## ggn.

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

orm Jayo				Un	der sec	tion 501(c)	. 527	or 49	47(a)(1	) of the Inte	rnal Rev	enue Co	ode (except bla	ick lu	ıng		<b>ZU</b> I	
		f the Treasury						bene	fit trus	t or private	foundatio	on)	reporting requi				Open to Inspec	Public
_		nue Service	lander vos				ay na	ve to u	se a co	, and endi		Siy State	reporting requi	TOTTIO	1110.		шэрсс	tion
	/ (A)		lendar yea	THE RESERVE OF THE PARTY OF THE			r. B	V CKE	TRAT.I	RETIR				D	Emplo	yer identi	fication num	ber
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.] A	Address	change	D : D :		P	LAILKS	AS	SOC1.	AIIOI	N INC				1	04.	-316	5255	
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1	nitial retu	ırn					ivereu	to street a	address)				100000000000000000000000000000000000000	1				
1				JACI									1600	╀				
ן ן	Terminat	ed	City or town	n, state or c	country, and	d ZIP + 4												
A	Amended		CHICA					IL	606	04				G (	Gross rec	eipts \$	1,65	2,840
1	Application	on pending	F Name and	address of	principal of	ficer:							H(a) Is this a	aroun r	return for	affiliates?	Yes	X No
7.	фиоси	J. Politonia	ROBE	RT E	LLIC	TT							ri(a) is the a	group	Otalii ioi	annatoo.		H
			175	W. J	ACKS	ON BL	VD.	. #1	600				H(b) Are all a				Yes	No No
			CHIC	AGO					IL (	60604			If "N	lo," att	ach a list	. (see inst	ructions)	
	Tax-exe	mpt status:	X 50	1(c)(3)	501(0	;) (	<b>4</b> (	insert no.	)	4947(a)(1) or	5	27						
_	Website				_	TBALL.							H(c) Group e	exempti	ion numb	er 🕨		
		organization:	X Corpo		Trust	Associati	Г	Other	<b>&gt;</b>			L	Year of formation:			M State	e of legal dom	icile:
	art I		mmary	- Calon	11001										-110			
i				raanizat	ion's mis	sion or mo	st sin	nifican	activitie	es:								
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3	1	Check this	_	_									% of its net asse		3	13		
5			(T)												4	13		
מ			95	ependent voting members of the governing body (Part VI, line 1b) of individuals employed in calendar year 2011 (Part V, line 2a)											8			
5	5	Total num	ber of indiv	riduals e	mployed	in calenda	r yea	r 2011	(Part V,	line 2a)					5			
2	0,000					if necessar									6	0		
`	7a	Total unre	lated busin	ess reve	enue fror	m Part VIII,	colur	mn (C),	line 12						7a			0
	b	Net unrela	ted busine	ss taxab	le incom	ne from For	m 99	0-T, lin	e 34						7b		O Va	0
													Prior Y		400		Current Ye	
ש													1,34	1,327,480			1,630,750	
2														_	0			4 074
Š	10	Investmen	nt income (I	Part VIII,	, column	(A), lines 3	3, 4, a	ind 7d)							726			4,074
צ	11	Other reve	enue (Part	VIII, colu	ımn (A),	lines 5, 6d	8c, 9	9c, 10c	, and 11	le)					754			8,016
	12	Total reve	nue – add	lines 8 th	nrough 1	1 (must eq	ual P	art VIII	columi	n (A), line 12	)		1,55					2,840
	13	Grants and	d similar ar	mounts p	oaid (Pai	rt IX, colum	n (A)	, lines '	1–3)				13		455			0,010
	14	Benefits p	aid to or fo	r membe	ers (Part	IX, column	(A),	line 4)							773			0,186
מ	15	Salaries, c	other comp	ensation	n, employ	yee benefits	s (Pai	rt IX, co	olumn (A	A), lines 5-1	0)		5.5	56,	597		45	2,319
se						(, column (A									0			0
ber				10.75		column (D),					0							
ĭ	4.5					lines 11a-							85	53,	047		98	5,171
			Contraction of the second of the second							ne 25)			1,5	54,	872		1,53	7,686
						e 18 from li				/					088		15	5,154
es		ive verine i	coo exhell	JUJ. JUL	AGOUTH I	3 10 HOHI III	10 12						Beginning of C				End of Ye	ar
anci	20	Total asse	ets (Part X,	line 16)									1,83	18,	385			3,670
Fund Balances	21		lities (Part											27,	547		2	8,892
nu	22					t line 21 fro	m lin	e 20					1,79	90,	838			4,778
_	art I		nature		Jublido	21 110			.,,,,,,,									
-	art fi	analtica of	orium Id	loro that	I have su	amined this	return	includ	ing acco	mnanving sol	nedules an	d statem	ents, and to the b	est of	my kno	wledge	and belief.	it is
tri	naer po ue, cor	enaities of p rect. and co	erjury, I aed mplete. Ded	lare that	nave ex of prepare	er (other tha	n offic	er) is ba	ased on	all information	of which	oreparer	has any knowled	ge.	,			word File
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	Print/Type preparer's name					Preparer's signature Date						Check	if	PTIN		
aid	BENJAMIN HURWITZ					BENJAMIN HURWITZ 1					5/12	self-empl		P008		
reparer	Firm's na	me	<b>)</b>	WELTMAN	BERNFI	ELD 1	LLC				Firm's E	EIN Þ	36	-41	19	553
se Only	Firm's ad		•	485 E HA BUFFALO			D, SUITE 250 60089-8806				Phone	no.	847	-	1-	0100
lay the IR	S discus	s this r	eturn	with the preparer	shown above?	(see ins	structions)							X	'es	No

	990 (2011) NATIONAL BASKETBALL RETIRED	04-3165255	Page
a	art III Statement of Program Service Accomplishments	n in this Bort III	X
_	Check if Schedule O contains a response to any question	II III tills Fait III	
	Briefly describe the organization's mission:		
0	SEE SCHEDULE O		
_	Did the organization undertake any significant program services during the year w	hich were not listed on the	
			Yes X No
	prior Form 990 or 990-EZ?		
	If "Yes," describe these new services on Schedule O.	lucte any program	
	Did the organization cease conducting, or make significant changes in how it cond		Yes X No
	services?		
	If "Yes," describe these changes on Schedule O.	largest program convices, as measured by	
	Describe the organization's program service accomplishments for each of its three	a largest program services, as measured by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) t	rusts are required to report the amount of	
	grants and allocations to others, the total expenses, and revenue, if any, for each	program service reported.	
_		C \ (Payanue \$	
	(Code: ) (Expenses \$ including grants of	\$ ) (Revenue \$	
	CHOLARSHIPS AND CHARITABLE DONATIONS		
	·		
	*		
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	(0000)		
		. <b> </b>	
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		) (Payanus ¢	
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	* *************************************		
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_	d Other program services. (Describe in Schedule O.)		
A	(Expenses \$ 1,537,686 including grants of \$ 9	0,010 ) (Revenue \$	)
-	e Total program service expenses ► 1,537,686		
هـ	s rotal program service expenses = ±/33//000	and the same of th	Farm 990 (20

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X 1 complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 X 3 candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 X 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II 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, X 5 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 X 6 "Yes." complete Schedule D. Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X 8 complete Schedule D, Part III Did the organization report an amount in Part X, line 21; 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," X 9 complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted X endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X 11a complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more X 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more X 11c of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets X 11d reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 2a X 12a Schedule D, Parts XI, XII, and XIII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if 12b X the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII 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? 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 X 14b foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any X 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 X to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on X 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on X 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 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

Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

X

X

19

20a

20b

Part IV Checklist of Required Schedules (continued)

Pa	rt IV Checklist of Required Schedules (continued)		Yes	No
			res	NO
1	Did the organization report more than \$5,000 of grants and other assistance to any government or organization	21	x	
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	-		
2	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	22	х	
3.990	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			
3	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	23	х	
	employees? If "Yes," complete Schedule J	- 20		
4a	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	24a		x
	through 24d and complete Schedule K. If "No," go to line 25	24b		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 245		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
	to defease any tax-exempt bonds?	24d		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	244		
5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25a		x
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	200		
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?	25b		x
	If "Yes," complete Schedule L, Part I	230		
6	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	26		х
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	20		
7	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	27		х
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	- 21		
8	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):	28a		x
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	200		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		x
	Schedule L, Part IV	200		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28c		x
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	29		X
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 23		
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		x
	conservation contributions? If "Yes," complete Schedule M	.   30		-
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		x
	Part I	- 1		<del></del> -
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	32		x
	complete Schedule N, Part II	. 32	<del>                                     </del>	<del></del>
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	. 33		+
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	34		x
	IV, and V, line 1	A. Contract		X
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. 33a		<del></del>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	35b		x
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	330	T	<del></del>
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	36		x
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	$\vdash$	+
7	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,	37		x
	Part VI	3/	$\vdash$	<del></del>
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	38	1	x
	19? Note. All Form 990 filers are required to complete Schedule O		-00	0 (2011)

Is the organization licensed to issue qualified health plans in more than one state?

Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which

Did the organization receive any payments for indoor tanning services during the tax year?

the organization is licensed to issue qualified health plans Enter the amount of reserves on hand

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O ......

orm 990 (2011) NATIONAL BASKETBALL RETIRED 04-3165255 Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes No 84 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 0 1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and 1c reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 8 2a Statements, filed for the calendar year ending with or within the year covered by this return X 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3b If "Yes." has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X 4a If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X 6a organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a and services provided to the payor? 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c required to file Form 8282? If "Yes." indicate the number of Forms 8282 filed during the year 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9a Did the organization make any taxable distributions under section 4966? 9b Did the organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 0 Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: 11a Gross income from members or shareholders a Gross income from other sources (Do not net amounts due or paid to other sources 11b against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.

X

13a

14a

orm 990 (2011) NATIONAL BASKETBALL RETIRED Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" re O. See

esponse to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule	
e instructions. Check if Schedule O contains a response to any question in this Part VI	X

iec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 13	1 1		
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13	]		
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?	2		X
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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
ra	and a second property of the governing hady?	7a	X	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
b	and the state of t	7b		X
D	stockholders, or persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
В		8a	X	
a	The governing body?  Each committee with authority to act on behalf of the governing body?	8b	х	
b	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X	
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	de.)		
ec	tion B. Folicies (This Section B requests information about policies not required by the internet section B.		Yes	No
0-	Did the association have lead charters branches or affiliates?	10a	Х	
0a	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		х
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
1a		- 1.1		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X	
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	X	
	describe in Schedule O how this was done	13		х
3	Did the organization have a written whistleblower policy?	14	Х	
4	Did the organization have a written document retention and destruction policy?	14	**	_
5	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		x
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	130		22
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	40-		x
	with a taxable entity during the year?	16a		A
b	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	401		
_	organization's exempt status with respect to such arrangements?	16b		
iec	ction C. Disclosure			_
7	List the states with which a copy of this Form 990 is required to be filed ▶ NY			
8	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.			
	Own website Another's website X Upon request			
9	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.			
0	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: NATL. BASKETBALL RET. PLAYERS ASSN. 175 W JACKSON BLVD #1600			401
C	HICAGO IL 60604 31	2-91	3 - 9	400

orm 990 (2011)
Part VII

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

Check if Schedule O contains a response to any question in this Part VII

ection A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the rganization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of ompensation. 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) the received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the reganization 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 rganization, more than \$10,000 of reportable compensation from the organization and any related organizations. ist persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest ompensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (describe hours for related	(de bo	o not o x, unle	Posi check i	ition more rson is irector	than one s both a r/trustee	e n	(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
	organizations in Schedule O)	Individual trustee or director	Institutional trustee	сег	Key employee	Highest compensated employee	ner			and related organizations
(1) THURL BAILEY										
DIRECTOR	2.00	X						0	0	0
(2) HARVEY CATCHINGS									_	•
DIRECTOR	2.00	X		_		$\vdash$	_	0	0	0
(3) JAMES DONALDSON									,	0
DIRECTOR	2.00	X				$\vdash$	_	0	0	0
(4) LARUE MARTIN JR									_	0
DIRECTOR	2.00	X	_	_			_	0	0	0
(5) JOHNNY NEWMAN									_	0
DIRECTOR	2.00	X	_	_		$\vdash \vdash$		0	0	0
(6) DANNY SCHAYES						1 1		_	0	0
DIRECTOR	2.00	X	-	_	_	$\vdash$		0	U	0
(7) BOB ELLIOTT PRESIDENT	10.00			х				0	0	0
(8) OTIS BIRDSONG	7 ///									
/ICE PRESIDENT	2.00	_	_	X	_	$\sqcup$		0	0	0
(9) MARVIN ROBERTS										
TREASURER	2.00	1	<u> </u>	X	_	$\sqcup$		0	0	0
10) STEVE HAYES									_	
BECRETARY	2.00	_		X	_	$\vdash$		0	0	0
11) GEORGE TINSLEY										_
PAST PRESIDENT	2.00	_	_	X	_	$\vdash$		0	0	0
12) LISA RENEE BROWN								100 000	_	0
HIEF OPER. OFFICER	40.00	+	-	_	_	$\vdash$	X	103,328	0	0
13)										
14)										
	I		1	1		1				

Pa	rt VI	II Statem	ent of Reve	nue					
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
				4.					
nts		Federated cam		1a	62 250	1			
100		Membership du		1b	63,250				
An		Fundraising ev		1c					
ar		Related organia		1d					
and Other Similar Amounts	е	Government grants (	contributions)	1e					
S	f	All other contribution							
the		and similar amounts	not included above	1f	1,567,500				
0	g	Noncash contribution	s included in lines 1a-	1f: \$		20, 20, 20, 20, 20, 20, 20, 20, 20, 20,			
an	h	Total. Add line	s 1a–1f			1,630,750			
e					Busn. Code				
len/	2a								
Ke	b				1 1				
Program Service Revenue	С								
Š	d								
Ë	е								
g	f		am service rever						
5			s 2a–2f						
П			ome (including o		I				
		and other simil			<b>&gt;</b>	4,074	4,074		
	4		vestment of tax	exempt bo	nd proceeds >				
	5								
	Ü	Noyalloo	(i) Real		(ii) Personal				
	62	Gross rents	V						
		Less: rental exps.							
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
		Rental inc. or (loss)			<b>b</b>				
		Gross amount from	me or (loss)		(ii) Other				
		sales of assets	(i) Securities	•	(ii) Other				
		other than inventory							
	b	Less: cost or other							
	i.	basis & sales exps.							
	2000	Gain or (loss)							
			ss)						
ne	8a		om fundraising eve						
enr		(not including \$							
⟨e∨			reported on line 1c						
Other Keven			18			A	1		
Ę			penses						
			(loss) from fund		ents				
	9a		om gaming activitie						
		See Part IV, line		10000					
			penses						
			(loss) from gam	ning activitie	es				
	10a		f inventory, less						
		returns and al	lowances	a					
	b	Less: cost of	goods sold	b					
	С	Net income or	(loss) from sale	s of invent					
		Mi	scellaneous Revenue	×	Busn. Code	_ 6 95.0=2786			
	11a	OTHER RE	VENUE			58,016	58,016		
	b								-
	С								
	d		nue						
	е	Total. Add lin	es 11a-11d			58,016			
	40		a See instruction		<b>•</b>	1,692,840	62,090	(	)  (

orm 990 (2011)

## **Statement of Functional Expenses**

Part IX ection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not equired to complete columns (B), (C), and (D).

squii	Check if Schedule O contains a response to a	any question in this Part IX			
		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b,	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	8b, 9b, and 10b of Part VIII.		ехрепосо	gonoral orponate	
1	Grants and other assistance to governments and	5,600	5,600		
-	organizations in the U.S. See Part IV, line 21	3,000	3,000		
2	Grants and other assistance to individuals in	84,410	84,410		
	the U.S. See Part IV, line 22	04,410	04,410		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	10 106	10 106		
4	Benefits paid to or for members	10,186	10,186		
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)	407 202	407 202		
7	Other salaries and wages	407,282	407,282		
8	Pension plan accruals and contributions (include	7 005	7 225		
	section 401(k) and 403(b) employer contributions)	7,225	7,225		
9	Other employee benefits	27 010	27 010		
10	Payroll taxes	37,812	37,812		
11	Fees for services (non-employees):	60 734	60 734		
а	Management	62,734	62,734		
b	Legal	45,596	45,596		
С	Accounting	23,190	23,190		
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	24 546	24 546		
13	Office expenses	34,546	34,546		
14	Information technology	2,458	2,430		
15	Royalties	357 003	357,083		
16	Occupancy	357,083 34,030	34,030		
17	Travel	34,030	34,030		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	123,520	123,520		
19	Conferences, conventions, and meetings	123,320	123,320		
20	Interest				
21	Payments to affiliates	64,234	64,234		
22	Depreciation, depletion, and amortization	72,171	72,171		
23	Insurance	12111	, 2 , 2 , 2		
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 MANUAL CONTROL MANUAL DESCRIPTION CONTROL CO				
	(A) amount, list line 24e expenses on Schedule O.)  OUTSIDE LABOR	37,877	37,877		
a	APPEARANCE FEES	34,095	34,095		
a	MOVING EXPENSES	22,678	22,678		
ر 0	TITT TTTEC	21,268	21,268		
d	All - (1	49,691	49,691	390	
e 25	All other expenses  Total functional expenses. Add lines 1 through 24e	1,537,686	1,537,686	0	0
25 26	Joint costs. Complete this line only if the	_,,			
-0	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here   following SOP 98-2 (ASC 958-720)				
AA	Idilowing doi: 30-2 (Add 330-120)				Form <b>990</b> (2011)

Part X **Balance Sheet** (B) (A) End of year Beginning of year 1,302,954 1,132,968 1 Cash—non-interest bearing 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 500,000 500,000 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II of 5 Schedule L 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 6 employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 5,266 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 90,960 other basis. Complete Part VI of Schedule D 10a 24,253 31,758 66,707 10b 10c b Less: accumulated depreciation Investments—publicly traded securities 11 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 14 144,009 148,393 15 Other assets. See Part IV, line 11 15 2,013,670 1,818,385 16 Total assets. Add lines 1 through 15 (must equal line 34).... 16 27,174 28,519 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key 22 Liabilities 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 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 373 25 28,892 27,547 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here ▶ │ │ and complete lines 27 through 29, and lines 33 and 34. or Fund Balances 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. Net Assets 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 1,790,838 1,984,778 32 Retained earnings, endowment, accumulated income, or other funds 32 1,984,778 1,790,838 33 Total net assets or fund balances 33 2,013,670 1,818,385 34 Total liabilities and net assets/fund balances .....

Form 990 (2011)

Form **990** (2011)

orm	990 (2011) NATIONAL BASKETBALL RETIRED 04-3165255			Pa	ge 14			
Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI							
		r 1	2 2					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,69					
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,5	37, 55,				
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))							
5	Other changes in net assets or fund balances (explain in Schedule O)	5		38,	786			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				n=+x-160cc			
	column (B))	6	1,98	84,	778			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in							
	Schedule O.				l			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	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?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in							
	Schedule O.							
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were							
	issued on a separate basis, consolidated basis, or both:				ĺ			
	Separate basis X Consolidated basis Both consolidated and separate basis							
3a	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?		3a		X			
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		3b		L			