COMMITTEE ON NATURAL RESOURCES Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

Oversight hearing titled "Fishing = Jobs: How Strengthening America's Fisheries Strengthens Our Economy."

August 25, 2012

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For Witnesses Representing Organizations:

- 1. Name: Capt. Robert F. Zales, II
- 2. Name of Organization(s) You are Representing at the Hearing:

National Association of Charterboat Operators (NACO)

- 3. Business Address: P.O.Box 2990, Orange Beach, AL 36561
- 4. Business Email Address: president@nacocharters.org
- 5. Business Phone Number: 251-981-5136

Name/Organization: Capt. Robert F. Zales, II, National Association of Charterboat Operators_ Title/Date of Hearing: Oversight hearing titled "Fishing = Jobs: How Strengthening America's Fisheries Strengthens Our Economy." – August 25, 2012

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

USCG License: Master of Steam and Motor Vessels of Not More than 500 Gross Registered Tons (Domestic Tonnage) Upon Oceans. Master of Offshore Supply Vessels of Not More Than 3000 Gross Tons (ITC Tonnage) Upon Domestic Near Coastal Waters.

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

Working in my family charter fishing business in Panama City, FL since 1965. In addition worked in the offshore oil industry from 1975 thru 1985 off Louisiana and the Netherlands.

President, since 1999, of NACO, a trade association for charter boat owners and operators throughout the United States.

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that you have received in the current year and previous four years, including the source and the amount of each grant or contract. N/A

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed. N/A

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

As President of NACO, was active in the issues of the Deep Water Horizon BP Oil Spill, that affected the charter fishing industry in the Gulf of Mexico working to assist the owners and operators in gaining work and compensation for their losses suffered as a result of the resource damage. Served as a member of the Gulf Oil Spill Economic Recovery Task Force for Florida, appointed by Governor Crist. Currently serving as an advisor for the National Institute of Environmental Health Services "Gulf Study" which is a long term study to determine the health impacts on oil spill cleanup workers.

Name/Organization: Capt. Robert F. Zales, II, National Association of Charterboat Operators (NACO) Title/Date of Hearing: Title/Date of Hearing: Oversight hearing titled "Fishing = Jobs: How Strengthening America's Fisheries Strengthens Our Economy." – August 25, 2012

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

President since 1999, Board member since 1993.

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

N/A

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s). N/A

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization. N/A

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Attached

Form **990**

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)



Department of the Treasury Internal Revenue Service

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

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b Less: cost or other basis and sales expenses 0 8b 0 c Gain or (loss) (attach schedule) 0 8c 0 g Special events and activities (attach schedule). If any amount is from gaming, check here 8d 0 g Gross revenue (not including \$ 0 of 0 8d 0 c Arrows revenue (not including \$ 0 of 0 0 0 c Net income or (loss) from special events. Subtract line 9b from line 9a 0 0 0 b Less: cost of goods sold 10a 0 0 0 c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 0 c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 0 c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 0 c Gross profit or (loss) from Bales of inventory (attach schedule). Subtract line 10b from line 10a 110c 0 c Gross profit or (loss) from Bales of inventory (attach schedule). Subtract line 10b from line 10a 110c 0 c Gross profit or (loss) from Bales of inventory (attach schedule). Subtract line 10b from line 10a 112 196.678 13 </td <td>ver</td> <td>8 a</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>(B) O</td> <td>lher</td> <td></td> <td></td>	ver	8 a						(B) O	lher		
c Gain or (loss) (attach schedule) . . 0 8c 0 d Net gain or (loss). Combine line 8c, columns (A) and (B) . <td>Å</td> <td></td>	Å										
d Net gain or (loss). Combine line 8c, columns (Å) and (B) 8d 0 9 Special events and activities (attach schedule). If any amount is from gaming, check here 1 8d 0 a Gross revenue (not including \$ 0 of 9a 0 0 b Less: direct expenses other than fundraising expenses 9b 0 0 c Net income or (loss) from special events. Subtract line 9b from line 9a 9c 0 10 a Gross sales of inventory, less returns and allowances 10a 0 b Less: cost of goods sold 10b 0 c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 0 11 0 11 7.883 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 12 196,678 13 Program services (from line 44, column (B)) 14 184,638 15 Fundraising (from line 44, column (C)) 15 0 16 0 0 0 16 0 17 Total expenses. Add lines 16 and 44, column (A) 17 185,489 11,189 18 Excess or (deficit) for the year. Subtract line 17 from line 73, co											
9 Special events and activities (attach schedule). If any amounts from gaming, check here g a gross revenue (not including \$ 0 of contributions reported on line 1b) b Less: direct expenses other than fundraising expenses gb 0 of contributions reported on line 1b) c Net income or (loss) from special events. Subtract line 9b from line 9a gc 0 of contributions reported on line 1b) c Net income or (loss) from special events. Subtract line 9b from line 9a gc 0 of cons sales of inventory, less returns and allowances 10a 0 b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 0 ther revenue (from Part VII, line 103) c Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 d Management and general (from line 44, column (B)) f Payments to affiliates (attach schedule) f Payments to affiliates (attach schedule) f Payments to affiliates (attach schedule) f Revenses. Add lines 16 and 44, column (A) f Revenses. Add lines 16 and 44, column (A) f Revenses or (deficit) for the year. Subtract line 17 from line 73, column (A)) f Revenses or fund balances at beginning of year (from line 73, column (A)) f Revenses or fund balances (attach explanation) f Other changes in net assets or fund balances (attach explanation) f Other changes in net assets or fund balances (attach explanation) 										84	0
a Gross revenue (not including \$0 of contributions reported on line 1b)			Net gain (or (loss).	. Combine ane oc, countris (A and (D)	ning check	hore			Ŭ
contributions reported on line 1b) 9a 0 b Less: direct expenses other than fundraising expenses 9b 0 c Net income or (loss) from special events. Subtract line 9b from line 9a 9c 0 10 a Gross sales of inventory, less returns and allowances 10a 0 b Less: cost of goods sold 10b 0 c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 0 11 Other revenue (from Part VII, line 103) 11 7,883 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 12 196,678 13 Program services (from line 44, column (B)) 13 851 14 Management and general (from line 44, column (C)) 14 184,638 15 Fundraising (from line 44, column (C)) 16 0 16 0 0 0 0 17 Total expenses. Add lines 16 and 44, column (A) 17 185,489 18 Excess or (deficit) for the year. Subtract line 17 from line 73, column (A)) 19 98,422 20 Other changes in net assets or fund balances (attach explanation) 20 0 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>ning, chock</td> <td>nere</td> <td></td> <td></td> <td></td>							ning, chock	nere			
b Less: direct expenses other than fundraising expenses		d					9a			0	
c Net income or (loss) from special events. Subtract line 9b from line 9a 9c 0 10 a Gross sales of inventory, less returns and allowances 10a 0 b Less: cost of goods sold 10b 0 c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 0 c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 0 11 Other revenue (from Part VII, line 103) 11 7,883 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 12 196,678 13 Program services (from line 44, column (B)) 13 851 14 Management and general (from line 44, column (C)) 14 184,638 15 Fundraising (from line 44, column (D)) 15 0 16 Payments to affiliates (attach schedule) 17 185,489 18 Excess or (deficit) for the year. Subtract line 17 from line 12 18 11,189 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 98,422 20 Other changes in net assets or fund balances (attach explanat		Ь								0	
10 a Gross sales of inventory, less returns and allowances 10a 0 b Less: cost of goods sold 10 a 0 c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 0 11 Other revenue (from Part VII, line 103) 11 7,883 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 12 196,678 13 Program services (from line 44, column (B)) 13 851 14 Management and general (from line 44, column (C)) 14 184,638 15 Fundraising (from line 44, column (D)) 16 0 16 Payments to affiliates (attach schedule) 17 185,489 18 Excess or (deficit) for the year. Subtract line 17 from line 12 18 11,189 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 98,422 20 0ther changes in net assets or fund balances (attach explanation) 20 0			Net incon	ne or (los	ss) from special events. Sub	tract line 9b from lir				. 9c	0
b Less: cost of goods sold 10b 0 c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 0 11 0ther revenue (from Part VII, line 103) 11 7,883 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 12 196,678 13 Program services (from line 44, column (B)) 13 851 14 Management and general (from line 44, column (C)) 14 184,638 15 Fundraising (from line 44, column (D)) 15 0 16 0 0 16 0 17 Total expenses. Add lines 16 and 44, column (A) 17 185,489 18 Excess or (deficit) for the year. Subtract line 17 from line 12 18 11,189 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 98,422 20 Other changes in net assets or fund balances (attach explanation) 0 0		10 a	Gross sal	les of inv	entory, less returns and allo	wances	10a			0	
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a10c011Other revenue (from Part VII, line 103)117,88312Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 1112196,67813Program services (from line 44, column (B))1385114Management and general (from line 44, column (C))14184,63815Fundraising (from line 44, column (D))16016001617Total expenses. Add lines 16 and 44, column (A)1718Excess or (deficit) for the year. Subtract line 17 from line 121819Net assets or fund balances at beginning of year (from line 73, column (A))192000		b	Less: cos	t of good	ds sold					0	
11 Other revenue (from Part VII, line 103) 11 7,883 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 12 196,678 13 Program services (from line 44, column (B)) 13 851 14 Management and general (from line 44, column (C)) 14 184,638 15 Fundraising (from line 44, column (D)) 15 0 16 Payments to affiliates (attach schedule) 16 0 17 Total expenses. Add lines 16 and 44, column (A) 17 185,489 18 Excess or (deficit) for the year. Subtract line 17 from line 12 18 11,189 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 98,422 20 Other changes in net assets or fund balances (attach explanation) 0 0		c	Gross prof	it or (loss) from sales of inventory (attach	schedule). Subtract li	ne 10b from	n line 10a	a	10c	
13Program services (from line 44, column (B))1385114Management and general (from line 44, column (C))14184,63815Fundraising (from line 44, column (D))15016Payments to affiliates (attach schedule)16017Total expenses. Add lines 16 and 44, column (A)17185,48918Excess or (deficit) for the year. Subtract line 17 from line 121811,18919Net assets or fund balances at beginning of year (from line 73, column (A))1998,42220Other changes in net assets or fund balances (attach explanation)00		3	Other rev	enue (fro	om Part VII, line 103) .					. 11	
13Program services (from line 44, column (B))1385114Management and general (from line 44, column (C))14184,63815Fundraising (from line 44, column (D))15016Payments to affiliates (attach schedule)16017Total expenses. Add lines 16 and 44, column (A)17185,48918Excess or (deficit) for the year. Subtract line 17 from line 121811,18919Net assets or fund balances at beginning of year (from line 73, column (A))1998,42220000		12	Total rev	enue. A	dd lines 1e, 2, 3, 4, 5, 6c, 7,	8d, 9c, 10c, and 11		<u> </u>	<u> </u>	12	196,678
14Management and general (from line 44, column (C))14184,63815Fundraising (from line 44, column (D))15016Payments to affiliates (attach schedule)16017Total expenses. Add lines 16 and 44, column (A)17185,48918Excess or (deficit) for the year. Subtract line 17 from line 121811,18919Net assets or fund balances at beginning of year (from line 73, column (A))1998,42220Other changes in net assets or fund balances (attach explanation)00		13								. 13	
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17Total expenses. Add lines 16 and 44, column (A)17185,48918Excess or (deficit) for the year. Subtract line 17 from line 121811,18919Net assets or fund balances at beginning of year (from line 73, column (A))1998,42220Other changes in net assets or fund balances (attach explanation)200	реп	15	Fundraisi	ng (from	line 44, column (D))						
18Excess or (deficit) for the year. Subtract line 17 from line 121811,18919Net assets or fund balances at beginning of year (from line 73, column (A))1998,42220Other changes in net assets or fund balances (attach explanation)200	ЩX	1	Payments	s to affilia	ates (attach schedule)				· •	. 16	····
19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 98,422 20 Other changes in net assets or fund balances (attach explanation) 0		17									
19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 98,422 20 Other changes in net assets or fund balances (attach explanation) 20 0	its	18	Excess of	r (deficit)) for the year. Subtract line 1	7 from line 12					
20Other changes in net assets or fund balances (attach explanation)20021Net assets or fund balances at end of year. Combine lines 18, 19, and 2021109,611	S S C		Net asset	s or fund	balances at beginning of y	ear (from line 73, co	olumn (A))			. 19	
21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	≥t A		Other cha	anges in	net assets or fund balances	(attach explanation	ı)			. 20	
	ž		Net asset	s or fund	d balances at end of year. C	ombine lines 18, 19	, and 20 .	· · · ·	<u> </u>	21	109,611

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

NATIONAL ASSOCIATION OF CHARTER BOAT OPERAT 02-0576582

	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
ሳ	Grants paid from donor advised funds (attach schedule)					
za						
				0		
	If this amount includes foreign grants, check here 🕨	22a	0	0		
2 Ь	Other grants and allocations (attach schedule)					
	(cash \$0 noncash \$0)					
	If this amount includes foreign grants, check here 🕨 🗌	22b	0	0		
3	Specific assistance to individuals (attach					
	schedule)	23	0	0		
4	Benefits paid to or for members (attach					
	schedule).	24	0	0		
5 a	Compensation of current officers, directors,					
	key employees, etc. listed in Part V-A	25a	0	0	0	
b	Compensation of former officers, directors,					
	key employees, etc. listed in Part V-B	25b	0	0	0	
С	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)	25c	0	0	0	
6	Salaries and wages of employees not included					
	on lines 25a, b, and c	26	0			
7	Pension plan contributions not included on					
	lines 25a, b, and c	27	0			
8	Employee benefits not included on lines					
	25a – 27	28	0			
9	Payroll-taxes	29	0			
0	Professional fundraising fees	30	0		070	
1	Accounting fees	31	670		670	
2	Legal fees	32	0	054		
3	Supplies , , , , , , , , , , , , , , , , , , ,	33	851	851		
4	Telephone	34	2,392		2,392 9,198	
5	Postage and shipping	35	9,198		9,190	
6	Occupancy	36	0		40.640	
7	Equipment rental and maintenance	37	19,642		<u>19,642</u> 14,011	
8	Printing and publications	38	14,011	******	14,011	
9	Travel	39	11,815		11,010	
0	Conferences, conventions, and meetings	40	0			
1	Interest	41	0	0	0	
2	Depreciation, depletion, etc. (attach schedule)	42	0	0	V	
3	Other expenses not covered above (itemize):	42-	106 010	o	126,910	
	See attached statement	43a	<u>126,910</u> 0	0		
Ь		43b	0	0		
c		43c 43d	0	0		
đ		43u 43e	0	~~~~~~		
e	,,	43e	0			
Ť		43g	0	0		
g	Total functional expenses. Add lines 22a			0	ŭ	
4						
	through 43g. (Organizations completing					
	columns (B)–(D), carry these totals to lines	44	185,489	851	184,638	
	13–15)	<u></u>	100,409	001		
	Costs. Check ► I if you are following SOP 98-2.					
	joint costs from a combined educational campaign and fundraising so	dicitation	reported in (B) F	rogram services	7 P	Yes No

Page **2**

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

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.

≥ SEE STATEMENT 1	Program Service Expenses
evements in a clear and concise manner. State the number ements that are not measurable. (Section 501(c)(3) and (4) must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
0) If this amount includes foreign grants, check here]
0) If this amount includes foreign grants, check here]
0) If this amount includes foreign grants, check here]
0) If this amount includes foreign grants, check here	
0) If this amount includes foreign grants, check here	
qual line 44, column (B), Program services) 🕨	
	evements in a clear and concise manner. State the number aments that are not measurable. (Section 501(c)(3) and (4) must also enter the amount of grants and allocations to others.) 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here 0) If this amount includes foreign grants, check here

NATIONAL ASSOCIATION OF CHARTER BOAT OPERATORS (NAI02-0576582

Form 990 (2007)

Part		Balance Sheets (See the instructions.) Where required, attached schedules and amounts within the description	(A)		(B)
N	lote:	column should be for end-of-year amounts only.	Beginning of year		End of year
<u> </u>	45	Cash—non-interest-bearing	45,927	45	56,803
	46	Savings and temporary cash investments	52,120	46	52,808
		Accounts receivable	275	47c	0
	b	Less: allowance for doubtful accounts 47b 0	375	4/C	0
1	40	Pledges receivable			
		Pledges receivable 48a 0 Less: allowance for doubtful accounts 48b 0	0	48c	0
	0 49	Grants receivable		49	
	49 50 a	Receivables from current and former officers, directors, trustees, and			
		key employees (attach schedule).	0	50a	0
	b	Receivables from other disqualified persons (as defined under section			
sts		4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
Assets	51 a	Other notes and loans receivable (attach		a de la composition d La composition de la c	
A		schedule)	0	51c	0
		Less: allowance of doublul accounts	<u>v</u>	52	<u> </u>
	52	Inventories for sale or use		53	
	53	Investments—publicly-traded securities.	0	•	0
			0	54b	0
	55 a	Investments—land, buildings, and equipment: basis			
	h	Less: accumulated depreciation (attach			
	U	schedule)	0	55c	0
	56	Investments—other (attach schedule)	0	56	0
Į		Land, buildings, and equipment: basis 57a 0			
		Less: accumulated depreciation (attach			0
		schedule)	0	57c	0
	58	Other assets, including program-related investments	0	58	0
	50	(describe ►) Total assets (must equal line 74). Add lines 45 through 58	98,422	4	109,611
 	59	Accounts payable and accrued expenses		60	
1	60 61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees (attach			
itie	-	schedule)		63	0
Liabilitie	64 a	Tax-exempt bond liabilities (attach schedule)		64a	0
1	b	Mortgages and other notes payable (attach schedule)	<u>0</u>	64b 65	0
	65	Other liabilities (describe		65	
	c c	Total liabilities. Add lines 60 through 65	C	66	0
	66				
	Orga	nizations that follow SFAS 117, check here ► and complete lines			
Ses	67	67 through 69 and lines 73 and 74. Unrestricted		67	
an	67 68	Temporarily restricted		68	
Bai	69	Permanently restricted		69	
p		inizations that do not follow SFAS 117, check here X and			
5	. 0	complete lines 70 through 74.			400.044
Net Assets or Fund Balances	70	Capital stock, trust principal, or current funds	98,422		109,611
ets	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
1SSI	72	Retained earnings, endowment, accumulated income, or other funds		12	
≩t A	73	Total net assets or fund balances. Add lines 67 through 69 or lines			
ž		70 through 72. (Column (A) must equal line 19 and column (B) must	98,422	73	109,611
ĺ		equal line 21) . Total liabilities and net assets/fund balances. Add lines 66 and 73.	98,422		109,611
	74	Total habilities and net assets/jund balances. Aud lines of and 75.	00,122	<u></u>	Form 990 (2007)

Page **4**

Form 990	(2007)				RTER BOA102-0576582	Page 5
						'See the
Part IV	ΘA	Reconciliation of Revenue per A	udited Financial Sta	tements with	Revenue per Return (
		instructions.)				
а	Total	revenue, gains, and other support per	audited financial statem	ents	<u>a</u>	
		ints included on line a but not on Part I,		١.		
1	Net u	nrealized gains on investments		<u>b</u>		
		ted services and use of facilities				
3	Reco	veries of prior year grants		<u>b</u>	3	
4	Other	(specify):				
				b		<u></u>
	Add li	nes b1 through b4			<u>b</u>	0
		act line b from line a			C	0
d	Amou	ints included on Part I, line 12, but not	on line a:	1		
1	Invest	tment expenses not included on Part I,	line 6b	<u>d</u>	1	
2	Other	(specify):				
				d		
		nes d1 and d2				-
е	Total	revenue (Part I, line 12). Add lines c a	ind d	<u> </u>	<u></u> e	
Part IV	/-B	Reconciliation of Expenses per	Audited Financial St	atements Witl	n Expenses per Retur	<u>n</u>
а	Total	expenses and losses per audited finan	cial statements		<u>a</u>	
		ints included on line a but not on Part I				
		ted services and use of facilities		b	1	
		year adjustments reported on Part I, lin			2	
3	Losse	es reported on Part I, line 20		b	3	
		(specify):				
-	01101				4 0	
	Add li	nes b1 through b4			b	0
С	Subtr	act line b from line a			c	0
		ints included on Part I, line 17, but not				
u 1	Invoe	tment expenses not included on Part I,	line 6b	d	l1	
		(specify):				
2	Outor				12 0	
	Add B	ines d1 and d2			d	0
•	Total	expenses (Part I, line 17). Add lines of	and d		> e	0
Dart	7.0	Current Officers, Directors, Trus	tees, and Key Empl	ovees (List eac	h person who was an offi	cer, director,
Fait V	<i></i>	trustee, or key employee at any time of	turing the year even if t	nev were not cor	npensated.) (See the insi	tructions.)
		indice, of key employee at any time t	(B)	(C) Compensation		(E) Expense account
		(A) Name and address	Title and average hours per	(If not paid,	benefit plans & deferred	and other allowances
			week devoted to position	enter -0)	compensation plans	
Name	Capta	ain Bob Zales str P.O. Box 4335	Title Pres.			
City	Pana	ma City ST FL ZIP 32401	Hr/WK	0		00
Name	Capta	ain Edward O str Court 7790 Dentzel	Title VP			
		apeake Beac ST MD ZIP 20732	Hr/WK	0		0 0
		ain Tom Beck str 632 Michelle Dr.	Title 2nd VP			
	Biloxi		Hr/WK	0		0 0
		ain Gary Kreir str 720 Waverly Ave.	Title Secr.			
	Evere		Hr/WK	0		0 0
		ain Ron Magli str 1831 S W Palm City I				
	Stuar		Hr/WK	C		0 0
		ain Pat Kelly str P.O. Box 474	Title			
				C		0 0
		glades City ST FL ZIP 34149	Hr/WK		1	
·····		ain Fred Liftor sir 1021 Pettit Court	Title	c		0 0
		o Island ST FL ZIP 34145	Hr/WK		<u>' </u>	
		ain Mike Nugt str P.O. Box 321	Title			0 0
		sas Pass ST TX ZIP 78335	Hr/WK	C		
Name	Capta	ain Tim Evers str P.O. Box 39547	Title	_		0 0
	Ninilo		Hr/WK	C	1	0 0
Name	Capta	ain Janice Lyr str 2905 Parkview Drive	Title			
	Port		Hr/WK	C)]	0 0

÷

Page 5

Form 99	0 (2007) NATIONAL ASSOCIATION OF CHARTER BOAT OPERATORS (NACO) 02-0576582			Page 6
Part \			Yes	No
75 a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings			
	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	'5b		×
	the definition of related organization.	<u>′5c</u>		X
	If "Yes," attach a statement that includes the information described in the instructions.		anna Ràistean	
d	Does the organization have a written conflict of interest policy?	′5d		X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

	(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	accou	Expension Initiand of Initianal of Initianal Street	ther
Name	N/A Str						
City							
Name	N/A Str						
City							
Name	N/AStr						
City		<u> </u>					
Name	N/A Str	-					
City							
Name	N/A Str	•					
City							
Name	N/A Str	-					
City						~~~~	
	N/A <u>Str</u>	-					
City							
	N/A Str	-					
City							
	N/A Str	-					
City							
	N/A Str ST ZIP	-					
City Part		tions }	<u> </u>	J		Yes	No
	Did the organization make a change in its activ	vities or methods of co	nducting activities	If "Yes " attach a			
76	detailed statement of each change		Adducting dollvillos			0000000000	Х
	Were any changes made in the organizing or g	a complete decuments	but not reported to	the IRS?	77		X
77						423-33 ⁽¹	
	If "Yes," attach a conformed copy of the chang Did the organization have unrelated business		A or more during th	o year covered by			
78 a					78a	a de rectars	X
	this return?				78b	N/A	<u> </u>
	If "Yes," has it filed a tax return on Form 990-7	tor this year?					
79	Was there a liquidation, dissolution, terminatio				500000 79	antinaki	Need Heed X
	a statement				13	<u> (1996)</u> a a	
80 a	Is the organization related (other than by asso						
	common membership, governing bodies, trust	ees, officers, etc., to a	ny other exempt or	nonexempt	1999 1997 1997	10000000	13555353 V
	organization?				<u>80a</u>	alahan i	<u> X </u>
b	If "Yes," enter the name of the organization 🕨		· · · · · · · · · · · · · · · · · · ·				
		and check whethe	er it is 🔄 exempt	or nonexempt			
					1.11.12	1.15月18日6月	and look

81 a Enter direct and indirect political expenditures. (See line 81 instructions.)

b Did the organization file Form 1120-POL for this year?

х

81b

81a

Form 99	0 (2007) NATIONAL ASSOCIATION OF CHARTER BOAT OPERAT-02-057	76582			Page 7
Part				Yes	No
	Did the organization receive donated services or the use of materials, equipment,	or facilities at no charge			
04 d	or at substantially less than fair rental value?	· · · · · · · · · · · · · · · ·	82a		Х
ь	If "Yes," you may indicate the value of these items here. Do not include this amou				
2	as revenue in Part I or as an expense in Part II.				
		82b N/A			
83 a	Did the organization comply with the public inspection requirements for returns an	d exemption applications? .	83a	Х	
b	Did the organization comply with the disclosure requirements relating to quid pro o	quo contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a	1. 35 P. 44	X
b	If "Yes," did the organization include with every solicitation an express statement		0.41		것같아야
	or gifts were not tax deductible?		84b	N/A	X
85	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		85a 85b	X	
Ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h bel		000		
	organization received a waiver for proxy tax owed for the prior year.				
~	Dues, assessments, and similar amounts from members	85c N/A			
	Section 162(e) lobbying and political expenditures	85d N/A			
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 8	35f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to ac	ld the amount on line 85f to			
	its reasonable estimate of dues allocable to nondeductible lobbying and political e	expenditures for the		<u> Visionia</u>	
	following tax year?		85h	N/A	22.77.25
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a			
	Gross receipts, included on line 12, for public use of club facilities	86b 87a			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	0/2			
D	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b			
88 a	At any time during the year, did the organization own a 50% or greater interest in		1		
00 a	partnership, or an entity disregarded as separate from the organization under Reg	ulations sections			
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX				
b	At any time during the year, did the organization, directly or indirectly, own a contr	olled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Part XI	🕨	88b	Articles at a	Section (1975)
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during	the year under:			
	section 4911 section 4912 section 4912	n 4955 🕨			
ь	501(c)(3) and $501(c)(4)$ orgs. Did the organization engage in any section 4958 ex	cess benefit transaction			
	during the year or did it become aware of an excess benefit transaction from a pri		89b	1.492.689	2000.000 X
	a statement explaining each transaction		030		SNO.48
С	persons during the year under sections 4912, 4955, and 4958				
h	Enter: Amount of tax on line 89c, above, reimbursed by the organization				
e	All organizations. At any time during the tax year, was the organization a party to	a prohibited tax shelter			
	transaction?		89e		
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable	e insurance contract?	89f		
g	For supporting organizations and sponsoring organizations maintaining donor adv	vised funds. Did the			
	supporting organization, or a fund maintained by a sponsoring organization, have				
	at any time during the year?		89g		
90 a					* * * ·
b	Number of employees employed in the pay period that includes March 12, 2007 (
04 -	instructions.). The books are in care of ► Name NATIONAL ASSOC. OF CHARTER BOAT C		66) 98	I-513F	;
ษาส	Located at ► P.O. BOX 2990 City ORANGE BEACH ST	AL ZIP + 4 ► 36561			
h	At any time during the calendar year, did the organization have an interest in or a				
5	over a financial account in a foreign country (such as a bank account, securities a	ccount, or other financial		Yes	No
			91b		X
	If "Yes." enter the name of the foreign country				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1	, Report of Foreign Bank			
	and Financial Accounts.		18433	문제성	Tasi coor

Form 99	0 (2007) NATIONAL ASSOCI	ATION OF CHARTE	ER BOAT OP	ERATORS (NACO	02-0576582	Page 8
Part \	Other Information (continued)				· · · · · · · · · · · · · · · · · · ·	Yes No
c	At any time during the calendar year, did the or If "Yes," enter the name of the foreign country			utside of the Unite		tc X
92	Section 4947(a)(1) nonexempt charitable trus and enter the amount of tax-exempt interest n	ts filing Form 990 in	lieu of Form	1041 Check he	ere	►
Part \	Analysis of Income-Producing Ac	tivities (See the I	instructions.,)		
	Enter gross amounts unless otherwise	Unrelated busine	ess income	Excluded by sectio	n 512, 513, or 514	(E)
indical	*	(A)	(B)	(C)	(D)	Related or exempt function
93	Program service revenue:	Business code	Amount	Exclusion code	Amount	income
c						
d						
е						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies					
94	Membership dues and assessments					188,106
95	Interest on savings and temporary cash investments .					689
96	Dividends and interest from securities					
97	Net rental income or (loss) from real estate:				ય બેલું પુરા પ્રકૃત્વાનું દ્વા	
а	debt-financed property					
b	not debt-financed property					
98	Net rental income or (loss) from personal property					
99	Other investment income					
100	Gain or (loss) from sales of assets other than inventory					
101	Net income or (loss) from special events					
102	Gross profit or (loss) from sales of inventory					480
103	Other revenue: a <u>NEWSLETTER ADVERTI</u>					6,903
						500
_	MISCELLANEOUS					500
d						
e	Subtotal (add columns (B), (D), and (E))				0	196,678
104 105	Total (add columns (B), (D), and (E)) $\cdot \cdot \cdot \cdot$	Affine reaction and publication of shore			1	196,678
	Line 105 plus line 1e, Part I, should equal the	amount on line 12. I	Part I.		· · · · · ·	
Part V		ccomplishment	of Exempt	Purposes (See	the instruction	s.)
		a reported in column (E) of Part VII o	ontributed important	ly to the accompli	shment
Line N	of the organization's exempt purposes (other	r than by providing fun	ds for such pu	poses).	iy io ino dobompi	
93A						ERS ON
	GOVERNMENT REGULATIONS, SAFETY					
Part I	X Information Regarding Taxable S	ubsidiaries and I	Disregarded	I Entities (See t	he instructions	s.)
	(A)	(B)				(E)
	Name, address, and EIN of corporation,	Percentage	1 1 1 2 2 1 3	(C) ure of activities	(D) Total income	End-of-year
	partnership, or disregarded entity	ownership inte	rest			assets
			%		0	
			%		0	
			%		0	
		<u> </u>	%		Coo the ine	
Part >						
(a) Di	d the organization, during the year, receive any funds, dir	ectly or indirectly, to pay	premiums on a	personal benefit cont	ract?	
(b) D	id the organization, during the year, pay premi	ums, directly or indi	rectly, on a po	ersonal benefit co	ntract?	Yes X No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Form 9	990 (2007) NATIONAL AS	SOCIATION OF CHARTER	BOAT OPERATOR 02	2-0576582		Page 9
Part				. Complete only if the	organiza	ation
	is a controlling organizat	ion as defined in section 5	512(b)(13).		Yes	No
106	Did the reporting organization ma			n section 512(b)(13) of	163	
	the Code? If "Yes," complete the	T				X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description transfer	of Amour	(D) nt of trans	fer
<u></u>						
а						
b		-				
с						
	Totals					0
					Yes	No
107	Did the reporting organization rec 512(b)(13) of the Code? If "Yes,"		w for each controlled e			x
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description transfer	of Amou	(D) nt of trans	fer
а		-				
b		•				
с		-				
	Totals					0
		le et profériel et president de la proprie de la profesione de la profesione de la profesione de la profesione	lange fan geregen in de fij geregen geregen in de geregen en	a to transmission de la companya de	Yes	No
108	Did the organization have a bindir rents, royalties, and annuities des			overing the interest,		x
	Under penalties of perjury, I declare that I h and belief, it is true, correct, and complete.	nave examined this return, including Declaration of preparer (other than o	accompanying schedules and officer) is based on all informa	d statements, and to the best of ation of which preparer has any	my knowled knowledge.	ige
Pleas	e			1		
Sign Here	Signature of officer			Date		
	Type or print name and title					
Paid	Preparer's signature	-L-	Date Check i self- 5/15/2008 employ		•	en. Inst. X)
Prepare	Firm's name (or yours BUSENL	ENER & JOHNSON, CPA's	0/10/2000	EIN • 72-092		
Use On		HULLEN ST., SUITE 10, MI				
					Form 99	0 (2007)

Form	9	90	1	Return of O	시간에 대해 관계에 가지 않는 것					OME	No. 1545-0047		
				Under section 501(c),		of the Internal Reven or private foundation)		except bla	ack lung	One	en to Public		
		the Treasury ue Service		The organization may h		Contraction of the second s		rting requi	rements.		spection		
-		and the second se	endar ye	ear, or tax year beginnin	g		, and end	ding					
B	heck if a	pplicable:	Please use IRS	C Name of organization	NATIONAL A	SSOCIATION OF C	HARTER	R BOA D	Employer ide	ntification nu	mber		
LI.	Address	change	label or	Doing Business As				02-	0576582				
	Name ch		print or type.	Number and street (or F	P.O. box if mail is not de	elivered to street address)) Roor	m/suite E	Telephone nu	mber			
H	nitial ret		See Specific	P.O. BOX 2990			_	866	5-981-5136				
-	erminat		Instruc-	City or town, state or co	untry, and ZIP + 4								
-	Amende	d return on pending	tions.	ORANGE BEACH	and Shares	AL 30	6561		Gross receipts		192,948		
	Application	on pending	1.20 Ben 1.47 B	Name and address of prin					group return f		Yes X No		
-	0.000			IN BOB ZALES P.O. E			1		affiliates includ		Yes No		
		mpt status			rt no.) 494	7(a)(1) or 527		lf "N	o," attach a list	t. (see instructi	ons)		
JV	Vebsite	e: ► WW	W.NAC	COCHARTERS.ORG			1	H(c) Group e	exemption num	iber 🕨			
ball and the second	-	rganization:		orporation Trust X	Association	Other ►	L Year o	of formation:	1991	M State of leg	gal domicile: AL		
P	art I		nmary			A Real Property of the second s							
Activities & Governance	1	THE INT AND EC	CEREST	the organization's mis S OF CHARTER BOA RS THROUGH EDUC/	T OPERATORS \ ATIONAL PROGE	NHO CARRY PASS RAMS, THROUGH F	SENGER PRINT AN	S FOR H ND ELEC	IRE FOR F TRONIC CO	ISHING, SA OMMUNICA	AILING, DIVING		
Gov	23			if the organization of the government of the						C. I Press Construction	22		
ŝ	4			pendent voting member						3 4	23		
vitie	5									5	0		
Acti	6		tal number of employees (Part V, line 2a)								24		
	7a	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)							7	'a	0		
_	b	Net unre	elated bu	usiness taxable income	e from Form 990-	T, line 34	<u></u>		7	'b	0		
1		Contribu					-	Pri	or Year		urrent Year		
qe	8		butions and grants (Part VIII, line 1h)						100 1	0	187,865		
Revenue	10							188,106 689			0 119		
Re	11			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					7,883		4,964		
	12								196,6		192,948		
	13			lar amounts paid (Part						0	0		
	14		ts paid to or for members (Part IX, column (A), line 4)							0	0		
s	15									0	0		
Expenses	16a			draising fees (Part IX,						0	0		
Exp	17			g expenses (Part IX, co (Part IX, column (A), li				15 - 2	405.4	00	477.007		
	18			Add lines 13–17 (mus					185,4		177,687		
	19			penses. Subtract line					105,4		<u>177,687</u> 15,261		
or								Beginn	ing of Year		End of Year		
Net Assets or Fund Balances	20	Total ass	sets (Pa	rt X, line 16)			250		109,6	11	124,872		
at As nd B	21			Part X, line 26)						0	0		
	22			nd balances. Subtract	line 21 from line 2	20	Acres 1		109,6	11	124,872		
Pa	rt II		nature										
Sign		and b	r penantes elief, it is tr Signature c	of perjury, I declare that I hav rue, correct, and complete. D of officer	ve examined this return eclaration of preparer (, including accompanying other than officer) is base	d on all info	and stateme ormation of v	ents, and to the vhich preparer Date	e best of my kr has any knowl	iowledge ledge.		
			Type or priv	int name and title									
		Prepa				Date	Chec	ck if	Pri	eparer's identit	fving number		
Paid	1	signat		110 Jui			self-		(se	e instructions)	Jung Hambor		
	parer's	Eirmin	name (or	VOUL		7/31/2009	empl	loyed		0755137			
Use	Only		employed)). BUSENLEINE	ER & JOHNSON,			EIN	▶ 72	-0928605			
		addres	ss, and ZIF	P + 4 2305 N. HUL		10, METAIRIE, LA				04) 838-22	51		
May	the IR	S discuss	s this ret	turn with the preparer :	shown above? (se	ee instructions)	1 4 4			X	Yes No		

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. (HTA)

Form	990	F
		116

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)



Inspection

Department of the Treasury Internal Revenue Service

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

Α	For the	2008 cal	ndar year, or tax year begin	ning		and en	ding		
в	Check if ap	oplicable:	Please C Name of organization	n NATIONA	L ASSOCIATION OF CH	HARTE	R BO/ D Employer	identification nu	mber
	Address of	change	use IRS label or Doing Business As				02-0576582		
	Name cha	ange		(or P.Ω. box if mail is n	ot delivered to street address)	Roo	m/suite E Telephone		
\square	Initial retu	IFD .	type. See P.O. BOX 2990			1.00	1 I I I I I I I I I I I I I I I I I I I		
	Terminati		A 15	r country, and ZIP + 4			866-981-51	36	
=				-	AL 20	501	G Gross rece	late 0	400.040
	Amended				AL 36	561	G Gloss lece	ihis a	192,948
	Applicatio	on pending	F Name and address of p		,		H(a) Is this a group retur	n for affiliates?	Yes X No
			APTAIN BOB ZALES P.C	<u>). BOX 4335, PAI</u>	NAMA CITY, FL 32401		H(b) Are all affiliates inc	luded?	Yes No
1	Tax-exen	npt status	X 501(c) (6) ◀ (ir	nsert no.) 🗌 🗸	4947(a)(1) or 527		lf "No," atlach a	list. (see instruction	ons)
J	Website:	: 🕨 WW	V.NACOCHARTERS.ORG	3			H(c) Group exemption n	umber 🕨	
		ganization:	Corporation Trust	X Association	Other ►				
						L Teal of	of formation: 1991	M State of leg	al domicile: AL
Ì	Part I		mary						
			scribe the organization's r						
		THE INI	RESTS OF CHARTER B	OAT OPERATOR	<u>IS WHO CARRY PASSI</u>	ENGER	S FOR HIRE FOR	FISHING, SA	ALING, DIVING
JCe		AND EC	-TOURS THROUGH EDI	JCATIONAL PRC	GRAMS, THROUGH PI	RINT A	ND ELECTRONIC	COMMUNIC/	ATIONS.
rnai			· · · · · · · · · · · · · · · · · · ·						
Activities & Governance	2	Check th	s box 🕨 🔄 if the organi	ization discontinu	ed its operations or disp	bosed o	f more than 25% o	f its assets.	
ğ	3	Number	f voting members of the g	overning body (P	art VI, line 1a)			3	23
es o	4		f independent voting men					4	23
viti	5		ber of employees (Part V					5	0
A cti	6	Total nu	ber of volunteers (estimat	te if necessary) .				6	24
		Total gro	s unrelated business reve	enue from Part VI	II, line 12, column (C).			7a	0
			ated business taxable inco					7b	0
							Prior Year		urrent Year
	8	Contribu	ons and grants (Part VIII,	line 1h)		Г		0	187,865
an	9		service revenue (Part VIII,				188	,106	0
Revenue	10		nt income (Part VIII, colum					689	119
å	11		enue (Part VIII, column (A				7	,883	4,964
			nue-add lines 8 through					,678	192,948
			d similar amounts paid (P					0	0
			aid to or for members (Pa		. ,			0	
			other compensation, empl		•			0	0
ses	16a		nal fundraising fees (Part					0	
Expenses	b		raising expenses (Part IX.						0
Ä	17		enses (Part IX, column (A			<u>0</u>	105	,489	477.007
			enses. Add lines 13-17 (m						177,687
			ess expenses. Subtract li			· -		,489	177,687
- 2	2 13	Revenue	ess expenses. Subtract in	he to nont line 12	<u> </u>	····		,189	15,261
Net Assets or	20	Total ass	ets (Part X, line 16) .			F	Beginning of Year		nd of Year
Asse Bat	21		lities (Part X, line 26)			·	109	,611	124,872
det /	22		s or fund balances. Subtra			· ·	400	0	0
	art II		ature Block			<u>l.</u>	109	,611	124,872
LC			enalties of perjury, I declare that I	have examined this re			and statements, and is	the best of multi-	
		and b	ef, it is true, correct, and complete	 Declaration of prepa 	rer (other than officer) is based	on all info	ormation of which prepar	rer has any knowl	owieuge edge.
					· · ·		1 1	·····, ····,	
<u>.</u>									
Sig			gnature of officer				Date	·	
He	re		-						
			pe or print name and title						
		Prepa	<u> </u>		Date	Che	ck if	Preparer's identif	ving number
Pai	d	signat	e Ami Bu	ell-		self-	·	(see instructions)	
	parer's	-			7/31/2009	emp	oloyed	P00755137	
	e Only	rams	ame (or 46 urs BUSENLE	ENER & JOHNSC	DN, CPAS		EIN ►	72-0928605	
1	- ··· ,		spioyed),		TE 10, METAIRIE, LA 7	0001-1		(504) 838-225	51
Mai	v the IR!		this return with the prepar						<u> </u>
	,		and retain with the prepar	CI SHOWIT ADOVE !		• • •	· · · · · · · ·	· · · L	Yes No

Form 990 (200) Part III	⁽⁸⁾ NATIONAL ASSOCIATION OF CHARTER BOAT OPERATORS (NACO) Statement of Program Service Accomplishments (see instructions)	02-0576582	Page
	describe the organization's mission:		
NACO PASSI	'S MISSION IS TO REPRESENT AND TO ADVANCE THE INTERESTS OF CHARTER BO ENGERS FOR HIRE FOR FISHING, SAILING, DIVING AND ECO-TOURS THROUGH EDU UGH PRINT AND ELECTRONIC COMMUNICATIONS.		
	e organization undertake any significant program services during the year which were not li		
If "Yes	ior Form 990 or 990-EZ?		X No
service	e organization cease conducting, or make significant changes in how it conducts, any progr es?	_	X No
4 Descri Sectio	s," describe these changes on Schedule O. ibe the exempt purpose achievements for each of the organization's three largest program s on 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report tions to others, the total expenses, and revenue, if any, for each program service reported.		d
	:) (Expenses \$9,675_including grants of \$0_) (Re DUCE NEWSLETTER TO INFORM MEMBERS OF CURRENT ISSUES AFFECTING THEIR		<u>0</u>) 3.
		· · · · · · · · · · · · · · · · · · ·	
HOLD	:) (Expenses \$ 6,875 including grants of \$ 0) (Re ANNUAL MEETING OF MEMBERS TO ADVISE ON PAST ACHIEVEMENTS, TO DECIDE PECTIVE ISSUES, AND TO APPROVE SUBSEQUENT YEAR'S EXPENDITURES.	evenue \$ POSITIONS ON CURRE	_0) ENT AN
) (Expenses \$ 2,402 including grants of \$ 0) (Re IUNICATIONS (PHONE, WEBSITE, POSTAGE) WITH MEMBERS, LEGISLATORS, INDUS O PROPOSE INITIATIVES ON LEGISLATION AND REGULATIONS THAT AFFECT CHAR	TRY LEADERS TO INFO	

	······································		
4d Otherp (Expen	orogram services. (Describe in Schedule O.) nses \$ -18,952 including grants of \$ 0) (Revenue \$	0)	

-

Pa	rt IV Checklist of Required Schedules			ugo o
			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,	—		<u> </u>
	Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice		<u> </u>	
-	and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	[
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to	5		<u> </u>
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I.	~		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		<u> </u>
,	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			.,
8		7		X
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
^	complete Schedule D, Part III	8		<u> X </u>
9	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,"			
	complete Schedule D, Part IV	9		X.
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11		X
12	Did the organization receive an audited financial statement for the year for which it is completing this return	{		
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete	~~		
	Schedule J.	23		v
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		<u> </u>
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b–24d and complete Schedule K. If "No," go to question 25			~
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		<u> X </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
C				
لہ	to defease any tax-exempt bonds?	24c		
0 25-	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
zəa	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a diagualified percenducing the veget? (f "Veg " excepted a Set of the transaction of the set of			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
a	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified		l	
~~	person from a prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Х

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			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		<u> X </u>
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .	28b		x
C				
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u> </u>
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	<u>VI</u>	37	000	X

	990 (2008) NATIONAL ASSOCIATION OF CHARTER BOAT OPERATORS (NACO)	02-0576582	Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		······
		THE MEMORY AND	Yes No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
b	U.S. Information Returns. Enter -0- if not applicable		19492 (M.S. 1
c c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		
C	gaming (gambling) winnings to prize winners?	1c	x
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	· · · · · · · · · · · · · · · · · · ·	
20	Statements, filed for the calendar year ending with or within the year covered by this return . 2a	0	
b	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 <i>e-file</i> this return. (see		
	instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by		
	this return?	. 3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	. 3b	
4a	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		
	account)?,	. 4a	<u> </u>
b	If "Yes," enter the name of the foreign country: ►		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	1999 A.	90.40 Sec.2
5.	and Financial Accounts.		
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X X
c c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	<u>5</u> b	
Ŭ	Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		
	gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than		
	\$75?	. 7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		
	required to file Form 8282?	· · 7c	Victoria nechenal
d	If "Yes," indicate the number of Forms 8282 filed during the year		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	2020 M	HER DIG
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as		
	required?	7h	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section		
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring		
	organization, have excess business holdings at any time during the year?	- 8	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
а	Did the organization make any taxable distributions under section 4966?		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	. <u>9b</u>	
10	Section 501(c)(7) organizations. Enter:		03.0 20.80
a ⊾	Initiation fees and capital contributions included on Part VIII, line 12.		
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		S. 40 S. 40 S. 4
⊧i a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources		
~	against amounts due or received from them.).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 12a	anna anns an tha an th
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

Form	990	(2008)
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Form 9	90 (2008)	0 (2008) NATIONAL ASSOCIATION OF CHARTER BOAT OPERATORS (NACO) 02-057							
Par	t VI	Governance, Management, and Disclosure (Sections A, B, and C request in required by the Internal Revenue Code.)	formation about	oolicies		Page 6			
Sect	ion A.	Soverning Body and Management			·····				
					Yes	No			
		h "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, stances, processes, or changes in Schedule O. See instructions.	describe the						
1a	Enter t	ne number of voting members of the governing body	1a	23					
b	Enter t	ne number of voting members that are independent	1b	23					
2	Did any	officer, director, trustee, or key employee have a family relationship or a business relationship or a business	ationship with						
	any oth	er officer, director, trustee, or key employee?		2		X			
3	B Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?								
4		organization make any significant changes to its organizational documents since the prior Form 9				X			
5		organization become aware during the year of a material diversion of the organization			 	X			
6		e organization have members or stockholders?		6		X			
7a		e organization have members, stockholders, or other persons who may elect one or n				<u> </u>			
		overning body?		. 7a	X				
b	-	decisions of the governing body subject to approval by members, stockholders, or otl	her persons?.	******************	X	<u> </u>			
8		organization contemporaneously document the meetings held or written actions unde			4.4533.655				
2	the yea	r by the following:		80	↓ ↓				
a b	-	ommittee with authority to act on behalf of the governing body?		8a 8b	X X	<u> </u>			
9a		e organization have local chapters, branches, or affiliates?				x			
b		does the organization have written policies and procedures governing the activities o		. <u>Ja</u>		<u> </u>			
D.	affiliate	s, and branches to ensure their operations are consistent with those of the organizatio	n?			x			
10		copy of the Form 990 provided to the organization's governing body before it was filed							
		escribe in Schedule O the process, if any, the organization uses to review the Form 99		10	X				
11		any officer, director or trustee, or key employee listed in Part VII, Section A, who canr anization's mailing address? If "Yes," provide the names and addresses in Schedule C		. 11		x			
Secti		Policies							
			· · · · · · · · · · · · · · · · · · ·		Yes	No			
12a	Does th	e organization have a written conflict of interest policy? If "No," go to line 13.		. 12a		X			
b	Are offi	cers, directors or trustees, and key employees required to disclose annually interests t							
		conflicts?	· · · · · · · ·	12b					
С		e organization regularly and consistently monitor and enforce compliance with the pol e in Schedule O how this is done	• /	. 12c					
13	Does th	e organization have a written whistleblower policy?		. 13		Х			
14	Does th	e organization have a written document retention and destruction policy?		. 14		X			
15	Did the	process for determining compensation of the following persons include a review and a	approval by						
	indepe	ident persons, comparability data, and contemporaneous substantiation of the delibera	ation and decision						
а	The org	anization's CEO, Executive Director, or top management official?		15a		Х			
b		fficers or key employees of the organization?		15b		Х			
		e the process in Schedule O. (see instructions).							
		organization invest in, contribute assets to, or participate in a joint venture or similar a							
		axable entity during the year?		16a	23542856	X			
		has the organization adopted a written policy or procedure requiring the organization							
		cipation in joint venture arrangements under applicable federal tax law, and taken step			XXXXXXXX				
		anization's exempt status with respect to such arrangements?		. 16b		X			
		Disclosure							
		states with which a copy of this Form 990 is required to be filed NONE							
		6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an	id aan-1 (pn1(c)(3)	is oniy)					
1		e for public inspection. Indicate how you make these available. Check all that apply.							
40		n website Another's website X Upon request		1 1					
		e in Schedule O whether (and if so, how), the organization makes its governing docum	nents, conflict of in	ierest					
		and financial statements available to the public.		f 16 -					
		e name, physical address, and telephone number of the person who possesses the bo							
	organiz	ation: NATIONAL ASSOC. OF CHARTER BOAT OPERATORS P.O. BOX 2990, ORANGE BEACH, AL 36561		-0130					
		1.0.00A 2330, VIANGE DEAVIL, AL 30301							

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 Form 990 (2008)
 NATIONAL ASSOCIATION OF CHARTER BOAT OPERATORS (NACO)
 02-0576582
 Page 7

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week	Positia Individual trustee or director	o Institutional trustee	theo Officer		ap Highest compensated employee	ply) Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Captain Pat Kelly	0.	x						0	0	0
Captain Fred Lifton	0.	х						0	0	0
Captain Mike Nugent	0.	X						0	0	0
Captain Tim Evers	0.	X						0	0	0
Captain Janice Lyn Deaton	0.	x						0	0	0
Captain Paul Malo	0.	x						0	0	
Captain Robert A. Ward	0.	x						0	0	0
Captain Alex Williams	0.	x						0	0	0
Captain Glenn A. James	<u>0.</u>	x						0	0	0
Captain Jim Deibler, Jr.	0.	x						0	0	0
Captain John Atwell	0.									0
Captain Sean Black		<u> </u>						0	0	0
Captain Bryan Bondioli	0.	X						0	0	0
Captain Dave Pecci	0.	X						0	0	0
Captain Scott Robson	0.	<u>X</u>						0	0	0
Captain Robert Rush, Jr.	0.	<u> </u>						0	0	0
Captain Randall Schmidt	0.	X X						0	0	0

_	Form 990 (2008) NATIONAL ASSOCIATION OF CHARTER BOAT OPERATORS (NACO) 02-0576582 Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
										(E)	(F)
	Name and title	Average	Po	Position (check all that apply)				ply)	Reportable	Reportable	Estimated
		hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	estimated amount of other compensation from the organization and related organizations
	tain Michael Sosik, Jr.	0.	X						0	0	0
	bi Walker 5. Director	0.	x						0	0	0
Cap Pres	tain Bob Zales II	0.			x				0	0	0
Cap VP	tain Edward O'Brien	0.			x				0	0	0
	lain Tom Becker VP	0.			x				0		0
	ain Gary Krein	0.			x				0	0	0
	ain Ron Maglio	0.			x				0	0	
Wal	ker Breeze, LLC agement Company	0.					x		115,500	0	0
+		0.							0	0	0
		0.							0	0	0
		0.							0	0	0
		0.							0	0	0
		<u>^</u>									_
1b		0.					II		0 115,500	0	<u> </u>
2	Total number of individuals (including those organization ► 0	in 1a) who rece	ived	mor	e tha	in \$1	 100,0	00 ir			
3	Did the organization list any former officer, of employee on line 1a? If "Yes," complete Sch							•	st compensated	3	Yes No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such										
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for										
Sec	tion B. Independent Contractors	o, complete o	, , , , , , , , , , , , , , , , , , ,		107	5401	pore			5	X
1	Complete this table for your five highest com compensation from the organization.	pensated indep	end	ent c	contra	acto	rs tha	at rec	eived more tha	n \$100,000 of	
	(A) Name and business ac	ldress							(B) Description of serv	rices C	(C) ompensation
											0
									·····		0
											<u> </u>
·										Zita an britania	0
2	Total number of independent contractors (inc compensation from the organization ►	cluding those in 0	1) w	no r	eceiv	/ed r	nore	than	\$100,000 in		

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Form 990 (2008) NATIONAL ASSOCIATION OF CHARTER BOAT OPERATORS (NACO)							02-0576582 Page 9	
Pa	rt VIII	Statement of Revenue				1		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a			0		0.0000.000	0.000	
gra	b	Membership dues		187,865				
an an	С	Fundraising events		0				
gif lar	d	Related organizations .		<u> </u>		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		4.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.
пs,	e	Government grants (contributions)		0				100000000000000000000000000000000000000
ers	f	All other contributions, gifts, grants	, and					
đ đ		similar amounts not included above		0				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in I		0		0.00		10 (2010) (2010) (1
<u> </u>	h	Total. Add lines 1a-1f	· · · · · · ·	<u></u> ►	187,865	5		
e				Business Code				
Program Service Revenue	2a				C)		
Re	b				C			
/ice	с				C)		
Sen	d				C)		······
Ĕ	е)		
3 0 0	f	All other program service revenue .			0			
ů.	g	Total. Add lines 2a-2f			0			
	3	Investment income (including divide other similar amounts)	ends, interest, a	and 	119			119
	5				0	<u> </u>		
	5	Royalties			0			
	6	Cross Banta	(i) Real	(ii) Personal	-			
	6a	Gross Rents						
	b	Less: rental expenses						
	С	Rental income or (loss)		0 0				
	d _d	Net rental income or (loss)			0			
	7a	Gross amount from sales of	(i) Securities	(ii) Other		2008-01-01-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-		
		assets other than inventory .	·····	0 0	ALCONTRACTOR	100 100 100 100 100 100 100 100 100 100		
	b	Less: cost or other basis			2010 23 20 Serves			
		and sales expenses		00				
		Gain or (loss)		<u>o 0</u>		1. A. 19	10.00 million (1990)	
	d	Net gain or (loss)		. <u> </u>	0			
e	8a	Gross income from fundraising						
Other Revenue		events (not including \$ of contributions reported on line 1c)	•					
يد ب	F	See Part IV, line 18				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		ana ana ang si si
the		Less: direct expenses						
Ò		Net income or (loss) from fundraisin		· · · · •	0			
	9a	Gross income from gaming activities				Sector and		
		See Part IV, line 19				 (a) (b) (b) (b) (b) (b) 		
		Less: direct expenses						
		Net income or (loss) from gaming ad	ctivities	. <u></u>	0			
		Gross sales of inventory, less						
		returns and allowances						소설 소중이 있는
		Less: cost of goods sold						
	¢	Net income or (loss) from sales of in	iventory	<u>,</u>	0			
ĺ		Miscellaneous Revenue		Business Code				
		NEWSLETTER ADVERTISING			10			10
	b	CARD PROCESSING SERVICE			3,664			3,664
		WEBSITE ADVERTISING			1,290			1,290
	d	All other revenue .			0			
		Total. Add lines 11a-11d			4,964			
		Total Revenue. Add lines 1h, 2g, 3,			.,			ter men and an and a start of the
		9c, 10c, and 11e			192,948	o	0	5.083

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Statement of Functional Expenses

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

1 2 3	8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				Fundraising
2			expenses	general expenses	expenses
		0			
	Grants and other assistance to individuals in				
3	the U.S. See Part IV, line 22	0			
	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions) .	0			
9	Other employee benefits	0		·	
10	Payroll taxes	0			
11	Fees for services (non-employees):				
а		115,500		115,500	
b	Legal	0			
С	Accounting	690		690	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	0			
13	Office expenses	24,248	2,405	21,843	
14	Information technology	309		309	
15	Royalties	0			
16	Occupancy	0			
17	Travel	2,585		2,585	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	6,876		6,876	
20		0			
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23		1,857		1,857	
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
a	Telephone	2,988		2,988	
b	Postage & shipping	6,315		6,315	
C	Printing & publications	11,004		11,004	
d	Bank charges	3,526		3,526	······
e	Nova expenses	1,364		1,364	
ог Г	All other expenses Miscellaneous	425		425	
25	Total functional expenses. Add lines 1 through 24f	177,687	2,405	175,282	0
26	Joint Costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation .				

ees, or other related parties. Complete	Part II of Schedule L	() 5	0
ables from other disqualified persons (as defined under section			
(1)) and persons described in section				
of Schedule L		(6	0
and loans receivable, net		0	4	0
ries for sale or use			8	<u>_</u>
expenses and deferred charges.			9	1
uildings, and equipment: cost basis	10a 0)		
ccumulated depreciation. Complete		•		
of Schedule D	105		10c	0
nents-publicly traded securities		0		0
ents-other securities. See Part IV, line		0		0
ents-program-related. See Part IV, lin		0		0
ole assets			14	
ssets. See Part IV, line 11	<i></i>	0		0
ssets. Add lines 1 through 15 (must ed	gual line 34)	109,611		124,872
ts payable and accrued expenses			17	, , , , , , , , , , , , , , , , , , ,
payable			18	
drevenue			19	
mpt bond liabilities		0	20	0
account liability. Complete Part IV of S			21	
es to current and former officers, direct				
ees, highest compensated employees,				
. Complete Part II of Schedule L .		0	22	0
f mortgages and notes payable to unre		0		0
red notes and loans payable	• • • • • • • • •	0		0
abilities. Complete Part X of Schedule	D <i></i>	0	·····	<u> </u>
abilities. Add lines 17 through 25		0		0
ations that follow SFAS 117, check				<u> </u>
te lines 27 through 29, and lines 33	and 34			
cted net assets				
arily restricted net assets			27	
ently restricted net assets			28	· · · · · · · · · · · · · · · · · · ·
			29	
ations that do not follow SFAS 117,	check here► X			
nplete lines 30 through 34.				
stock or trust principal, or current funds		109,611	30	124,872
or capital surplus, or land, building, or			31	
d earnings, endowment, accumulated i	income, or other funds .		32	
t assets or fund balances		109,611	33	124,872
pilities and net assets/fund balances .	<u></u>	109,611	34	124,872

2 3 4 5 Receivables from current and former officers, directors, trustees, key employ

Cash-non-interest-bearing

6 Receiva 4958(f) Part II c

7 Notes a 8 Invento 9 Prepaid 10a Land, b b Less: a Part VI 11 Investm 12 Investm 13 Investm

Intangib 14 15 Other a 16 Total as 17 Account 18 Grants 19 Deferre 20 Tax-exe 21 Escrow 22 Payable employe

	persons. Complete Part II of Schedule L.
23	Secured mortgages and notes payable to unrelated third parties
24	Unsecured notes and loans payable
25	Other liabilities. Complete Part X of Schedule D.
26	Total liabilities. Add lines 17 through 25
	Organizations that follow SFAS 117, check here ► and complete lines 27 through 29, and lines 33 and 34.

27 Unrestri 28 Tempor 29 Perman Organiz

and con 30 Capital s 31 Paid-in c

- Net Assets or Fund Balances Retained 32
- 33 Total ne 34 Total lial

Financial Statements and Reporting Part XI

			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
С	If "Yes" to lines 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		
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		Х
b	If "Yes," did the organization undergo the required audit or audits?	3b		
		Fo	rm 990	(2008)

NATIONAL ASSOCIATION OF CHARTER BOAT OPERATORS (NACO) **Balance Sheet**

02-0576582 Page 11

(B)

End of year

71,945

52,927

0

0

(A)

Beginning of year

56,803

52,808

0 3

0 4

1

2

Form 990 (2008) Part X

1

Assets

Liabilities

Form	990			2010/01/01/07/07			омв No. 1545-0047 20 09
		Under section 501(c), 527	, or 4947(a)(1) of the Inter benefit trust or private f	nal Revenue C	ode (except bla		
		The organization may have			ate reporting reg		Open to Public Inspection
-				, 2009, and er			20 09
-		NAME AND ADDRESS OF TAXABLE PARTY.	the second se				identification number
_		use IRS Doing Business As				0	0576582
		print or Number and street (or P.O. t	box if mail is not delivered to street a	address) Roor	n/suite	E Telephon	e number
		See P.O. Box 2990	 Ofference and the second se Second second sec			(251)	981-5136
Пт	erminated	Instruc- City or town, state or co					
	mended return	orange Beachine e	the second se		1	G Gross rece	pts \$
Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satistic trust or private foundation The organization may have to use a copy of this return to satistic trust of the analysis of the ana		H(a) Is the	nis a group return fo	r affiliates? Yes N			
_				1			luded? Yes N
-			4947(a)(1) or 527				st. (see instructions)
				1		exemption numb	
-	and the second se		in □ Other ►	L Year of for	mation: 1991	M State of le	egal domicile: AL
Pa				N	CO's missio		cont and to
Governance	educatio 2 Check this	hal programs through prin box ► □ if the organization disco	t and electronic community of the second sec	inications used of more than	25% of its net as	sets.	
Š		이번 것은 것 같은 말 물건이 있는 것이 같은 것 같				and the second sec	23
itie			- 1	and the second second second		. 5	0
ctiv			그런 것같은 도망을 걸 때에서 그는 것이다.				24
4							0
							0
					Prior '		Current Year
	8 Contribut	ions and grants (Part VIII, lin	e 1h)				175,767
nue					and a second sec		-1-4
eve		아는 지지에게 잘 못 하는 것을 수가 없다. 것은 것 같아요. 것이야지?				119	68
۳	11 Other rev	enue (Part VIII, column (A), I	ines 5, 6d, 8c, 9c, 10c,	and 11e) .		4964	2,121
	12 Total reve	nue-add lines 8 through 11 (must equal Part VIII, colur	nn (A), line 12)		192,948	177,956
	13 Grants an	d similar amounts paid (Par	t IX, column (A), lines 1-	-3)		0	0
s			the second se			0	0
use						0	0
xpe						0	C
ш						177,687	173,165
						177,687	173,165
				(A), line 25).	•	15,261	4,791
or					Beginning of		End of Year
sets	20 Total ass	ets (Part X, line 16)				123,661	125,052
d Ba							
Fun	22 Net asset	s or fund balances. Subtrac	t line 21 from line 20.			123,661	125,052
Pa	rt II Signa						
	n e Signa	, it is true, correct, and complete, D Ture of officer The Tale 5, 11	e examined this return, including eclaration of preparer (other the	g accompanying s an officer) is base	d on all informatio	n of which prep	the best of my knowledge arer has any knowledge 5 - 201 D
	🖡 Туре	or print name and title		1	l Ohard II	La	
	signature			Date	Check if self- employed ►	Preparer's ide (see instructio	ntifying number ns)
	I Firm S har				EIN	•	
use					Phone	no. ► (
May			arer shown above? (see	instructions)			Yes No
For	Privacy Act and	Paperwork Reduction Act No	otice, see the separate in	structions.	Cat. No.	11282Y	Form 990 (2009

Form	990 (2009) Page 2
Pa	rt III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: NACOs mission is to represent and to advance the interests of charter boat operators who carry passengers for hire for fishing, sailing, diving, and eco-tours through educational programs through print and electronic communications
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 11,565 including grants of \$ 0.) (Revenue \$ 0.) Produce newsletter to inform members of current issues affecting their business interests
Par 1 2 3 4 4a 4b 4b	
4b	(Code:) (Expenses \$ 19,224 including grants of \$ 0) (Revenue \$ 0) Hold annual meeting of members to advise on past achievements to decide positions on current and prospective issues, and to approve subsequent years expenditures
4c	(Code:) (Expenses \$ 10,959 including grants of \$ 0) (Revenue \$ 0) Communications (Phone, website and postage) with members, legislators, industry leaders to inform on and to propose initiatives on legislation and regulations that affect charter boat operators
	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ►

Form	990 (2009)		Р	age 3
Par	t IV Checklist of Required Schedules			
	1		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	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? <i>If "Yes," complete Schedule D, Part IV</i>	9		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11		1
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
٠	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
٠	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
٠	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	963355 1992-25	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional. 12A 12A			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		\checkmark
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		¥
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	10		1
20	If "Yes," complete Schedule G, Part III.	19 20		$\overline{\checkmark}$

	990 (2009)		Р	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	Yes	No ✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		√
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a		✓ ✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		√
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		 ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a 28b		✓
с	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		✓ ✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.			• •

Form	990 (2009)		P	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			tite terret
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			5. - 55
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		✓
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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 account)?	4a		1
h	If "Yes," enter the name of the foreign country: ►			
D	See the instructions for exceptions and 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?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	<u>6a</u>		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1- 1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	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?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> 27 65</u>	252	
а	Did the organization make any taxable distributions under section 4966?	<u>9a</u>		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	and the second	
10	Section 501(c)(7) organizations. Enter:			
a				
b				
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a h				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12a	<u>VENS</u>	

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Page 6

Part VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and
	for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Section /	A Governing Body and Management

000	ation A. doverning body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1.1		
	any other officer, director, trustee, or key employee?	2		<u> </u>
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		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6		\checkmark
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	\checkmark	
b		7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		1977)	
а	The governing body?	8a	\checkmark	
b	Each committee with authority to act on behalf of the governing body?	8b	\checkmark	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		✓
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte	ernal		

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

		,	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		1
þ	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		1
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			1124
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		\checkmark
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		 ✓
14	Does the organization have a written document retention and destruction policy?	14		✓
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a		
a				
	Other officers or key employees of the organization	15b		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	19695	이동안한	343 C
	with a taxable entity during the year?	<u>16a</u>		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website I Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► National Association of Charterboat Operators (251) 981-5136
 P. O. Box 2990, Orange Beach, AL 36561

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title		Posit	ion (r		C)	that ap	(vlo	(D) Reportable	(E) Reportable	(F) Estimated
	Average hours per week	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	composition composition from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Captain Pat Kelly	0	1								
Captain Fred Lifton	0	1								
Captain Mike Nugent	0	1								
Captain Tim Evers	0	1								
Captain Paul Malo	0	1								
Captain Robert Ward	0	1								
Captain Alex Williams	0	1								
Captain Glenn James	0	1								
Captain Jim Deibler, Jr.	0	1								
Captain John Atwell	0	1								
Captain Sean Black	0	1								
Captain Bryan Bondioli	0	1								
Captain Dave Pecci	0	1						-		
Captain Scott Robson	0	1								
Captain Robert Rush	0	1								
Captain Randall Schmidt	0	1								

Page 7

Part VII Section A. Officers, Directors, Tru (A)	(B)	y Link	noy	((unig	liest	(D)	(E)		(F)
Name and title	Average	Posit	ion (c			that ap	(vla	Reportable	Reportable	E	stimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC	com) f org	mount of other opensation rom the ganization d related anizations
Captain Michael Sosik, Jr	0	1				<u>a</u>					
Bobbi Walker Executive Director	0	1									
Captain Bob Zales, II	0										
President	U	1	-								
Captain Ed O'Brien VP	0	1									
Captain Tom Becker	0	-			1000					-	
2nd VP Captain Gary Krein	0	1		-							
Secretary	v	1								_	
Captain Ron Maglio Tres	0	,									
Captain Mike Holmes		-								-	
	0	1									
Walker Breeze LLC	40							105,875			
Management Company			-	_		1					
	-							1.1			
				-	-						
				-							
41. 19-4-1		1				-				-	
 Total		to the	ose	liste	ed a	above) wh	o received mo	ore than \$100,	000 in	
					-					_	Yes N
3 Did the organization list any former office employee on line 1a? If "Yes," complete S	er, director chedule J	or tru for su	uste ich i	e, k indi	ey /idu	emple al		, or highest c		3	
4 For any individual listed on line 1a, is the s the organization and related organizations											
to all data at										4	
services rendered to the organization? If "	Yes," com	olete 3	Sch	edu	le J	for s	uch	person		5	
Section B. Independent Contractors 1 Complete this table for your five highest c	ompensate	d ind	epe	nde	nt c	ontra	ictor	s that received	d more than \$	100,000) of
compensation from the organization.		_			-		<u> </u>				10-11
(A) Name and business add	dress						1	(B) Description of s	ervices	(C Compe	
		_			_	_	-				
			-			-	-				
2 Total number of independent contractors (i	ncluding h	ut not	limi	tod	tot	haca	lieto	d abour who	rappined		

art VI	Statement of Revenue		(A)	(B)	(C)	(D)
		110.3	Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from ta under sections 512, 513, or 514
and other similar amounts	a Federated campaigns 1a	0			1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	
	Membership dues	175,767	1		12000	
an	Fundraising events 1c	0			to be the	
o lilar	d Related organizations 1d	0	101100 10100		A Company of the second	102 539-
e sin	e Government grants (contributions).	0			1.1.1.1.1.1.1	Section 1
ja f	All other contributions, gifts, grants,		24		C. C. S. S. S.	3 N. 1784
đ	and similar amounts not included above	0	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		1.11	
and	g Noncash contributions included in lines 1a-1f: \$ n Total. Add lines 1a-1f		175,767			
		Business Code	175,707			
2a b c c e f	a					
e						
b f	f All other program service revenue .	0	0			
g	g Total. Add lines 2a-2f	🕨	0	a plant	10.12.200	
3	Investment income (including dividends,	interest, and				
	other similar amounts)	►	68			
4	Income from investment of tax-exempt bond		0			
5	Royalties	· · · ►	0			
	(i) Real	(ii) Personal				
	a Gross Rents				1	
	Less: rental expenses		1. 1. S. S. S. S.		and Particle	
	Rental income or (loss)		0		and the second sec	R Marine Marine
	(i) Convertion	(ii) Other	•		100000	
/a	Gross amount from sales of assets other than inventory		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		1.20-21-2	C. C. Marchelle
	Less: cost or other basis					
	and sales expenses .					AKARA
6	Gain or (loss)		Charter Bar		and the summer	
d	Net gain or (loss)	🕨	0			
	a Gross income from fundraising					A PASSAS
	events (not including \$				and a state of	1
	of contributions reported on line 1c).		a to Sala			A State of the second
	See Part IV, line 18 a					R. S. Starting
	Less: direct expenses b					
	Net income or (loss) from fundraising eve	ents 🕨	0			
9a	Gross income from gaming activities.		CARDON NO.		L'Solar P	DAL HEREY
	See Part IV, line 19		2 Unit Marsh		14-34 - 34	
	 Less: direct expenses b Net income or (loss) from gaming activiti 	es 🕨	0	and the first second		
	그는 승규는 가슴을 많은 것이 같이 다 한 것이라. 그 것이 한 것 같아.	F	U			
TUa	Gross sales of inventory, less returns and allowances a				For the st	
h	b Less: cost of goods sold b		154.000 20			- 2 x x x x x x x x x x x x x x x x x x
	Net income or (loss) from sales of inventor	y ►	0			
		Business Code			Negative All	A CHARGE AND
11a	Website Advertising	1850				
b	Oand Descention Oceanity	271				
c	,					
d		2,121				
12	• Total. Add lines 11a–11d	►	2,121	ATTA TRACES		
12	Total revenue. See instructions.	►	177,956			

Do	All other organizations must complete colu not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b	, 8b, 9b, and 10b of Part VIII.	10101 07001303	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees):				
	Management	0			
		105,875		105,875	
	Accounting	890		890	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	18,933		18,933	
14	Information technology	287		287	
15	Royalties	0			
16	Occupancy	0			
17	Travel	64		64	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	19,160		19,160	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization .	0		1	
23	Insurance	1,857		1,857	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a	Telephone	2,618		2,618	
b	Postage and Shipping	7,872		7,872	
c	Printing and Publications	13,609		13,609	
d	NOVA Expenses	1,143		1,143	
e	Miscellaneous	857			
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	173,165		173,165	
26	Joint costs. Check here ► ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	70,734	1	72,078
2	Savings and temporary cash investments	52,927	2	52,973
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	·	4	
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .		6	
2 7	Notes and loans receivable, net		7	
Assets as a c	Inventories for sale or use		8	
¥ 9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or 10a			
b	Less: accumulated depreciation 10b		10c	
11	Investments-publicly traded securities		11	
12	Investments-other securities. See Part IV, line 11		12	
13	Investments-program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	123,661	16	125,05
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22 22 22 22 22 22 22 22 22 22 22 22 2	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
00			23	1 - 1
23	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities. Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25		26	
ß	Organizations that follow SFAS 117, check here ► □ and complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
27 28 29 30 31 32 33	Organizations that do not follow SFAS 117, check here \blacktriangleright and complete lines 30 through 34.		-	
30	Capital stock or trust principal, or current funds	123,661	30	125,052
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	123,661	33	125,052
34	Total liabilities and net assets/fund balances	123,661	34	125,052

Financial Statements and Reporting		Yes	No
counting method used to prepare the Form 990: 🗹 Cash 🗌 Accrual 🗋 Other			
ne organization changed its method of accounting from a prior year or checked "Othe nedule O.	er," explain in		
re the organization's financial statements compiled or reviewed by an independent ac	ccountant? 2a		1
re the organization's financial statements audited by an independent accountant?			1
es" to line 2a or 2b, does the organization have a committee that assumes responsibility	for oversight of		
audit, review, or compilation of its financial statements and selection of an independent a	ccountant? , , 2c		
ne organization changed either its oversight process or selection process during the t redule O.	ax year, explain in		
/es" to line 2a or 2b, check a box below to indicate whether the financial statements for t led on a consolidated basis, separate basis, or both:	he year were		
Separate basis 🔲 Consolidated basis 🔲 Both consolidated and separate basis		1.1.1	
a result of a federal award, was the organization required to undergo an audit or aud Single Audit Act and OMB Circular A-133?	its as set forth in		1
(es," did the organization undergo the required audit or audits? If the organization di			
uired audit or audits, explain why in Schedule O and describe any steps taken to und			