

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2020

Department of the Treasury
Internal Revenue Service

For calendar year 2020 or other tax year beginning _____, and ending _____

Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection
for 501(c)(3)
Organizations Only

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A Check box if address changed.

B Exempt under section
 501(c)(6)
 408(e) 220(e)
 408A 530(a)
 529(a) 529A

Print or Type
 Name of organization (Check box if name changed and see instructions.)
NATIONAL ASSOCIATION OF ADDICTION TREATMENT PROVIDERS CORPORATION
 Number, street, and room or suite no. If a P.O. box, see instructions.
1120 LINCOLN STREET, SUITE 1104
 City or town, state or province, country, and ZIP or foreign postal code
DENVER CO 80203

D Employer identification number
95-3626761

E Group exemption number (see instructions)

F Check box if an amended return.

C Book value of all assets at end of year **u 2,298,390**

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust Applicable reinsurance entity

H Check if filing only to Claim credit from Form 8941 Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation **u**

J Enter the number of attached Schedules A (Form 990-T) **u 2**

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? **u** Yes No
 If "Yes," enter the name and identifying number of the parent corporation **u**

L The books are in care of **u KATIE STRAND** Telephone number **u 888-574-1008**

Part I Total Unrelated Business Taxable income	
1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1 800
2 Reserved	2
3 Add lines 1 and 2	3 800
4 Charitable contributions (see instructions for limitation rules)	4
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5 800
6 Deduction for net operating loss. See instructions	6 0
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7 800
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8 1,000
9 Trusts. Section 199A deduction. See instructions	9
10 Total deductions. Add lines 8 and 9	10 1,000
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11 0
Part II Tax Computation	
1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1 0
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2 0
3 Proxy tax. See instructions	3
4 Other tax amounts. See instructions	4
5 Alternative minimum tax (trusts only)	5
6 Tax on noncompliant facility income. See instructions	6
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7 0

For Paperwork Reduction Act Notice, see instructions.

Part III Tax and Payments

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b Other credits (see instructions)	1b		
c General business credit. Attach Form 3800 (see instructions)	1c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e Total credits. Add lines 1a through 1d		1e	
2 Subtract line 1e from Part II, line 7		2	
3 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)		3	
4 Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	u	4	0
5 2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4		5	
6a Payments: A 2019 overpayment credited to 2020	6a		
b 2020 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c Tax deposited with Form 8868	6c		
d Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e Backup withholding (see instructions)	6e		
f Credit for small employer health insurance premiums (attach Form 8941)	6f		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total u	6g		
7 Total payments. Add lines 6a through 6g		7	
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	u	8	
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	u	9	0
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	u	10	
11 Enter the amount of line 10 you want: Credited to 2021 estimated tax u Refunded u		11	

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

	Yes	No
1 At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here u		X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year u \$		
4a Did the organization change its method of accounting? (see instructions)		X
b If 4a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V		

Part V Supplemental Information

Provide the explanation required by Part IV, line 4b. Also, provide any other additional information. See instructions.

Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.	
u	u CHIEF EXECUTIVE OFFI	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Signature of officer	Date	Title

Paid Preparer Use Only	Print/Type preparer's name CLAIRE E. BAKER, CPA	Preparer's signature CLAIRE E. BAKER, CPA	Date 05/11/21	Check <input checked="" type="checkbox"/> if self-employed	PTIN P00677768
	Firm's name } CLAIRE E. BAKER, CPA	Firm's EIN } 20-8040799			
	Firm's address } 800 VILLAGE SQUARE CROSSING STE 103 PALM BEACH GARDENS, FL 33410	Phone no. 561-775-0091			

**SCHEDULE A
(Form 990-T)**

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

OMB No. 1545-0047

2020

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection for
501(c)(3) Organizations Only

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A Name of the organization NATIONAL ASSOCIATION OF ADDICTION	B Employer identification number 95-3626761
C Unrelated Business Activity Code (see instructions) u 541800	D Sequence: 1 of 2

E Describe the unrelated trade or business **u ADVERTISING**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances c Balance u	1c		
2 Cost of goods sold (Part III, line 8)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions)	4a		
b Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from partnership and S corporation (attach statement)	5		
6 Rent income (Part IV)	6		
7 Unrelated debt-financed income (Part V)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9 Investment income of section 501(c)(7), (9), or (17) organization (Part VII)	9		
10 Exploited exempt activity income (Part VIII)	10		
11 Advertising income (Part IX)	11		
12 Other income (see instructions; attach statement) SEE STMT 1	12 4,250		4,250
13 Total. Combine lines 3 through 12	13 4,250		4,250

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) Deductions must be directly connected with the unrelated business income

1 Compensation of officers, directors, and trustees (Part X)	1			
2 Salaries and wages	2			750
3 Repairs and maintenance	3			
4 Bad debts	4			
5 Interest (attach statement) (see instructions)	5			
6 Taxes and licenses	6			
7 Depreciation (attach Form 4562) (see instructions)	7			
8 Less depreciation claimed in Part III and elsewhere on return	8a		8b	0
9 Depletion	9			
10 Contributions to deferred compensation plans	10			
11 Employee benefit programs	11			
12 Excess exempt expenses (Part VIII)	12			
13 Excess readership costs (Part IX)	13			
14 Other deductions (attach statement) SEE STATEMENT 2	14			2,700
15 Total deductions. Add lines 1 through 14	15			3,450
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16			800
17 Deduction for net operating loss (see instructions)	17			
18 Unrelated business taxable income. Subtract line 17 from line 16	18			800

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold

Enter method of inventory valuation **u**

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use (see instructions)

A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				

3 **Total rents received or accrued.** Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) **u** _____

4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)

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5 **Total deductions.** Add line 4 columns A through D. Enter here and on Part I, line 6, column (B) **u** _____

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use (see instructions)

A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				

8 **Total gross income (add line 7, columns A through D).** Enter here and on Part I, line 7, column (A) **u** _____

9 **Allocable deductions.** Multiply line 3c by line 6

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10 **Total allocable deductions.** Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) **u** _____

11 **Total dividends-received deductions** included in line 10 **u** _____

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt/Nonexempt Controlled Organization			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)
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Totals

u

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				

		Add amounts in column 2. Enter here and on Part I, line 9, column (A)			Add amounts in column 5. Enter here and on Part I, line 9, column (B)
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Totals

u

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity:	
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4
5 Gross income from activity that is not unrelated business income	5
6 Expenses attributable to income entered on line 5	6
7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

- A
B
C
D

ADVERTISING

Enter amounts for each periodical listed above in the corresponding column.

Table with 4 columns (A, B, C, D) and rows for advertising income, direct advertising costs, advertising gain/loss, readership costs, circulation income, and excess readership costs.

Part X Compensation of Officers, Directors, and Trustees (see instructions)

Table with 4 columns: 1. Name, 2. Title, 3. Percentage of time devoted to business, 4. Compensation attributable to unrelated business.

Part XI Supplemental Information (see instructions)

Supplemental information section containing multiple horizontal dotted lines for text entry.

**SCHEDULE A
(Form 990-T)**

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

OMB No. 1545-0047

2020

Department of the Treasury
Internal Revenue Service

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Open to Public Inspection for
501(c)(3) Organizations Only

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A Name of the organization NATIONAL ASSOCIATION OF ADDICTION	B Employer identification number 95-3626761
C Unrelated Business Activity Code (see instructions) u 561000	D Sequence: 2 of 2

E Describe the unrelated trade or business **u ORGANIZATIONAL MANAGEMENT**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances c Balance u	1c		
2 Cost of goods sold (Part III, line 8)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions)	4a		
b Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from partnership and S corporation (attach statement)	5		
6 Rent income (Part IV)	6		
7 Unrelated debt-financed income (Part V)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9 Investment income of section 501(c)(7), (9), or (17) organization (Part VII)	9		
10 Exploited exempt activity income (Part VIII)	10		
11 Advertising income (Part IX)	11		
12 Other income (see instructions; attach statement) SEE STMT 3	12 68,500		68,500
13 Total. Combine lines 3 through 12	13 68,500		68,500

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) Deductions must be directly connected with the unrelated business income

1 Compensation of officers, directors, and trustees (Part X)	1			
2 Salaries and wages	2	57,720		
3 Repairs and maintenance	3			
4 Bad debts	4			
5 Interest (attach statement) (see instructions)	5			
6 Taxes and licenses	6	4,365		
7 Depreciation (attach Form 4562) (see instructions)	7			
8 Less depreciation claimed in Part III and elsewhere on return	8a		8b	0
9 Depletion	9			
10 Contributions to deferred compensation plans	10			
11 Employee benefit programs	11	5,340		
12 Excess exempt expenses (Part VIII)	12			
13 Excess readership costs (Part IX)	13			
14 Other deductions (attach statement) SEE STATEMENT 4	14	1,075		
15 Total deductions. Add lines 1 through 14	15	68,500		
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16			
17 Deduction for net operating loss (see instructions)	17			
18 Unrelated business taxable income. Subtract line 17 from line 16	18			0

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold

Enter method of inventory valuation **u**

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use (see instructions)

A _____
 B _____
 C _____
 D _____

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)	u _____			
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)	u _____			

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use (see instructions)

A _____
 B _____
 C _____
 D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	u _____			
9 Allocable deductions. Multiply line 3c by line 6				
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	u _____			
11 Total dividends-received deductions included in line 10	u _____			

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt/Nonexempt Controlled Organization			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)
--	--	--	--	--

Totals

u

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				

		Add amounts in column 2. Enter here and on Part I, line 9, column (A)			Add amounts in column 5. Enter here and on Part I, line 9, column (B)
--	--	---	--	--	---

Totals

u

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity:	
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4
5 Gross income from activity that is not unrelated business income	5
6 Expenses attributable to income entered on line 5	6
7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7

Federal Statements**ADVERTISING****Statement 1 - Schedule A (990T), Part I, Line 12 - Other Income**

Description	Amount
NON-MEMBER JOB POSTINGS	\$ 4,250
TOTAL	\$ 4,250

ADVERTISING**Statement 2 - Schedule A (990T), Part II, Line 14 - Other Deductions**

Description	Amount
WEBSITE MAINTENANCE	\$ 2,250
SEO OPTIMIZATION	450
TOTAL	\$ 2,700

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ORGANIZATIONAL MANAGEMENT**Statement 3 - Schedule A (990T), Part I, Line 12 - Other Income**

Description	Amount
MANAGEMENT FEES	\$ 68,500
TOTAL	\$ 68,500

ORGANIZATIONAL MANAGEMENT**Statement 4 - Schedule A (990T), Part II, Line 14 - Other Deductions**

Description	Amount
LICENSES	\$ 500
WORKERS COMP	75
TELEPHONE & INTERNET	500
TOTAL	\$ 1,075

CLIENT COPY

Depreciation and Amortization
(Including Information on Listed Property)

u Attach to your tax return.

u Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return **NATIONAL ASSOCIATION OF ADDICTION TREATMENT PROVIDERS CORPORATION** Identifying number **95-3626761**

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,040,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,590,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	26,558

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2020	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/> u <input type="checkbox"/>		

Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	26,558
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?				Yes	No	24b If "Yes," is the evidence written?				Yes	No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost		
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions									25		
26 Property used more than 50% in a qualified business use:											
		%									
		%									
27 Property used 50% or less in a qualified business use:											
		%				S/L-					
		%				S/L-					
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1									28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1										29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2020 tax year (see instructions):					
43 Amortization of costs that began before your 2020 tax year				43	154
44 Total. Add amounts in column (f). See the instructions for where to report				44	154

Year Ended: December 31, 2020

95-3626761

NATIONAL ASSOCIATION OF ADDICTION
TREATMENT PROVIDERS CORPORATION
1120 LINCOLN STREET, SUITE 1104
DENVER, CO 80203

**Electing out of Bonus Depreciation Allowance for
All Eligible Depreciable Property**

The above named taxpayer elects out of the first-year bonus depreciation allowance under IRC Section 168(k)(7) for all eligible depreciable property placed in service during the tax year.

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Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Other Depreciation:										
38	MACBOOK PRO	5/04/15	2,432			2,432	5	MO S/L	2,270	162
	Sold/Scrapped: 8/31/20									
39	MACBOOK PRO & THUNDERBOLT DISI	8/24/15	3,596			3,596	5	MO S/L	3,117	479
41	INK JET PRINTER	1/21/16	538			538	5	MO S/L	421	108
42	TV MONITOR	1/27/16	728			728	5	MO S/L	570	146
44	PROJECTOR	2/16/16	720			720	5	MO S/L	552	144
45	OFFICE FURNITURE	3/01/16	10,229			10,229	5	MO S/L	7,842	2,046
46	MAC BOOK PRO	3/17/16	2,432			2,432	5	MO S/L	1,824	486
47	OFFICE CART	3/31/16	795			795	5	MO S/L	596	159
48	APPLE DESKTOP	9/06/16	1,666			1,666	5	MO S/L	1,111	333
49	NEW WEBSITE	5/07/16	40,770			40,770	3	MO Amort	40,770	0
50	WEBSITE UPGRADE	6/21/16	2,700			2,700	3	MO Amort	2,700	0
51	WEBSITE UPGRADE	7/30/16	3,550			3,550	3	MO Amort	3,550	0
52	WEBSITE UPGRADE	9/28/16	375			375	3	MO Amort	375	0
53	WEBSITE UPGRADE	10/27/16	1,500			1,500	3	MO Amort	1,500	0
54	WEBSITE UPGRADE	11/16/16	500			500	3	MO Amort	500	0
55	WEBSITE UPGRADE	12/12/16	1,250			1,250	3	MO Amort	1,250	0
56	WEBSITE UPGRADE	1/12/17	750			750	3	MO Amort	750	0
57	WEBSITE UPGRADE	2/20/17	2,125			2,125	3	MO Amort	2,066	59
58	WEBSITE UPGRADE	4/24/17	4,375			4,375	3	MO Amort	4,010	365
59	NEW WORK STATION	5/02/17	1,957			1,957	5	MO S/L	1,044	391
60	COMPUTER SCREEN	5/08/17	430			430	5	MO S/L	229	86
61	WEBSITE AUDIT	9/30/17	3,675			3,675	3	MO Amort	2,858	817
62	MACBOOK PRO	3/23/17	2,225			2,225	5	MO S/L	1,224	445
63	2 MAC MICE	3/20/17	150			150	5	MO S/L	83	30
64	2 IPHONES	3/20/17	1,611			1,611	5	MO S/L	886	322
65	WEBSITE	12/31/17	2,100			2,100	3	MO Amort	1,458	642
66	COMPUTER	12/14/17	2,225			2,225	5	MO S/L	927	445
67	WEBSITE UPGRADE	11/30/17	6,900			6,900	3	MO Amort	4,983	1,917
68	DESK	2/06/17	939			939	5	MO S/L	548	188
69	WEBSITE UPGRADE	1/31/18	3,075			3,075	3	MO Amort	2,050	1,025
70	WEBSITE UPGRADE	2/28/18	1,500			1,500	3	MO Amort	958	500
71	WEBSITE UPGRADE	7/31/18	950			950	3	MO Amort	475	317
72	WEBSITE UPGRADE	8/31/18	750			750	3	MO Amort	354	250
73	WEBSITE UPGRADE	9/30/18	4,613			4,613	3	MO Amort	2,050	1,538
74	WEBSITE UPGRADE	10/31/18	1,500			1,500	3	MO Amort	625	500
75	WEBSITE UPGRADE	11/30/18	150			150	3	MO Amort	58	50
76	WEBSITE UPGRADE	12/31/18	1,800			1,800	3	MO Amort	650	600
81	POP UP TENT	3/15/18	766			766	7	MO S/L	201	109
82	APPLE TV	10/19/18	193			193	5	MO S/L	45	39
83	2 IPHONES	1/02/18	2,063			2,063	5	MO S/L	825	413
84	COMPUTER MONITOR	10/29/18	301			301	5	MO S/L	70	60
85	APPLIANCES	11/01/18	2,185			2,185	7	MO S/L	364	312
86	WIRELESS KEYBOARD	11/02/18	140			140	5	MO S/L	33	28
87	REFRIGERATOR	11/13/18	378			378	7	MO S/L	63	54
88	OFFICE DECOR	11/14/18	509			509	7	MO S/L	85	73
89	FURNITURE	11/21/18	5,000			5,000	7	MO S/L	774	714
90	MACBOOK PRO	12/14/18	2,780			2,780	5	MO S/L	602	556
91	WEBSITE UPGRADE	3/31/18	750			750	3	MO Amort	438	250
92	OFFICE DECOR	11/13/18	450			450	7	MO S/L	75	64
93	OFFICE FURNITURE	1/15/19	3,352			3,352	7	MO S/L	479	479
94	IPHONE	1/31/19	1,193			1,193	5	MO S/L	219	238
95	OFFICE FURNITURE	2/01/19	9,910			9,910	7	MO S/L	1,298	1,415
96	OFFICE FURNITURE	3/06/19	310			310	7	MO S/L	37	44
97	OFFICE FURNITURE	4/16/19	793			793	7	MO S/L	75	114
98	MACBOOK PRO	4/25/19	2,062			2,062	5	MO S/L	275	412
99	OFFICE DECOR	7/09/19	222			222	7	MO S/L	16	32
100	OFFICE DECOR	7/22/19	175			175	7	MO S/L	10	25
101	WEBSITE UPGRADE	1/31/19	2,400			2,400	3	MO Amort	800	800
102	WEBSITE UPGRADE	3/01/19	1,050			1,050	3	MO Amort	292	350
103	WEBSITE UPGRADE	4/01/19	450			450	3	MO Amort	113	150
104	WEBSITE UPGRADE	7/01/19	4,875			4,875	3	MO Amort	813	1,625
105	WEBSITE UPGRADE	8/01/19	1,763			1,763	3	MO Amort	245	587
106	WEBSITE UPGRADE	8/30/19	3,263			3,263	3	MO Amort	453	1,088
107	WEBSITE UPGRADE	8/30/19	713			713	3	MO Amort	99	237
108	WEBSITE UPGRADE	12/31/19	1,650			1,650	3	MO Amort	46	550
110	GLASS DOOR	11/15/19	3,478			3,478	39	MO S/L	11	89
111	MAC BOOK PRO	3/19/20	1,626			1,626	5	MO S/L	0	244
112	MV HOME OFFICE DESK	4/15/20	653			653	7	MO S/L	0	70
113	CELL PHONE	5/01/20	436			436	7	MO S/L	0	42

Federal Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
114	GLASS DOOR	1/01/20	3,623			3,623	39 MO S/L	0	93
115	WEBSITE UPGRADES	1/31/20	788			788	3 MO Amort	0	263
116	WEBSITE UPGRADES	6/30/20	310			310	3 MO Amort	0	60
117	WEBSITE UPGRADES	7/31/20	581			581	3 MO Amort	0	97
118	WEBSITE UPGRADES	9/30/20	969			969	3 MO Amort	0	108
119	WEBSITE UPGRADES	10/31/20	1,085			1,085	3 MO Amort	0	90
120	WEBSITE UPGRADES	11/30/20	620			620	3 MO Amort	0	34
Total Other Depreciation			<u>181,446</u>			<u>181,446</u>		<u>106,090</u>	<u>26,558</u>
Total ACRS and Other Depreciation			<u>181,446</u>			<u>181,446</u>		<u>106,090</u>	<u>26,558</u>
Amortization:									
77	TRADEMARK	10/31/18	1,850			1,850	15 MO Amort	154	123
109	TRADEMARK	5/23/19	465			465	15 MO Amort	21	31
			<u>2,315</u>			<u>2,315</u>		<u>175</u>	<u>154</u>
Grand Totals			183,761			183,761		106,265	26,712
Less: Dispositions and Transfers			2,432			2,432		2,270	162
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>181,329</u>			<u>181,329</u>		<u>103,995</u>	<u>26,550</u>

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Depreciation Adjustment Report

All Business Activities

Form Unit Asset

Description

Tax

AMT

AMT
Adjustments/
Preferences

There are no assets that meet the criteria of this report

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Future Depreciation Report FYE: 12/31/21

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
39	MACBOOK PRO & THUNDERBOLT DISPLA'	8/24/15	3,596	0	0
41	INK JET PRINTER	1/21/16	538	9	0
42	TV MONITOR	1/27/16	728	12	0
44	PROJECTOR	2/16/16	720	24	0
45	OFFICE FURNITURE	3/01/16	10,229	341	3,507
46	MAC BOOK PRO	3/17/16	2,432	122	1,946
47	OFFICE CART	3/31/16	795	40	272
48	APPLE DESKTOP	9/06/16	1,666	222	1,333
49	NEW WEBSITE	5/07/16	40,770	0	0
50	WEBSITE UPGRADE	6/21/16	2,700	0	0
51	WEBSITE UPGRADE	7/30/16	3,550	0	0
52	WEBSITE UPGRADE	9/28/16	375	0	0
53	WEBSITE UPGRADE	10/27/16	1,500	0	0
54	WEBSITE UPGRADE	11/16/16	500	0	0
55	WEBSITE UPGRADE	12/12/16	1,250	0	0
56	WEBSITE UPGRADE	1/12/17	750	0	0
57	WEBSITE UPGRADE	2/20/17	2,125	0	0
58	WEBSITE UPGRADE	4/24/17	4,375	0	0
59	NEW WORK STATION	5/02/17	1,957	392	0
60	COMPUTER SCREEN	5/08/17	430	86	0
61	WEBSITE AUDIT	9/30/17	3,675	0	0
62	MACBOOK PRO	3/23/17	2,225	445	0
63	2 MAC MICE	3/20/17	150	30	0
64	2 IPHONES	3/20/17	1,611	322	0
65	WEBSITE	12/31/17	2,100	0	0
66	COMPUTER	12/14/17	2,225	445	0
67	WEBSITE UPGRADE	11/30/17	6,900	0	0
68	DESK	2/06/17	939	187	0
69	WEBSITE UPGRADE	1/31/18	3,075	0	0
70	WEBSITE UPGRADE	2/28/18	1,500	42	0
71	WEBSITE UPGRADE	7/31/18	950	158	0
72	WEBSITE UPGRADE	8/31/18	750	146	0
73	WEBSITE UPGRADE	9/30/18	4,613	1,025	0
74	WEBSITE UPGRADE	10/31/18	1,500	375	0
75	WEBSITE UPGRADE	11/30/18	150	42	0
76	WEBSITE UPGRADE	12/31/18	1,800	550	0
81	POP UP TENT	3/15/18	766	109	0
82	APPLE TV	10/19/18	193	38	0
83	2 IPHONES	1/02/18	2,063	412	0
84	COMPUTER MONITOR	10/29/18	301	61	0
85	APPLIANCES	11/01/18	2,185	312	0
86	WIRELESS KEYBOARD	11/02/18	140	28	0
87	REFRIGERATOR	11/13/18	378	54	0
88	OFFICE DECOR	11/14/18	509	72	0
89	FURNITURE	11/21/18	5,000	714	0
90	MACBOOK PRO	12/14/18	2,780	556	0
91	WEBSITE UPGRADE	3/31/18	750	62	0
92	OFFICE DECOR	11/13/18	450	65	0
93	OFFICE FURNITURE	1/15/19	3,352	479	0
94	IPHONE	1/31/19	1,193	239	0
95	OFFICE FURNITURE	2/01/19	9,910	1,416	0
96	OFFICE FURNITURE	3/06/19	310	44	0
97	OFFICE FURNITURE	4/16/19	793	113	0
98	MACBOOK PRO	4/25/19	2,062	413	0
99	OFFICE DECOR	7/09/19	222	31	0
100	OFFICE DECOR	7/22/19	175	25	0
101	WEBSITE UPGRADE	1/31/19	2,400	800	0
102	WEBSITE UPGRADE	3/01/19	1,050	350	0
103	WEBSITE UPGRADE	4/01/19	450	150	0
104	WEBSITE UPGRADE	7/01/19	4,875	1,625	0
105	WEBSITE UPGRADE	8/01/19	1,763	588	0
106	WEBSITE UPGRADE	8/30/19	3,263	1,087	0
107	WEBSITE UPGRADE	8/30/19	713	238	0
108	WEBSITE UPGRADE	12/31/19	1,650	550	0
110	GLASS DOOR	11/15/19	3,478	89	0
111	MAC BOOK PRO	3/19/20	1,626	325	0
112	MV HOME OFFICE DESK	4/15/20	653	93	0
113	CELL PHONE	5/01/20	436	62	0

Future Depreciation Report FYE: 12/31/21
Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
114	GLASS DOOR	1/01/20	3,623	93	0
115	WEBSITE UPGRADES	1/31/20	788	262	0
116	WEBSITE UPGRADES	6/30/20	310	104	0
117	WEBSITE UPGRADES	7/31/20	581	194	0
118	WEBSITE UPGRADES	9/30/20	969	323	0
119	WEBSITE UPGRADES	10/31/20	1,085	362	0
120	WEBSITE UPGRADES	11/30/20	620	207	0
Total Other Depreciation			<u>179,014</u>	<u>17,760</u>	<u>7,058</u>
Total ACRS and Other Depreciation			<u>179,014</u>	<u>17,760</u>	<u>7,058</u>
 <u>Amortization:</u>					
77	TRADEMARK	10/31/18	1,850	124	0
109	TRADEMARK	5/23/19	465	31	0
			<u>2,315</u>	<u>155</u>	<u>0</u>
Grand Totals			<u>181,329</u>	<u>17,915</u>	<u>7,058</u>

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Name
NATIONAL ASSOCIATION OF ADDICTION

Taxpayer Identification Number
95-3626761

Business Activity Income (and allocation of Prior-2018 NOL)

- A. Total Pre-2018 Net Operating Losses Carried Forward **N/A** A. _____
- B. Total Pre-2018 Net Operating Loss allocated to Sch A activities B. _____
- C. Total Pre-2018 Net Operating Loss allocated to Form 990-T, Line 6 C. _____
- D. Pre-2018 Applied (Sum of B and C) D. _____
- E. Pre-2018 Remaining (Line A minus Line D) E. _____
- F. Pre-2018 Net Operating Losses Expiring this Year F. _____
- G. Pre-2018 Net Operating Losses Carried Forward G. _____

Unrelated Business Income Activity with Income		Code	Net Income	Allocated Pre2018 NOL
1.	ADVERTISING	541800	1. 800	_____
2.	ORGANIZATIONAL MANAGEMENT	561000	2. _____	_____
3.	_____	_____	3. _____	_____
4.	_____	_____	4. _____	_____
5.	_____	_____	5. _____	_____
6.	_____	_____	6. _____	_____
7.	_____	_____	7. _____	_____
8.	_____	_____	8. _____	_____
9.	_____	_____	9. _____	_____
10.	_____	_____	10. _____	_____
11.	_____	_____	11. _____	_____
12.	_____	_____	12. _____	_____
13.	_____	_____	13. _____	_____
14.	_____	_____	14. _____	_____
15.	All other revenue	_____	15. _____	_____
16.	Total taxable income	_____	16. 800	_____

Business Activity Losses

Unrelated Business Income Activity with Losses		Code	Current Year Loss
1.	_____	_____	1. _____
2.	_____	_____	2. _____
3.	_____	_____	3. _____
4.	_____	_____	4. _____
5.	All other activities	_____	5. _____
6.	Totals	_____	6. _____

Name NATIONAL ASSOCIATION OF ADDICTION TREATMENT PROVIDERS CORPORATION	Employer Identification Number 95-3626761
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Part I Unrelated Trade or Business Income				(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales					
b	Less returns and allowances	c Balance	u	1c		
2	Cost of goods sold (Schedule A, line 7)			2		
3	Gross profit. Subtract line 2 from line 1c			3		
4a	Capital gain net income (attach Schedule D)			4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			4b		
c	Capital loss deduction for trusts			4c		
5	Income (loss) from partnership and S corporation (attach statement)			5		
6	Rent income (Schedule C)			6		
7	Unrelated debt-financed income (Schedule E)			7		
8	Interest, annuities, royalties, and rents from controlled organization (Schedule F)			8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			9		
10	Exploited exempt activity income (Schedule I)			10		
11	Advertising income (Schedule J)			11		
12	Other income (See instructions; attach schedule) SEE STMT			12	72,750	72,750
13	Total. Combine lines 3 through 12			13	72,750	72,750

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)						
14	Compensation of officers, directors, and trustees (Schedule K)					14
15	Salaries and wages					58,470
16	Repairs and maintenance					
17	Bad debts					
18	Interest (attach schedule) (see instructions)					
19	Taxes and licenses					4,365
20	Depreciation (attach Form 4562)		20			
21	Less depreciation claimed on Schedule A and elsewhere on return		21a			0
22	Depletion					
23	Contributions to deferred compensation plans					
24	Employee benefit programs					5,340
25	Excess exempt expenses (Schedule I)					
26	Excess readership costs (Schedule J)					
27	Other deductions (attach schedule) SEE STATEMENT					3,775
28	Total deductions. Add lines 14 through 28					71,950
29	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13					800
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)					
31	Unrelated business taxable income. Subtract line 31 from line 30					800

Part III Deductions For Loss Arising after January 1, 2018 deductions must be directly connected with the unrelated business income						
32	Losses carried over to this year (do not include amounts prior to 2018)					32
33	Enter 80% of the amount on Line 29 (if positive)					640
34	Take the lesser of Line 32 or Line 33. Enter here and on Line 30 above					
35	Remaining losses to be carried forward to 2021 (Subtract Line 34 from line 32)					
36	If line 29 is less than zero, enter that amount here as a positive number					0
37	Total loss carried forward to 2021 (Add lines 35 and 36)					0

Schedule A – Cost of Goods Sold. Enter method of inventory valuation **u**

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes
4a Additional sec. 263A costs (attach schedule)	4a				No
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5				

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property		
(1) N/A		
(2)		
(3)		
(4)		
2. Rent received or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) u
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) u		

Schedule E – Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1) N/A				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)				
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8 u			u	

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1) N/A					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col.4)
(1) N/A				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 25.

Schedule J – Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) ADVERTISING						
(2) ADMINISTRATIVE MANAG						
(3)						
(4)						
Totals (carry to Part II, line (5))						

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals from Part I u						
Totals, Part II (lines 1-5) u	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 26.

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			u

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Form **990/990-PF**

Electronic Filing - PDF Attachment Report

2020

For calendar year 2020, or tax year beginning , and ending

Name

**NATIONAL ASSOCIATION OF ADDICTION
TREATMENT PROVIDERS CORPORATION**

Taxpayer Identification Number

95-3626761

Title	Attachment Source	Proforma
<p>MANUALLY ATTACHED TO RETURN</p> <p>FORM 8949 EXCEPTION TO REPORTING USBI 7243</p> <p>FORM 8949 EXCEPTION TO REPORTING USBI 9352</p>	<p>Y:\CLIENT FILES\NAATP\12-20\III TAX RETURNS\ATTACHMENTS\ NO FORM 8949 EXCEPTION TO REPORTING USBI 7243.PDF</p> <p>Y:\CLIENT FILES\NAATP\12-20\III TAX RETURNS\ATTACHMENTS\ NO FORM 8949 EXCEPTION TO REPORTING USBI 9352.PDF</p>	

Form **990****Two Year Comparison Report****2019 & 2020**

For calendar year 2020, or tax year beginning , ending

Name

Taxpayer Identification Number

**NATIONAL ASSOCIATION OF ADDICTION
TREATMENT PROVIDERS CORPORATION****95-3626761**

		2019	2020	Differences	
Revenue	1. Contributions, gifts, grants	1.	2,345	2,345	
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.	109,562	109,562	
	4. Program service revenue	4.	1,578,578	969,850	-608,728
	5. Investment income	5.	21,723	21,702	-21
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.	-811	-18,496	-17,685
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.	6,250	72,750	66,500
	12. Total revenue. Add lines 1 through 11	12.	1,605,740	1,157,713	-448,027
Expenses	13. Grants and similar amounts paid	13.	100,000	100,000	
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.		374,423	374,423
	16. Salaries, other compensation, and employee benefits	16.	745,298	467,743	-277,555
	17. Professional fundraising fees	17.			
	18. Other professional fees	18.	191,919	170,938	-20,981
	19. Occupancy, rent, utilities, and maintenance	19.	58,340	45,584	-12,756
	20. Depreciation and Depletion	20.	32,529	26,712	-5,817
	21. Other expenses	21.	556,141	166,815	-389,326
	22. Total expenses. Add lines 13 through 21	22.	1,584,227	1,352,215	-232,012
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	21,513	-194,502	-216,015
Other Information	24. Total exempt revenue	24.	1,605,740	1,157,713	-448,027
	25. Total unrelated revenue	25.	6,250	72,750	66,500
	26. Total excludable revenue	26.	1,599,490	973,056	-626,434
	27. Total assets	27.	2,448,568	2,298,390	-150,178
	28. Total liabilities	28.	877,480	814,496	-62,984
	29. Retained earnings	29.	1,571,088	1,483,894	-87,194
	30. Number of voting members of governing body	30.	24	25	
	31. Number of independent voting members of governing body	31.	23	25	
32. Number of employees	32.	6	7		
33. Number of volunteers	33.	30	28		

Form **990T****Two Year Comparison Report****2019 & 2020**

For calendar year 2020, or tax year beginning , ending

Name

Taxpayer Identification Number

**NATIONAL ASSOCIATION OF ADDICTION
TREATMENT PROVIDERS CORPORATION****95-3626761**

		2019	2020	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rent income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Income from controlled organizations (net of expense)	6.			
	7. Section 501(c)(7)(9)(17) organization income (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.	6,250	4,250	-2,000
	11. Total trade or business income. Combine lines 1 through 10	11.	6,250	4,250	-2,000
Expenses	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.	3,000	750	-2,250
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.	240		-240
	18. Charitable contributions	18.			
	19. Depreciation and Depletion	19.			
	20. Contributions to deferred compensation plans	20.			
	21. Employee benefit programs	21.			
	22. Other deductions	22.	2,250	2,700	450
	23. Total deductions. Add lines 12 through 22	23.	5,490	3,450	-2,040
	24. Net income (990T/first activity); Subtract line 23 from 11	24.	760	800	40
	25. Number of unrelated business activities for this return	25.	1	2	1
26. Unrelated business taxable income from all trades	26.	760	800	40	
27. Disallowed employee fringe benefits	27.				
28. Charitable contributions	28.				
29. Taxable income before NOL loss	29.	760	800	40	
30. Net operating loss (pre-2018)	30.				
31. Specific deduction	31.	1,000	1,000		
32. Unrelated business taxable income.	32.				
Tax & Credits	33. Income tax (corporate or trust)	33.			
	34. Proxy tax	34.			
	35. Other taxes	35.			
	36. Total taxes	36.			
	37. Other credits	37.			
	38. General business credit	38.			
	39. Credit for prior year minimum tax	39.			
	40. Total credits	40.			
	41. Net tax after credits	41.			
	42. Recapture taxes and 965 tax	42.			
	43. Total Taxes	43.			
Due/Refund	44. Prior year overpayment and estimated tax payments	44.			
	45. Payment made with extension	45.			
	46. Backup withholding and foreign withholding	46.			
	47. Other payments	47.			
	48. Total payments	48.			
	49. Balance due/(Overpayment)	49.			
	50. Overpayment applied to next year	50.			
	51. Penalties	51.			
52. Total due/(Refund)	52.				

Form SchM	Two Year Comparison for Unrelated Business Activity For calendar year 2020, or tax year beginning _____, ending _____	2019 & 2020
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Organization Name NATIONAL ASSOCIATION OF ADDICTION	Taxpayer Identification Number 95-3626761
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Unincorporated Business Income Tax Code: **541800** Activity: **ADVERTISING**

		2019	2020	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rental income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Interest, and other income from controlled organizations (net of expense)	6.			
	7. Investment income of specific organizations (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.	6,250	4,250	-2,000
	11. Total trade or business income. Combine lines 1 through 10	11.	6,250	4,250	-2,000
Expenses	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.	3,000	750	-2,250
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.	240		-240
	18. Depreciation and Depletion	18.			
	19. Contributions to deferred compensation plans	19.			
	20. Employee benefit programs	20.			
	21. Other deductions	21.	2,250	2,700	450
	22. Total deductions. Add lines 12 through 22	22.	5,490	3,450	-2,040
	23. Taxable income before deductions. Subtract line 23 from 11	23.	760	800	40
	24. Deductible losses	24.			
	25. Unrelated business taxable income (loss)	25.	760	800	40

Form 990	Tax Return History	2020
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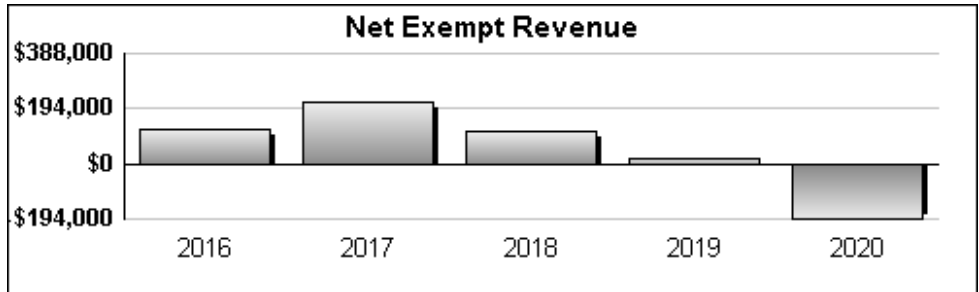
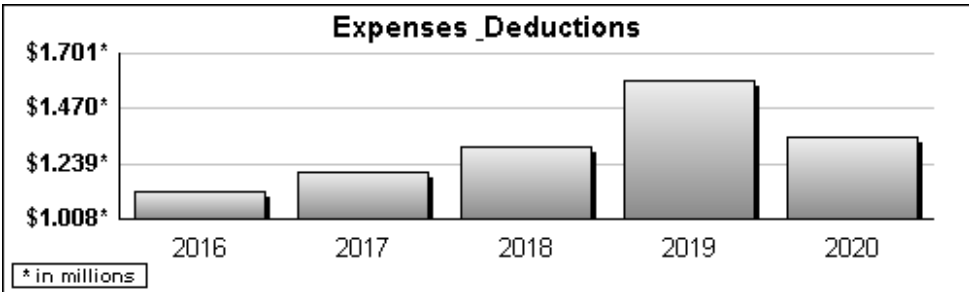
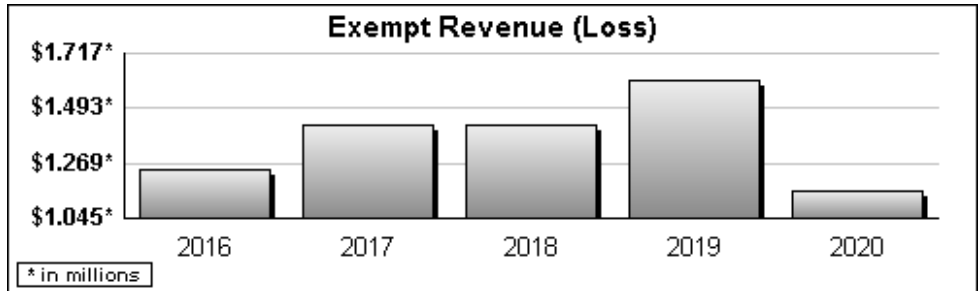
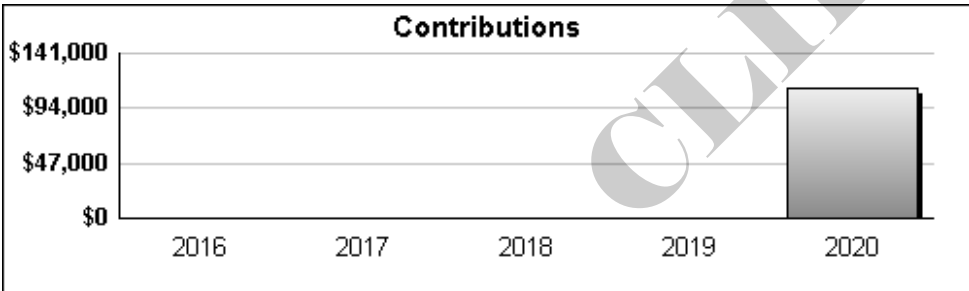
Name NATIONAL ASSOCIATION OF ADDICTION TREATMENT PROVIDERS CORPORATION	Employer Identification Number 95-3626761
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	2016	2017	2018	2019	2020	2021
Contributions, gifts, grants					111,907	
Membership dues						
Program service revenue	1,245,955	1,421,577	1,403,353	1,578,578	969,850	
Capital gain or loss	-4,561		-4,547	-811	-18,496	
Investment income	1,032	911	12,961	21,723	21,702	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	3,798	3,750	10,750	6,250	72,750	
Total revenue	1,246,224	1,426,238	1,422,517	1,605,740	1,157,713	
Grants and similar amounts paid					100,000	
Benefits paid to or for members						
Compensation of officers, etc.			216,882		374,423	
Other compensation	356,741	441,593	336,041	745,298	467,743	
Professional fees	157,357	154,442	250,073	191,919	170,938	
Occupancy costs	20,022	25,935	24,381	58,340	45,584	
Depreciation and depletion	16,082	25,660	33,433	32,529	26,712	
Other expenses	573,314	558,450	448,616	556,141	166,815	
Total expenses	1,123,516	1,206,080	1,309,426	1,584,227	1,352,215	
Excess or (Deficit)	122,708	220,158	113,091	21,513	-194,502	
Total exempt revenue	1,246,224	1,426,238	1,422,517	1,605,740	1,157,713	
Total unrelated revenue	3,300	3,750	10,750	6,250	72,750	
Total excludable revenue	1,242,924	1,422,488	1,411,767	1,599,490	973,056	
Total Assets	1,574,763	1,832,704	2,190,054	2,448,568	2,298,390	
Total Liabilities	411,199	448,982	723,459	877,480	814,496	
Net Fund Balances	1,163,564	1,383,722	1,466,595	1,571,088	1,483,894	

Name **NATIONAL ASSOCIATION OF ADDICTION TREATMENT PROVIDERS CORPORATION** Employer Identification Number **95-3626761**

* Income shown net of expenses

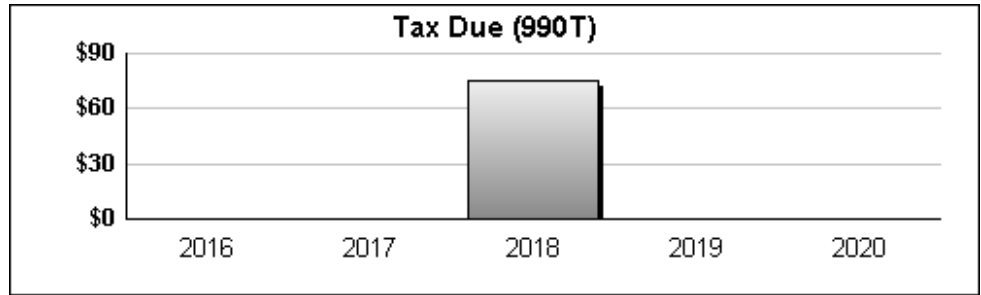
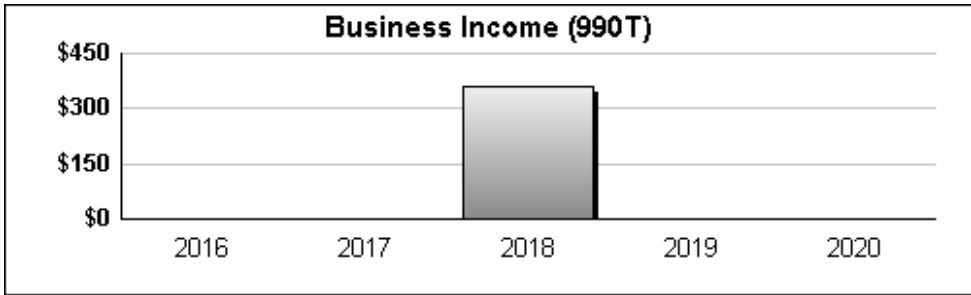
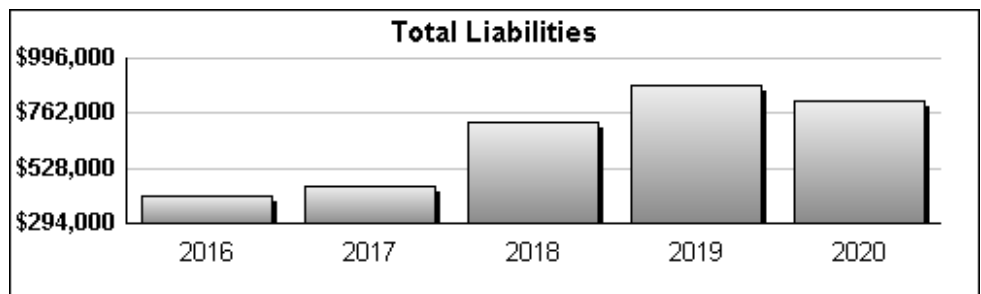
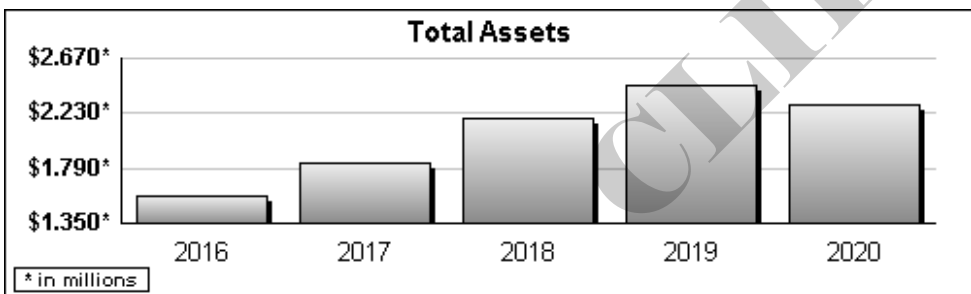
	2016	2017	2018	2019	2020	2021
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income	3,300	3,750	10,750	6,250	4,250	
Total trade or business income.	3,300	3,750	10,750	6,250	4,250	
Compensation of officers, ect.						
Other salaries and wages			2,508	3,000	750	
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses			201	240		
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs			156			



Form **990T** **Tax Return History** **2020**

Name **NATIONAL ASSOCIATION OF ADDICTION TREATMENT PROVIDERS CORPORATION** Employer Identification Number **95-3626761**

	2016	2017	2018	2019	2020	2021
Other deductions			3,152	2,250	2,700	
Net income (990T/first activity)	3,300	3,750	4,733	760	800	
UBTI from all trades	3,300	3,750	4,733	760	800	
Taxable employee fringe benefits						
Charitable contributions						
Net operating loss deduction	3,300	3,750	3,374			
Specific deduction	1,000	1,000	1,000	1,000	1,000	
Income after expense and deductions			359			
Income tax (corporate or trust)			75			
Other taxes						
Total taxes			75			
General business credit						
Other credits						
Net tax after credits			75			
Estimated tax payments						
Other payments			75			
Balance due/Overpayment						



Federal Statements

Taxable Interest on Investments

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
INTEREST ON CASH ACCOUNTS	\$ 3,367			14 CO		
TOTAL	<u>\$ 3,367</u>					

Taxable Dividends from Securities

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
DIVIDENDS ON MUTUAL FDS & ETF	\$ 18,335			14 CO		
TOTAL	<u>\$ 18,335</u>					

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Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONSULTANT FEES	\$ 126,185	\$ 126,185	\$	\$
TOTAL	\$ 126,185	\$ 126,185	\$ 0	\$ 0

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
LOSSES FROM CONF CANCELLA	\$ 13,010	\$ 13,010	\$	\$
TELEPHONE & INTERNET	10,132	10,132		
SOFTWARE	6,792	6,792		
TAXES & FEES	683	683		
PROFESSIONAL DEVELOPMENT	177	177		
TOTAL	\$ 30,794	\$ 30,794	\$ 0	\$ 0

Cumulative Worksheet for Form 990-T, Line 12 - Other Income

Description	Amount
NON-MEMBER JOB POSTINGS	\$ 4,250
MANAGEMENT FEES	68,500
TOTAL	\$ 72,750

Cumulative Worksheet for Form 990-T, Line 28 - Other Deductions

Description	Amount
WEBSITE MAINTENANCE	\$ 2,250
SEO OPTIMIZATION	450
LICENSES	500
WORKERS COMP	75
TELEPHONE & INTERNET	500
TOTAL	\$ 3,775

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