)	<b>24</b>				
<b>25 a</b>	Compensation of current officers, directors, key employees, etc. listed in Part V-A	<b>25a</b>	70,000	70,000		
<b>b</b>	Compensation of former officers, directors, key employees, etc. listed in Part V-B	<b>25b</b>				
<b>c</b>	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	<b>25c</b>				
<b>26</b>	Salaries and wages of employees not included on lines 25a, b, and c	<b>26</b>	80,310	80,310		
<b>27</b>	Pension plan contributions not included on lines 25a, b, and c	<b>27</b>				
<b>28</b>	Employee benefits not included on lines 25a - 27	<b>28</b>				
<b>29</b>	Payroll taxes	<b>29</b>	19,354	19,354		
<b>30</b>	Professional fundraising fees	<b>30</b>				
<b>31</b>	Accounting fees	<b>31</b>	300		300	
<b>32</b>	Legal fees	<b>32</b>				
<b>33</b>	Supplies	<b>33</b>	19,800	19,800		
<b>34</b>	Telephone	<b>34</b>	2,975	2,975		
<b>35</b>	Postage and shipping	<b>35</b>	718	718		
<b>36</b>	Occupancy	<b>36</b>				
<b>37</b>	Equipment rental and maintenance	<b>37</b>	10,960	10,960		
<b>38</b>	Printing and publications	<b>38</b>				
<b>39</b>	Travel	<b>39</b>	46,714	46,714		
<b>40</b>	Conferences, conventions, and meetings	<b>40</b>	1,645	1,645		
<b>41</b>	Interest	<b>41</b>				
<b>42</b>	Depreciation, depletion, etc. (attach schedule)	<b>42</b>	880		880	
<b>43</b>	Other expenses not covered above (itemize):					
<b>a</b>	INSURANCE	<b>43a</b>	790	790		
<b>b</b>	FEEES	<b>43b</b>	29,367	29,367		
<b>c</b>	OFFICE	<b>43c</b>	3,238		3,238	
<b>d</b>	MISC	<b>43d</b>	10,259	10,259		
<b>e</b>	SECURITY SYSTEM	<b>43e</b>	1,376		1,376	
<b>f</b>		<b>43f</b>				
<b>g</b>		<b>43g</b>				
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	298,686	292,892	5,794	0

**Joint Costs.** Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III** Statement of Program Service Accomplishments (See the instructions.)

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

What is the organization's primary exempt purpose? ► SEE BELOW

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

**Program Service Expenses**  
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

**a** See SERVICES  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Grants and allocations \$ \_\_\_\_\_ ) If this amount includes foreign grants, check here ►

300,160

**b**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Grants and allocations \$ \_\_\_\_\_ ) If this amount includes foreign grants, check here ►

**c**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Grants and allocations \$ \_\_\_\_\_ ) If this amount includes foreign grants, check here ►

**d**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Grants and allocations \$ \_\_\_\_\_ ) If this amount includes foreign grants, check here ►

**e** Other program services (attach schedule)  
(Grants and allocations \$ \_\_\_\_\_ ) If this amount includes foreign grants, check here ►

**f Total of Program Service Expenses** (should equal line 44, column (B), Program services) . . . . . ►

300,160

**Part IV Balance Sheets** (See the instructions.)

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

		(A)		(B)	
		Beginning of year		End of year	
A s s e t s	45 Cash - non-interest-bearing	18,273	45	12,465	
	46 Savings and temporary cash investments	25,548	46	25,882	
	47 a Accounts receivable				
	b Less: allowance for doubtful accounts		47c		
	48 a Pledges receivable	5,998			
	b Less: allowance for doubtful accounts		48c	5,998	
	49 Grants receivable		49		
	50 a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a		
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b		
	51 a Other notes and loans receivable (attach schedule)				
	b Less: allowance for doubtful accounts		51c		
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges		53		
	54 a Investments - publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a		
	b Investments - other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b		
55 a Investments - land, buildings, and equipment: basis					
b Less: accumulated depreciation (attach schedule)		55c			
56 Investments - other (attach schedule)		56			
57 a Land, buildings, and equipment: basis	18,824				
b Less: accumulated depreciation (attach schedule) STM116	16,954	2,200	57c	1,870	
58 Other assets, including program-related investments (describe ▶ )			58		
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58		46,021	59	46,215	
L i a b i l i t i e s	60 Accounts payable and accrued expenses	1,850	60	2,464	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64 a Tax-exempt bond liabilities (attach schedule)		64a		
	b Mortgages and other notes payable (attach schedule)		64b		
	65 Other liabilities (describe ▶ )		65		
66 <b>Total liabilities.</b> Add lines 60 through 65		1,850	66	2,464	
<b>Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>					
N e t A s s e t B a l a n c e s	67 Unrestricted		67		
	68 Temporarily restricted		68		
	69 Permanently restricted		69		
	<b>Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74.</b>				
	70 Capital stock, trust principal, or current funds	0	70	0	
71 Paid-in or capital surplus, or land, building, and equipment fund	44,171	71	43,751		
72 Retained earnings, endowment, accumulated income, or other funds	0	72	0		
73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	44,171	73	43,751		
74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73		46,021	74	46,215	