

Return of Organization Exempt From Income Tax

2001

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2001 calendar year, or tax year beginning 2001, and ending 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization: **WORLD T.E.A.M. SPORTS, INC.**
 Number and street (or P.O. box if mail is not delivered to street address): **2108 SOUTH BLVD.**
 City or town, state or country, and ZIP + 4: **CHARLOTTE, NC 28203**

D Employer identification number: **56-1827893**

E Telephone number: **704-370-6070**

F Accounting method: Cash Accrual
 Other (specify) ▶

G Web site: ▶ **www.worldteamsports.org**

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

K Check here ▶ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

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

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? Yes No
 (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4-digit GEN ▶
M Check ▶ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16.)

		(A) Securities	(B) Other		
Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a	665,689		
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ <u>665,689</u> noncash \$ _____)	1d			665,689
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			972
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			1,678
	5 Dividends and interest from securities	5			1,751
	6a Gross rents	6a			
	b Less: rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7 Other investment income (describe ▶ _____)	7				
8a Gross amount from sales of assets other than inventory		101,497	8a		
	b Less: cost or other basis and sales expenses	105,970	8b		
	c Gain or (loss) (attach schedule)	(4,473)	8c		
	d Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	(4,473)
9 Special events and activities (attach schedule)	a Gross revenue (not including \$ <u>19,060</u> of contributions reported on line 1a)		9a	4,169	
	b Less: direct expenses other than fundraising expenses		9b	5,141	
	c Net income or (loss) from special events (subtract line 9b from line 9a)			9c	(972)
10a Gross sales of inventory, less returns and allowances			10a		
	b Less: cost of goods sold		10b		
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11 Other revenue (from Part VII, line 103)	11			22,798	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			687,443	
Expenses	13 Program services (from line 44, column (B))	13		544,125	
	14 Management and general (from line 44, column (C))	14		272,062	
	15 Fundraising (from line 44, column (D))	15		90,688	
	16 Payments to affiliates (attach schedule)	16		NONE	
	17 Total expenses (add lines 16 and 44, column (A))	17			906,875
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		(219,432)	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,033,465	
	20 Other changes in net assets or fund balances (attach explanation) STMT. 4	20			(212,183)
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			601,850

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

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
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	80,628	48,377	24,188
26	Other salaries and wages	26	315,689	189,413	94,707
27	Pension plan contributions	27	21,560	12,937	6,468
28	Other employee benefits	28	46,577	27,947	13,973
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31	3,415	2,049	1,025
32	Legal fees	32	1,031	619	309
33	Supplies	33	20,962	12,577	6,289
34	Telephone	34	15,518	9,311	4,655
35	Postage and shipping	35	25,472	15,283	7,641
36	Occupancy	36	26,500	15,900	7,950
37	Equipment rental and maintenance	37	6,264	3,758	1,879
38	Printing and publications	38	21,830	13,098	6,549
39	Travel	39	143,851	86,311	43,155
40	Conferences, conventions, and meetings	40			
41	Interest STMT. 6A.	41			
42	Depreciation, depletion, etc. (attach schedule)	42	9,173	5,504	2,752
43	Other expenses not covered above (itemize): a STMT 5	43a	168,405	101,041	50,522
	b	43b			
	c	43c			
	d	43d			
	e	43e			
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15.	44	906,875	544,125	272,062

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24.)

What is the organization's primary exempt purpose? SEE STATEMENT 6		Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a	SEE STATEMENT 7 ----- ----- ----- (Grants and allocations \$ _____)	32,648
b	SEE STATEMENT 7 ----- ----- ----- (Grants and allocations \$ _____)	40,809
c	SEE STATEMENT 7 ----- ----- ----- (Grants and allocations \$ _____)	48,971
d	SEE STATEMENT 7 ----- ----- ----- (Grants and allocations \$ _____)	38,089
e	Other program services (attach schedule) (Grants and allocations \$ SEE STATEMENT 8)	383,608
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	544,125

Part IV Balance Sheets (See Specific Instructions on page 24.)

		(A)		(B)
		Beginning of year		End of year
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.				
Assets	45 Cash — non-interest-bearing	113,970	45	142,632
	46 Savings and temporary cash investments	162,465	46	21,324
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48a Pledges receivable	48a	22,250	
	b Less: allowance for doubtful accounts	48b	31,252	48c
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		3,133	53
	54 Investments — securities (attach schedule) ^{STMT 9} <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		721,513	54
	55a Investments — land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b		55c
56 Investments — other (attach schedule)			56	
57a Land, buildings, and equipment: basis	57a	84,965		
b Less: accumulated depreciation (attach schedule) ^{STMT 6A}	57b	63,980	57c	
58 Other assets (describe ▶		19,817	58	
59 Total assets (add lines 45 through 58) (must equal line 74)		1,052,150	59	
Liabilities	60 Accounts payable and accrued expenses	18,685	60	13,532
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ▶		65	
66 Total liabilities (add lines 60 through 65)		18,685	66	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	1,033,465	67	601,850
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	1,033,465	73	601,850
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	1,052,150	74	615,382

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.

Part VI Other Information (See Specific Instructions on page 27.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization ► _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81a	Enter direct or indirect political expenditures. See line 81 instructions 81a NONE		
b	Did the organization file Form 1120-POL for this year?	81b	N/A
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b 128,200		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	N/A
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	N/A
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	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 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ► NONE ; section 4912 ► NONE ; section 4955 ► NONE		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. ► NONE		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ► NONE		
90a	List the states with which a copy of this return is filed ► NEW YORK		
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions.) 90b 8		
91	The books are in care of ► WORLD T.E.A.M. SPORTS INC. Telephone no. ► 704-370-6070 Located at ► 2108 SOUTH BLVD., CHARLOTTE, NC ZIP + 4 ► 28203		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 NONE		

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a VIDEO SALES					972
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	1,678	
96 Dividends and interest from securities			14	1,751	
97 Net rental income or (loss) from real estate:					
a 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			01	(972)	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b OTHER INCOME			01	22,798	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				25,255	972
105 Total (add line 104, columns (B), (D), and (E))					26,227

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	VIDEOS OF WORLD T.E.A.M. SPORTING EVENTS WHICH DISSEMINATE INFORMATION RELATED TO THE ORGANIZATION'S EXEMPT PURPOSES.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer _____ Date _____
 Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature: *Thomas W. Wilson* Date: 5-10-2002 Check if self-employed: Preparer's SSN or PTIN (See Gen. Inst. W): 320-40-0218
 Firm's name (or yours if self-employed), address, and ZIP + 4: PRICEWATERHOUSECOOPERS LLP, 1177 AVENUE OF AMERICAS, NY NY 10036 EIN: 13-4008324 Phone no.: 646-471-4000