# 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)

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service benefit trust or private foundation)

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

A For the 2008 calendar year, or tax year beginning APR 1, 2008 and ending MAR 31, 2009 C Name of organization D Employer identification number Please use IRS UNITED STATES SOCCER FEDERATION orint or Name NOB. 13~5591991 Doing Business As Initial Sea Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-(312)808-1300 1801 S. PRAIRIE AVE. natruo. Amended 53,821,686. City or town, state or country, and ZiP + 4 G Gross receipts \$ Applica-tion pending CHICAGO, IL 60616 H(a) is this a group return F Name and address of principal officer: DANIEL T. FLYNN JYes Ϫ No for affiliates? 1801 S. PRAIRIE AVE., CHICAGO, IL 60616 H(b) Are all affiliates included? Yes No 1 Tax-exempt status: X 501(c) (3 ) (insert no.) 4947(a)(1) or 527 If "No." attach a list, (see instructions) J Website: ► WWW.USSOCCER.COM H(c) Group exemption number K Type of organization: X Corporation Trust Association Other -L Year of formation: 1914 M State of legal domicile: NY Part I Summary Briefly describe the organization's mission or most significant activities: TO PROMOTE AND GOVERN SOCCER IN THE UNITED STATES IN ORDER TO MAKE IT THE PREEMINENT SPORT Check this box If the organization discontinued its operations or disposed of more than 25% of its assets. Number of voting members of the governing body (Part VI, line 1a) 16 Number of independent voting members of the governing body (Part VI, line 1b) 15  $\overline{1373}$ Total number of employees (Part V, line 2a) 142 Total number of volunteers (estimate if necessary) 6 Ō. Total gross unrelated business revenue from Part VIII, line 12, column (C) 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 1,226,947. 42,518,207. Contributions and grants (Part VIII, line 1h) 2,196,208. Program service revenue (Part VIII, line 2g) 43,262,289 1,435,695. 3,026,486. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 48,484,983 45,180,849. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 603,211 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 22,701. 14 Benefits paid to or for members (Part IX, column (A), line 4) 12,712,027. 15,899,586. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundralsing fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 30,759,469. 32,850,107. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 44,074,707. 48,772,394. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,410,276. <3,591,545.> 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Year End of Year 67,195,704. 77,407,843. Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 17,7<u>91,</u>057. 16,117,240. 51,078,464. 22 Net assets or fund balances. Subtract line 21 from line 20 59,616,786. Part II | Signature Block Under pholities of periors, bleciare that there 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 piepare Namer than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here DANIEL T. FALYNN Type or print name and litle Date Preparer's identifying number (see instructions) Check if Preparer's Paid employed > signature Preparer's Firm's name (or BLACKMAN KADDLER. LLP EIN > Use Only 10 S. RIVERSIDE PLAZA, 9TH FLOOR CHICAGO, ILLINOIS 60606 Phone no. ► (312) 207-1040 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

	990 (2008) UNITED STATES SOCCER FEDERATION	13-5591991	Page 2
Pai	t III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission:		
	TO PROMOTE AND GOVERN SOCCER IN THE UNITED STATES IN		IT_
	THE PREEMINENT SPORT RECOGNIZED FOR EXCELLENCE IN PA		
	SPECTATOR APPEAL, INTERNATIONAL COMPETITION AND GENI	DER EQUALITY.	
2	Did the organization undertake any significant program services during the year which were not listed or		
2	the prior Form 990 or 990-EZ?		X No
	If "Yes", describe these new services on Schedule O.		21 140
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	ervices?	X No
•	If "Yes", describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program service	es by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am		
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a		1.)(Revenue $$12,792,$	,959.
	YOUTH NATIONAL AND MEN'S AND WOMEN'S NATIONAL TEAM I		
	NATIONAL TEAMS MANAGED BY THE FEDERATION RANGE FROM		
	GIRLS TEAMS TO THE UNDER-23 MEN'S AND WOMEN'S TEAM A WOMEN'S NATIONAL TEAMS. ALL TEAMS PARTICIPATE IN DOM		
	INTERNATIONAL MATCHES.	MESTIC AND	
	INTERNATIONAL MAICHED:		
		<del></del>	
	<del></del>		
			•
			_ <del>_</del>
4b		0.)(Revenue \$ 1,995)	,453.
	REFEREE PROGRAM-TRAINS EXPERIENCED AND NEW REFEREES		
	TECHNIQUES AND RULES OF SOCCER. DEPENDING ON THE CLA		7077
	REFEREES OFFICIATE AT ALL LEVELS OF SOCCER MATCHES INTO PROFESSIONAL INTERNATIONAL SOCCER. THE FEDERATION		
	REGISTERED REFEREES.	TAS OVER 131,	700
	KHOIDIBKED KHIRKEED.		
	<del></del>		
			0.55
4c		0.)(Revenue \$ 1,132	
	COACHING PROGRAM-TRAINS COACHES IN THE LATEST TECHNINDIVIDUALS MAY GAIN CERTIFICATION IN SIX PROGRESSIVE		<u> </u>
	COACHING. THE CURRICULUM FOR THE SIX LEVELS IS AUTHO		
	FEDERATION. THE FEDERATION RUNS SCHOOLS THROUGH OUT		प्रमुक्त व
	A, B AND C LICENSE CERTIFICATIONS. THE STATE ASSOCIA		
	FOR D, E AND F CERTIFICATIONS.		
			<u> </u>
	<del> </del>		
4d	, ,	0.5.00	
	(Expenses \$ 1,242,323 · including grants of \$ ) (Revenue \$ 26,5)		
<u>4e</u>	Total program service expenses ▶ \$ 42,629,482. (Must equal Part IX, Line 25, colu	mn (B).)	

832002 12-18-08

Form **990** (2008)

#### Part IV Checklist of Required Schedules

	,		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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
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 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		<u>x</u> _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	X	<u> </u>
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	X	<del></del>
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes, " complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			٦,
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		<u> </u>
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			<b>.</b>
	located outside the United States? If "Yes," complete Schedule F, Part II	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			7.7
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X -
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		
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	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 III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	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 questions 24b-24d and complete Schedule K.	04.		v
	If "No", go to question 25  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		<u> </u>
b		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	ما		
	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d	<u> </u>	
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	<u> 240</u>		<del>                                     </del>
£Jd	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	2.00	-	<u> </u>
D		25b		x
26	prior year? If "Yes," complete Schedule L, Part I  Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200	├─	<u> </u>
£.U	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial	-20-	<del>                                     </del>	<del>  ^^</del>
_,	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		x
	Contributor, or to a person related to such an individual: II Tes, Complete Scriedule L, Fatt II	-	000	(0000)

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#### Part IV Checklist of Required Schedules (continued)

			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		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a 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	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
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		Х
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		х
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		X

# 008) UNITED STATES SOCCER FEDERATION Statements Regarding Other IRS Filings and Tax Compliance Part V

ta Enter the number reported in Box 3 of Form 1986, Annual Summary and Transmittal of U.S. Information Returns. Enter 0- if not applicable				-		Yes	No	
b Enter the number of Forms W.2G included in line 1a. Enter 0- if not applicable c Did the organization comply with backup withholding rules for reportable paryments to vendors and reportable gamining (gambling) winnings to prize winners?  22 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.  23 In 1373  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  30 Lift the organization in line 1a and 2a is greater than 250, you may be required to e-fife this return, (see instructions)  31 Lift the sum of lines 1a and 2a is greater than 250, you may be required to e-fife this return.  32 Lift Yes, 'has it filed a Form 990-Ti for this year? If 'Mo,' provide an explanation in Schedule 0  33 Lift Yes, 'has it filed a Form 990-Ti for this year? If 'Mo,' provide an explanation in Schedule 0  34 Lan ytime during the calendary 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); a Lift Yes, 'return the name of the foreign country.  35 Lift 'Yes,' return the name of the foreign country.  36 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  38 Lift 'Yes,' to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter Transaction?  39 Lift 'Yes,' to question 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  39 Lift 'Yes,' to did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  40 Lift the organization provide goods or services in exchange for any quid pro quo contribution of more than 575?  41 Lift Yes,' indicate the number of Forms 8282 file	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of						
c Dit the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  2 I 1373  3 If 16 If			1a	392	ļ		ı	
2a 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 last least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return, See instructions)  3b Id 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 0  3b 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 accountly? 4a X  b If Yes, 'has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule 0  4a X the filed of the free free free or 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.  5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a X X  b Id any taxable party notify the organization file Form 886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5b X X  b If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c A X  b If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c A X  b If Yes, 'did the organization include with every solicitation an express attement that such contributions or gifts were not tax deductible?  5c A X  b If Yes, 'did the organizati	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0				
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 1373  b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?  2b X  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)  3a	С			- · · ·				
the for the calendar year ending with or within the year covered by this return.  2 1373  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 1 and 2a is greater than 250, you may be required to e-file this return. (see instructions)  3 b Id the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3 a X If the sum of lines 1 and 2a is greater than 250, you may be required to e-file this return. (see instructions)  3 b If 1 'Yes, 1 and 1 an		(gambling) winnings to prize winners?			1c		<u> </u>	
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Ab Id. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file 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 if filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  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, is the search of the foreign country. If yes," enter the name of the foreign country; is the same and the foreign country of the search of the foreign country. If yes," enter the name of the foreign country. If yes, the search of the foreign country is the search of the search of the foreign country. If yes, the search of the foreign country. If yes, the search of the foreign country is the search of the foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction?  5b X X  b If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5b X X  b If Yes, to question 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Bid the organizations self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8829:  b If Yes, "Indicate the number of Forms 8282 filed during the year  c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization must get any time during the year of the organization for qualified intellectual property, did the organization file Form 8899 as required?  7b X  For all contributions of cars, boats, airplanes, and other vehi	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)  3a bit the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3a bit 1f Yes,* fast filled a Form 990-T for this year? If 1f Yes, provide an explanation in Schedulc 0  3b bif Yes,* sha tiflied a Form 1990-T for this year?  5b if Yes,* sha tiflied a Form 1990-T for this year?  5c est the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial account; see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c If Yes,* to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6c a Did the organization solicit any contributions that were not tax deductible?  6c a Did the organization solicit any contributions under section 170(c).  6c a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7c a X  6c b If Yes,* fid the organization notify the donor of the value of the goods or services provided?  7c b If Yes,* fid the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7a Did the organization for the provide good or services in exchange for any quid pro quo contr		filed for the calendar year ending with or within the year covered by this return	2a	1373				
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If "Yes," has if field a Form 990-T for this year? If "No," "provide an explanation in Schedule O  the 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; ▶  if "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filling requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  b If "Yes," to question a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b X  b Did any taxable party notify the organization file Form 8886-T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6a Did the organization solicit any contributions that were not tax deductible?  6b Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7a X  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  7c X  d If "Yes," inclinate the number of Forms 8282 filed during the year  Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7f X  g For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required?  7h Y  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  2	b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	X		
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  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)?  5b If "Yes," enter the name of the foreign country; ▶  5c See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c If Yes," to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes," do the organization solicit any contributions that were not tax deductible?  5c If Yes," did the organization solicit any contributions that were not tax deductible?  5c If Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c A X  5d If Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c A X  5d If Yes," did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7d A X  5d If Yes," indicate the number of Forms 8282 filed during the year  5d If Yes, indicate the number of Forms 8282 filed during the year  6d If Yes, indicate the number of Forms 8282 filed during the year  6d If Yes, indicate the number of Forms 8282 filed during the year  7d Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7e Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7e Did the organization of qualified intellectual property, did the organization file a Form 1098-C as required?  7f A X  7f Section 501(c)		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instru	ctions)				
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)?  by 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by t	his return?	3a		<u> </u>	
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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?  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter: N/A  Initiation fees and capital contributions included on Part VIII, line 12  B Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Tob  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.)	•							
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9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b X  10 Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b  11 Section 501(c)(12) organizations. Enter: N/A a 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.) 11b					100		٠. , .	
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b X  10 Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b  11 Section 501(c)(12) organizations. Enter: N/A a 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.) 11b			_	·	8		X	
b Did the organization make a distribution to a donor, donor advisor, or related person?  10 Section 501(c)(7) organizations. Enter: N/A  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  11 Section 501(c)(12) organizations. Enter: N/A  a 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.)	9							
10 Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b  11 Section 501(c)(12) organizations. Enter: N/A a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	а	Did the organization make any taxable distributions under section 4966?			9a		X	
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b 11 Section 501(c)(12) organizations. Enter: N/A a 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.)	b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter: N/A  a 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.)  11b	10	Section 501(c)(7) organizations. Enter: N/A		_		T		
11 Section 501(c)(12) organizations. Enter: N/A a 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.)	а	Initiation fees and capital contributions included on Part VIII, line 12	10a		100			
a 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.)	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11	Section 501(c)(12) organizations. Enter: N/A			1		<u></u>	
amounts due or received from them.)			11a		11 .		' '	
	b	Gross income from other sources (Do not net amounts due or paid to other sources against				1		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		* *************************************			ļ		<u> </u>	
. 1			ղ 1041	?	12a		<u> </u>	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b			L	] . ·	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
	Enter the number of voting members that are independent 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	X	
7a				
	governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
	Does the organization have local chapters, branches, or affiliates?	9a		X
	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?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	Ì
11	Is there any officer, director or 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	11		х
Sec	tion B. Policies	_		
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
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	X	
13	Does the organization have a written whistleblower policy?	13	_X	
14	Does the organization have a written document retention and destruction policy?	14	Х	
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:			7.4
а	The organization's CEO, Executive Director, or top management official?	15a	X	
b		15b	X	
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		<u> </u> :	
	taxable entity during the year?	16a		X
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		T
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶IL			
18	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.			
	X Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial	
	statements available to the public.	••••		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:	<b>&gt;</b>	
	ERIC GLEASON, CFO - (312)808-1300			
				_
	1801 S. PRAIRIE AVE, CHICAGO, IL 60616			

12-18-08

# 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. 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.

Check this box if the organization did not co		y of	ficer	_		or, tr	uste			
<b>(A)</b> Name and Title	(B)	<i>'</i>			C)			( <b>D)</b> Reportable	(E)	(F)
Name and Title	Average hours	(cl	Positio (check all that				lv)	compensation	Reportable compensation	Estimated amount of
	per	į.				<del>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </del>		from	from related	other
ļ	week	direct				٦	•	the	organizations	compensation
		10 99	stee			nsate	Ì	organization	(W-2/1099-MISC)	from the
		l trust	를		oyee	ed mo		(W-2/1099-MISC)		organization and related
		individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	퍝	1		organizations
		트	E	5	Ke	물등	호			
SUNIL GULATI										
PRESIDENT	5.00	X	<u> </u>	X	L	<u> </u>		0.	0.	0.
MIKE EDWARDS								_	_	
VICE PRESIDENT	5.00	Х		Х		L.	L_	0.	0.	0.
DR. S. ROBERT CONTIGUGLI								_	_	
PAST PRESIDENT - NON VOT	5.00	X	L		L		_	0.	0.	0.
AMANDA CROMWELL								_	_	_
DIRECTOR - ATHLETIC REP	5.00	X		$oxed{oxed}$	L_	$oxed{oxed}$	L	0.	0.	_ 0.
JON MCCULLOUGH		Ì								
DIRECTOR - ATHLETIC REP	5.00	X	L		L	L_		0.	0.	0.
PETER VERMES	- 00	<sub></sub>								
DIRECTOR - ATHLETIC REP	5.00	X			<u> </u>	_		0.	0.	0.
DON GARBER	<b>5</b> 00		•				1			•
DIRECTOR - PRO COUNCIL R	5.00	Х	_	<u> </u>	<u> </u>	_	├-	0.	0.	0.
KEVIN PAYNE	E 00					1			<u> </u>	0
DIRECTOR - PRO COUNCIL R	5.00	Х	-		⊢	├		0.	0.	0.
BROOKS MCCORMICK	E 00	<b>.</b>						)	0.	•
DIRECTOR - ADULT COUNCIL JIM HAMILTON	5.00	X	⊢	-	┢	-	⊢−	0.		0.
DIRECTOR - ADULT COUNCIL	5.00	x	<b>.</b>					0.	0.	0.
LARRY MONACO	3.00	_	├─		┢	┼	┢	<del></del>		
DIRECTOR - YOUTH COUNCIL	5.00	X			Ì			0.	0.	0.
BOB PALMEIRO	3.00		-		╁	╁	$\vdash$			
DIRECTOR - YOUTH COUNCIL	5.00	x		l				0.	0.	0.
FRANCISCO MARCOS	3.00		├	╁	┢	╁╾				
DIRECTOR - AT LARGE REP	5.00	x				1		0.	0.	0.
CARLOS CORDEIRO	3.00			├	┢╌		┢	<del> </del>		<del>-</del>
DIRECTOR	5.00	x			l			0.	0.	0.
FABIAN NUNEZ				$^{\dagger -}$	$\vdash$	$\vdash$	<del>                                     </del>			
DIRECTOR	5.00	x	1	l			Ì	0.	0.	0.
DONNA SHALALA				T		1		† <u></u>		
DIRECTOR	5.00	x				1		0.	0.	0.
DAN FLYNN			1	$\vdash$		T	1			
CEO _	40.00	L		x		L		544,463.	0.	101,603.

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Part VII Section A. Officers, Directors, To	rustees, Key Eı	nplo	yee	s, a	nd I	High	est	Compensated Employ	ees (continued)	_
(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average hours	(cl	heck		ition that		ıly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W·2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
JAY BERHALTER										
DEPUTY EXEC DIRECTOR	40.00			X				326,305.	0.	23 <u>,64</u> 0.
ERIC GLEASON	40 00			v				10 707	•	2 004
CFO RICHARD MATTHYS	40.00	_	ļ	Х		<b> -</b>		18,707.	0.	2,804.
FORMER CFO	40.00			x				151,215.	0.	15,936.
TIM PINTO					Г	Г				
GENERAL COUNSEL	40.00				Х			180,635.	0.	15,547.
TOM KING MAN DIRECTOR ADMIN	40.00				x			212,862.	0.	23,126.
ROBERT BRADLEY MNT HEAD COACH	40.00				х			499,025.	0.	23,898.
PIOTR NOWAK MNT ASST COACH	40.00				x			230,025.	0.	23,676.
PIA SUNDAGE WNT COACH	40.00				х			257,000.	0.	11,892.
GREG FIKE STAFF ATTORNEY	40.00					x		139,098.	0.	20,949.
PAUL MARSTALLER DIRECTOR OF EVENTS	40.00					х		107,347.		8,452.
1b Total				·····		<b></b>		2,796,155.	0.	292,183.
2 Total number of individuals (including the	aa in 1al uuba ra	~~:.			460	- 41	20	OOO in reportable		

	compensation from the organization	<b>•</b>		11
	<del></del>		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	. 3		X
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 individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to	55.75		
	the organization? If "Yes," complete Schedule J for such person	. 5		Х

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
LATHAM & WATKINS		201 105
PO BOX 894256, LOS ANGELES, CA 90489	LEGAL	301,105
Total number of independent contractors (including those in 1) who re-	ceived more than \$100,000 in compensation	Table 1

om the organization ► 1
SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Pa	rt VII	Statement of Rever	nue			-	-	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines	1b 1c 1d 1d 1tions) 1e 1ts, and 1f 1 1s 1a-1f; \$	226947.				
<u>0</u> <u>0</u>	h	Total. Add lines 1a-1f	<u></u>	<b>)</b>	1,226,947.			
Program Service Revenue	2 a b c d e	SPONSORSHIP  NAT'L TEAM AND  MEMBERSHIP DUES  COACHING SCHOOL  OTHER REVENUE  All other program service rever	INT'L G	Business Code 711300 711210 900099 711300 900099	17531720. 16071465. 7,662,614. 865,878. 385,555. 975.	16071465. 7,662,614. 865,878. 385,555.		
		Total. Add lines 2a-2f			42518207.	to a second		
	3 4 5	Investment income (including other similar amounts) Income from investment of ta	dividends, interes	est, and  oroceeds	1,576,532.			1576532.
	b	Gross Rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	d	Net rental income or (loss) Gross amount from sales of assets other than inventory		(ii) Other				
	C	Less: cost or other basis and sales expenses Gain or (loss)	<140837.	<u> </u>	140 027			1140 927
ļ		Net gain or (loss)		······	<140,837.	P		<140,837.
Other Revenue	8 a	Gross income from fundraisir including \$ contributions reported on line Part IV, line 18	of e 1c). See					
Ę	h	Less: direct expenses			1			
0		Net income or (loss) from fund		<b>&gt;</b>	1	· · · · · ·		
	9 a	Gross income from gaming at Part IV, line 19 Less: direct expenses	ctivities. See					
		Net income or (loss) from gar			<u> </u>	<u> </u>	<u>.</u>	
		Gross sales of inventory, less and allowances	retums			<u>                                     </u>		
		Less: cost of goods sold Net income or (loss) from sale	bes of inventory	<b>•</b>				
		Miscellaneous Revenu	ne	Business Code	·		<del>                                     </del>	·
	11 a				<del> </del>			
	b				<del> </del>	<del></del>		<del> </del>
. 1	c C	All other revenue			<del>                                     </del>		<del> </del>	<del>                                     </del>
	d	All other revenue			<del> </del>	<del></del>		<del>                                     </del>
8320 02-02	12	Total Revenue. Add lines 1h, 2g, 3,			45180849.	42518207.	0.	1435695. Form <b>990</b> (2008)
02-02	-09							1 01111 <b>2 2 2</b> (2000)

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1 (	Grants and other assistance to governments and				
(	organizations in the U.S. See Part IV, line 21	22,701.	22,701.		
2 (	Grants and other assistance to individuals in				_
t	he U.S. See Part IV, line 22				
	Grants and other assistance to governments,				
(	organizations, and individuals outside the U.S.				
;	See Part IV, lines 15 and 16				
	Benefits paid to or for members				
5 (	Compensation of current officers, directors,				
1	rustees, and key employees	1,449,692.		1,449,692.	
	Compensation not included above, to disqualified				
ı	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
, (	Other salaries and wages	12,080,567.	10,555,568.	1,524,999.	
	Pension plan contributions (include section 401(k)				
ä	and section 403(b) employer contributions)				
	Other employee benefits	1,439,127.		100,109.	
	Payroll taxes	930,200.	764,148.	166,052.	
	Fees for services (non-employees):				
a I	Management	250,787.		250,787.	
	_egal	440,330.	271,289.	169,041.	
	Accounting	73,326.	_	73,326.	
	_obbying				
	Professional fundraising services. See Part IV, line 17			100000000000000000000000000000000000000	
f I	nvestment management fees				
g (	Other	5,041,492.		240,944.	
	Advertising and promotion	1,434,265.	1,362,030.	72,235.	
	Office expenses	421,612.	336,906.	84,706.	
	nformation technology	22,984.	22,552.	432.	
	Royalties				
	Occupancy	1,172,511.	965,703.	206,808.	
	Travel	15,115,637.	14,579,371.	536,266.	<u>_</u>
	Payments of travel or entertainment expenses				
1	for any federal, state, or local public officials				
) (	Conferences, conventions, and meetings	2,045,773.	1,580,027.	465,746.	
)	nterest				· <u>-</u>
	Payments to affiliates				
2	Depreciation, depletion, and amortization	393,697.	259,101.	134,596.	
3	nsurance	387,908.	262,298.	125,610.	
	Other expenses. Itemize expenses not covered				Same than the first
ě	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)				
	EQUIPMENT RENTAL AND MA	2,362,357.	2,151,388.	210,969.	-
b :	POSTAGE AND SHIPPING	984,467.	899,528.	84,939.	
c	PRINTING AND PUBLICATIO	448,521.	396,787.	51,734.	
d .	DUES AND SUBSCRIPTIONS	418,456.	397,844.	20,612.	
e	TELEPHONE	349,473.	220,182.	129,291.	_
f	All other expenses	1,486,511.	1,442,493.	44,018.	<del>-</del>
	Total functional expenses. Add lines 1 through 24f	48,772,394.	42,629,482.	6,142,912.	<del>-</del>
_	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			ľ	
	educational campaign and fundraising solicitation	1	1		

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Pai	τX	Balance Sheet								
					(A) Beginning of year		E	( <b>B</b> ) nd of		
	1	Cash - non-interest-bearing				1	_			
	2	Savings and temporary cash investments			2,182,695.	2	4	,21	1,0	53.
	3	Pledges and grants receivable, net		*******************************	5,500,000.	3_				
	4	Accounts receivable, net		3,281,935.	4	3	<del>,</del> 71	5,3	45.	
	5	Receivables from current and former officers, di					_			
		employees, or other related parties. Complete F	Part II of	Schedule L		5				
	6	Receivables from other disqualified persons (as	defined	l under section						
		4958(f)(1)) and persons described in section 49								
		Part II of Schedule L				6	<u> </u>			
ţ	7	Notes and loans receivable, net				7				
Assets	8	Inventories for sale or use				8	<u></u>			
∢	9	Prepaid expenses and deferred charges			790,013.	9		58	2,9	<u>03.</u>
	10a	Land, buildings, and equipment: cost basis	10a	8,191,232.						
	b	Less: accumulated depreciation. Complete					١.			
		Part VI of Schedule D	10b	3,198,988.	5,326,505.			,99		
	11	Investments - publicly traded securities			55,965,920.		48	,67		
	12	Investments - other securities. See Part IV, line			1,078,881.	12		93	7,0	<u>32.</u>
	13	Investments - program-related. See Part IV, line		13						
	14	Intangible assets	2-004-004	14	<b>_</b>		<del></del>			
	15	Other assets. See Part IV, line 11		3,281,894.			,08			
	16	Total assets. Add lines 1 through 15 (must equ			77,407,843.			,19		
	17	Accounts payable and accrued expenses			9,618,850.		<u> </u>	<u>, 8</u> 1	<u> 3,5</u>	89.
	18	Grants payable		0 170 007	18	6	20	<del>2                                    </del>	<u> </u>	
	19	Deferred revenue	8,172,207.	1	<u> </u>	, 30	<u>3,0</u>	<u> 51</u> .		
	20	Tax-exempt bond liabilities		20	<u> </u>					
Liabilities	21	Escrow account liability. Complete Part IV of Sc			21	<u> </u>		<del></del>		
Ē	22	Payables to current and former officers, directo highest compensated employees, and disqualif								
Ľ		of Oak a shall 1		22						
	23	Secured mortgages and notes payable to unrel			<del></del>	23	<del>                                     </del>			
	24			u parties		24	├			
	25	Other liabilities. Complete Part X of Schedule D				25				
	26	Total liabilities. Add lines 17 through 25			17,791,057.		16	,11	7.2	40.
		Organizations that follow SFAS 117, check h						1.7	- <del>/ -</del>	
es		lines 27 through 29, and lines 33 and 34.					1	,	٠.	
nce	27	Unrestricted net assets			54,116,786.	27	51	,07	8,4	64
ala	28	Temporarily restricted net assets			5,500,000.	28				0.
Ē	29			······		29				
Ę		Organizations that do not follow SFAS 117, or				14 JA	ā.+. ÷			1
₽		complete lines 30 through 34.			The second secon					٠.
ets	30	Capital stock or trust principal, or current funds	·			30				
Net Assets or Fund Balanc	31	Paid-in or capital surplus, or land, building, or e	quipmer	nt fund		31				
et/	32	Retained earnings, endowment, accumulated in	ncome, d	or other funds		32				
Z	33	Total net assets or fund balances			59,616,786.			.,07		
_	34	Total liabilities and net assets/fund balances .			77,407,843.	34	67	,19	<u>5,7</u>	04
Pa	<u>rt XI</u>	Financial Statements and Reporting	3						V	<del></del>
			_						Yes	No
1		ounting method used to prepare the Form 990:			_ Other			*	<u> </u>	<u> </u>
2a		e the organization's financial statements compile						2a		X
		e the organization's financial statements audited						2b	X	↓
С		es" to lines 2a or 2b, does the organization have			· -				ĺ	,,
_		ew, or compilation of its financial statements and						2c	├—	X
3a		result of a federal award, was the organization re				-			İ	~
1-		and OMB Circular A-133?						3a	<del> </del>	X

832011 12-18-08

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

	UNITED STATES SOCCER FEDERATION 13-5591991											
Part I	Reason	for Public Char	<b>ity Status</b> (All organi	zations mu:	st complet	e this part	.) (see ins	tructions)				
The organ	ization is not a	a private foundation	because it is: (Please ch	neck only <b>o</b>	<b>ne</b> organiz	ation.)						
1 🔲	A church, co	nvention of churches	s, or association of chui	rche <b>s</b> desci	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	<b>0(b)(1)(A)(ii).</b> (Attach So	chedule E.)								
з 🔲			tal service organization		in <b>section</b>	170(b)(1)(	<b>A)(iii).</b> (At	tach Sche	dule H.)			
4 🔲	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter th	e hospital	's nam	ie,
	city, and stat				•					•		
5 🗌	An organizati	on operated for the	benefit of a college or u	niversity ov	vned or or	erated by	a governi	nental uni	t described	d in		
	=	(b)(1)(A)(iv). (Comple	_	-	•	•	_					
6 🗀	A federal, sta	ite, or local governm	ent or governmental un	it described	d in sectio	n 170(b)(1	)(A)(v).					
7								r from the	general pu	ublic desc	ribed i	n
	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)											
8 🗌	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9 X			eives: (1) more than 33		· · ·	rom contri	butions, n	nembershi	p fees, and	d gross red	ceipts	from
	_		nctions - subject to cert							_		
	income and u	unrelated business t	axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization af	ter June 3	0, 197	<b>'</b> 5.
	See section 509(a)(2). (Complete the Part III.)											
10 🔲	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)											
11 🔲	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or											
	more publicly	supported organiza	ations described in sect	ion 509(a)( <sup>-</sup>	1) or section	on 509(a)(2	2). See <b>se</b> c	tion 509(a	a)(3). Chec	k the box	that	
	describes the type of supporting organization and complete lines 11e through 11h.											
	a Type I b Type II c Type III - Functionally integrated d Type III - Other											
е 🔲	By checking	this box, I certify tha	at the organization is no	t controlled	directly o	r indirectly	by one o	r more disc	qualified p	ersons oth	ner tha	ın
	foundation m	nanagers and other t	han one or more public	ly supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or se	ection 509	a)(2).	
f	If the organiz	ation received a writ	ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check th	nis box									
g	Since Augus	t 17, 2006, has the o	organization accepted a									
	(i) A perso	n who directly or ind	lirectly controls, either a	lone or tog	ether with	persons o	lescribed	in (ii) and (	iii) below,		Yes	No
	the gov	erning body of the s	upported organization?					••••		11g(i)		
	(ii) A family	member of a persor	n described in (i) above'	?						11g(ii)		
	(iii) A 35%	controlled entity of a	person described in (i)	or (ii) above	∍?					11g(iii)		L
h	Provide the f	ollowing information	about the organization	s the organ	ization su	oports.						
									_			
(i) Name	of supported	(ii) EIN	(iii) Type of		rganization			(vi) Is	the	(vii) An	nount o	ıf
	anization	''	organization (described on lines 1-9	in col. (i) lis				organizátic (i) organiz U.S	ed in the		port	
			above or IRC section		document?		support?					
			(see instructions))	Yes	No	Yes	No	Yes	No			
				Į.								
				<u> </u>								
			<u> </u>									
				<del>                                     </del>					+-+			
				<u> </u>								
				1.			· .					

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

	dule A (Form 990 or 990-EZ) 2008	<del></del>	<del></del>	* ··	#		Page 2		
Pai				Sections 170	b)(1)(A)(iv) and	d 170(b)(1)(A)(v	i)		
500	(Complete only if you checked tion A. Public Support	a the box on line 5	, 7, or 8 of Part I.)				<del></del>		
	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(a) 2006	(d) 2007	(a) 2009	(f) Total		
	Gifts, grants, contributions, and	(a) 2004	(b) 2005	(c) 2006	(a) 2007	(e) 2008	(I) Total		
	membership fees received. (Do not	•				Ĭ			
	include any "unusual grants.")								
	Tax revenues levied for the organ-		_	-					
	ization's benefit and either paid to								
	or expended on its behalf								
	The value of services or facilities								
_	furnished by a governmental unit to								
	the organization without charge								
	Total. Add lines 1 - 3				_				
	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included	· I							
	on line 1 that exceeds 2% of the								
	amount shown on line 11,		- "			,			
	column (f)	· ·							
	Public Support. Subtract line 5 from line 4.	<u> </u>	11.5						
Sec	tion B. Total Support	<del>-</del>					<del></del>		
	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	<b>(f)</b> Total		
7	Amounts from line 4								
	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources		_						
	Net income from unrelated business								
	activities, whether or not the					,			
	business is regularly carried on			<del>_</del>					
	Other income. Do not include gain or loss from the sale of capital			'					
	assets (Explain in Part IV.)	}	li						
	Total support. Add lines 7 through 10			,		• .			
	Gross receipts from related activities.	etc (see instruction		<u> </u>		12			
	First five years. If the Form 990 is fo		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	d fourth or fifth ta	av vear as a sectio				
	organization, check this box and stop				-		▶		
Sec	tion C. Computation of Pub	ic Support Pe	rcentage			<u></u>	<u>, ,</u>		
14	Public support percentage for 2008 (	line 6, column (f) d	ivided by line 11, o	column (f))		14	- %		
15	Public support percentage from 2007	7 Schedule A, Part	IV-A, line 26f	• • • • • • • • • • • • • • • • • • • •		15_	%		
16a	33 1/3% support test - 2008. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	x and		
	stop here. The organization qualifies	as a publicly supp	orted organization	ı			▶□		
	33 1/3% support test - 2007. If the	_							
	and stop here. The organization qua								
	17a 10% ~facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,								
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization								
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
	b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or								
	more, and if the organization meets t								
	organization meets the "facts-and-cir								
10	Private foundation. If the organization	on the Hot check a	DOX OIT HITE 13, 16	a, 100, 17a, 0f 17k		and see instruction edule A (Form 990			

Schedule A (Form 990 or 990-EZ) 2008 UNITED STATES SOCCER FEDERATION 13-5591991 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 8889561.52606386. include any "unusual grants.") 7894865. 9026757.17114941. 9680262. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 27267761.|28020153.|37637354.|35528358.|34855593.|163309219 organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 35162626.37046910.54752295.45208620.43745154.2159156056 Total. Add lines 1 - 5 ..... 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 215915605 8 Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (f) Total 9 Amounts from line 6 ..... 35162626. 37046910.54752295.45208620.43745154.215915605 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 517,473. 1157964 1838763 3026486. 1435695. 7976381. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 517,473. 1157964. 1838763 3026486. 1435695 7976381. c Add lines 10a and 10b ..... 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on 12 Other income. Do not include gain

	assets (Explain in Part IV.)	83,676.	146,758.	471,903.	249,877.		952,214.
13	Total support (Add lines 9, 10c, 11, and 12.)	Ass. 1	in Marinet strip and	Sept.	State Burnier Die	1 - 31, 31,	224844200
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) or	ganization,
	check this box and stop here			<u></u>	<u></u>		<b>&gt;</b>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2008 (		15	96.03 %			
16	Public support percentage from 2007		16	96.97 %			
Se	ction D. Computation of Inves	stment Incom	e Percentage				_
17	Investment income percentage for 20	108 (line 10c, colur	mn (f) divided by lin	e 13, column (f))	,.,	17	3.55 %
18	Investment income percentage from	2007 Schedule A,	Part IV-A, line 27h		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	18	2.54 %
198	a 33 1/3% support tests - 2008. If the	organization did r	not check the box o	on line 14, and line	e 15 is more than 3	33 1/3%, and	ine 17 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization quali	fies as a publicly :	supported organiz	ation	<b>▶</b> X
t	33 1/3% support tests - 2007. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3	3%, and
	line 18 is not more than 33 1/3%, che	eck this box and <b>s</b>	top here. The orga	nization qualifies	as a publicly supp	orted organiza	ation
20	Private foundation. If the organization	on did not check a	box on line 14, 19a	a, or 19b, check ti	his box and see in:	structions	

Schedule A (Form 990 or 990-EZ) 2008

#### Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization

**Employer identification number** 

13-5591991 UNITED STATES SOCCER FEDERATION Organization type (check one): Filers of: Section: X 501(c)( 3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.) **General Rule** For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to

Name of organization

Employer identification number

## UNITED STATES SOCCER FEDERATION

13-5591991

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	COMBINED FEDERAL CAMPAIGN MAGUIRE/MAGUIRE, INC. 11 LARKSPUR LANDING, STE 340  LAKSPUR, CA 93939	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	FIFA PO BOX 8044 STRASSE 20, ZURICH, SWITZERLAND	\$\$	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	UNITED STATES OLYMPIC COMMITTEE  1 OLYMPIC PLAZA  COLORADO SPRINGS, CO 80909	\$898,125.	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	UNITED STATES OLYMPIC COMMITTEE  1 OLYMPIC PLAZA  COLORADO SPRINGS, CO 80909	\$\$8,505.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

# UNITED STATES SOCCER FEDERATION

13-5591991

Part II	Noncash Property (see instructions)	<del></del>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	UNITED AIRLINES AIRFARE AT MARKET COST	\$58,505.	08/31/08
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	190, 990-EZ, or 990-PF) (20

# Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

UNITED STATES SOCCER FEDERATION

Employer identification number 13-5591991

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the							
	organization answered "Yes" to Form 990, Part IV, line									
		(a) Donor advised funds	(b) Funds and other accounts							
1	Total number at end of year									
2	Aggregate contributions to (during year)									
3	Aggregate grants from (during year)									
4	Aggregate value at end of year									
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds							
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No							
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds may be	e used only							
	for charitable purposes and not for the benefit of the donor of	or donor advisor or other impermissible pr	rivate benefit? Yes No							
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, I	Part IV, line 7.							
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).								
	Preservation of land for public use (e.g., recreation or p	pleasure) Preservation of an his	storically important land area							
	Protection of natural habitat	Preservation of certif	ied historic structure							
	Preservation of open space									
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a cor	nservation easement on the last day							
	of the tax year.									
			Held at the End of the Year							
а	Total number of conservation easements		2a							
b	Total acreage restricted by conservation easements									
C	Number of conservation easements on a certified historic str									
d	Number of conservation easements included in (c) acquired	2d								
3										
	year ▶									
4	Number of states where property subject to conservation ea	asement is located >								
5	Does the organization have a written policy regarding the pe									
	enforcement of the conservation easements it holds?									
6	Staff or volunteer hours devoted to monitoring, inspecting, a									
7	Amount of expenses incurred in monitoring, inspecting, and									
8	Does each conservation easement reported on line 2(d) about	·								
	and section 170(h)(4)(B)(ii)?									
9	In Part XIV, describe how the organization reports conservat									
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes	s the organization's accounting for							
TE	conservation easements.	CALLES TO THE COLUMN	Nils and Charles Assessed							
Pa	rt III Organizations Maintaining Collections o	· · · · · · · · · · · · · · · · · · ·	Jiner Similar Assets.							
	Complete if the organization answered "Yes" to Form	1990, Fait IV, life 6.								
4_	If the automination closed as neglected under CEAC 44C m.		المدنن على مساوم على مراسون على مساوم							
та	If the organization elected, as permitted under SFAS 116, no	-								
	treasures, or other similar assets held for public exhibition, e		ublic service, provide, in Part XIV, the text of							
	the footnote to its financial statements that describes these									
D	If the organization elected, as permitted under SFAS 116, to	•	· · · · · · · · · · · · · · · · · · ·							
	or other similar assets held for public exhibition, education,	or research in furtherance of public service	e, provide the following amounts relating to							
	these items:		<b>.</b> .							
	(i) Revenues included in Form 990, Part VIII, line 1									
_										
2	If the organization received or held works of art, historical tre	·	al gain, provide							
	the following amounts required to be reported under SFAS 1	•	<b>.</b> .							
а	Revenues included in Form 990, Part VIII, line 1									
b	Assets included in Form 990, Part X		🕨 \$							

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Schedule D (Form 990) 2008

Par	t III Organizations Maintaining Co	llections of A	rt, Historical Tr	easures, o	Oth	er Simi	lar Asse	<b>ts</b> (conti	nued)		
3	Using the organization's accession and other r								_		
	that apply):										
а	Public exhibition	c	I Loan or exc	hange progran	ns						
b	Scholarly research	e									
С	Preservation for future generations							_			
4	Provide a description of the organization's colle	ections and explai	in how they further t	he organization	n's exe	empt purp	ose in Par	t XIV.			
5	During the year, did the organization solicit or i										
	to be sold to raise funds rather than to be main	ntained as part of	the organization's c	ollection?				Yes		No	
Par	Trust, Escrow and Custodial A reported an amount on Form 990, Part		. Complete if organ	ization answer	ed "Ye	es" to For	m 990, Par	t IV, line 9	e, or		
1a	Is the organization an agent, trustee, custodiar	n or other interme	diary for contribution	ns or other ass	ets no	t included		-			
	on Form 990, Part X?		-					Yes		No	
b	If "Yes," explain the arrangement in Part XIV ar										
		•	ŭ			1		Amount			
С	Beginning balance					1c					
d	Additions during the year						<del> </del>	_			
	Distributions during the year									-	
f	Ending balance										
2a	Did the organization include an amount on For	m 990, Part X, line	21?			···· <u> </u>		Yes		No	
	b If "Yes," explain the arrangement in Part XIV.										
	t V Endowment Funds. Complete if of	organization answ	ered "Yes" to Form	990, Part IV, lir	ne 10.						
		(a) Current year	(b) Prior year	(c) Two years	back	(d) Three	years back	(e) Four	years	back	
1a	Beginning of year balance		4 4 4 5 1 5 1		7						
b	Contributions								1 7		
С	Investment earnings or losses										
d											
е	Other expenditures for facilities			1.				_	_		
	and programs				-						
f	Administrative expenses									_	
g	End of year balance			t							
2	Provide the estimated percentage of the year	end balance held	as:	<del></del>	_						
- а	Board designated or quasi-endowment		%								
	Permanent endowment		<b>_</b> ^								
	Term endowment ▶ %										
	Are there endowment funds not in the possess		ration that are held a	and administer	ed for	the organ	ization				
-	by:	o o. ga		arra darriii ilotoi	04.0.	and organ		Г	Yes	No	
	(i) unrelated organizations							3a(i)		-110	
	(ii) related organizations										
b	If "Yes" to 3a(ii), are the related organizations	listed as required	on Schedule R?					3b			
4	Describe in Part XIV the intended uses of the			•••••		••••••			-		
_	t VI Investments - Land, Buildings			). Part X. line 1	0.						
	Description of investment	(a) Cost or o		t or other		Depreciat	ion	(d) Boo	k valu	<u>е</u>	
		basis (invest	1 , ,	(other)	(-).	p. 00.00		,_,		-	
1a	Land	<del>                                     </del>		<del>  </del>							
b	Buildings		6.45	52,165.	1.	516,	501.	4,93	5.5	64.	
	Leasehold improvements							_,,,,,	_,_	•	
	Equipment		-				-				
	Other		1.73	39,067.	1.	682,3	387.	5	6.6	80.	
	I. Add lines 1a-1e. (Column (d) should equal For			<u> </u>	-			4,99			
. 5.0		300, 1 411 11, 001	(2),0 10(0).)		<u></u>		Schedule				

Part VII Investments - Other Securities. S	ee Form 990, Part X, line	12.		<del>_</del>
(a) Description of security or category	(b) Book value		(c) Method of valuat	
(including name of security)			ost or end-of-year mark	et value
Financial derivatives and other financial products				
Closely-held equity interests				
Other			_	
	<del> </del>			
	<del> </del>			
	<del> </del>			
<del></del>	<del> </del>	<del></del>		
	<del>                                      </del>	<del></del>		<del></del>
	<del> </del>	<del></del>		
	<del> </del>	_		
	<del> </del>	<del>-</del>		<del> </del>
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)			<del></del> _	
Part VIII Investments - Program Related.		 e 13		<del></del>
	(b) Book value	<u> </u>	(c) Method of valuat	ion:
(a) Description of investment type	(b) Book value		Cost or end-of-year mark	
	<del>                                     </del>	<del></del>		
<del></del>	<del>                                     </del>		<del>,                                    </del>	
	<del>  -</del>	<del></del>		
				-
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)		* ,		
Part IX Other Assets. See Form 990, Part X, lir		_ <del>_</del>	<del></del>	(b) Book value
	a) Description			
LONG TERM PREPAID ASSETS				4,082,529.
	_ <del>_</del>	<u> </u>		<del></del>
				<del></del>
			<del></del>	
·	<del></del>	<del></del>	<del></del>	
				<del></del>
		<del>-</del>		<del></del>
Total. (Column (b) should equal Form 990, Part X, col (B)	line 15.)		<b>&gt;</b>	4,082,529.
Part X Other Liabilities. See Form 990, Part 3	K, line 25.			
(a) Description of liability		(b) Amount		
Federal income taxes				
				San
			<b>_</b>	
Total, (Column (b) should equal Form 990, Part X, col (B)	line 25 )		1 · · · · · · · · · · · · · · · · · · ·	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 832053 12-23-08

#### Schedule F (Form 990)

# **Statement of Activities Outside the United States**

► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

UNITED STATES S	ארכיבא הב	ΠΕΡΔΠΤΟΝ			13-559199	11
			tside the United States. Comp	lete if the organ		
to Form 990, Pai	rt IV, line 14b.					
			ds to substantiate the amount of the question criteria used to award the g	•		Yes No
2 For grantmakers. Desc	cribe in Part IV th	e organization's	procedures for monitoring the use of	grant funds out	side the United Sta	ites.
3 Activities per Region. (L	Jse Schedule F-1	(Form 990) if ac	ditional space is needed.)		_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	is a prog describe	ity listed in (d) gram service, specific type e(s) in region	(f) Total expenditures in region
			MALE NATIONAL TEAM GAMES	MEN'S NATIO	NAL TEAM	
EUROPE	0	0	AGAINST SPAIN AND ENGLAND	PROGRAMS		844,170.
		<u> </u>				
					<u> </u>	
	-				_ <del></del>	
Totals   HA For Privacy Act and P	aperwork Reduc	etion Act Notice	e, see the Instructions for Form 990.		Schedule F	844,170. (Form 990) 2008

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any											
			o one recipient received more	than \$5,000	•			▶ □			
	1 (Form 990) if additi	ional space is needed.	<del></del>			1		1			
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM\ appraisal, other)			
		_									
	· · · · · · · · · · · · · · · · · · ·										
		<del>_</del>									
	:										
	j.										
			S.								
2 Enter total number of	organizations that	a rangerizad on aboutte	by the foreign as when a fee	which the court	oo or courselles ==	ovidad a					
section 501(c)(3) equiv	valency letter		s by the foreign country or for			<b>.</b> _					
3 Enter total number of	otner organizations o	or entitles	<u></u>		······································	<u> </u>		ule E (Eorm 990) 2009			

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash disbursement non-cash assistance cash grant non-cash assistance

#### SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations,

Governments, and Individuals in the U.S.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service		Open to Public Inspection						
Name of the organizat	UNITED ST		CER FEDERATI	ON				Employer identification number 13-5591991
Part I General Ir	nformation on Grants a	and Assistance						
criteria used to a  2 Describe in Part	zation maintain records award the grants or ass IV the organization's pr	istance? ocedures for mon	itoring the use of grant	funds in the Unite	d States.			Yes X No
	d Other Assistance to							
1 (a) Name and ac	hat received more than ddress of organization vernment	\$5,000. Check the (b) EIN	is box if no one recipies  (c) IRC section  if applicable	nt received more the contract (d) Amount of cash grant	nan \$5,000. Use F (e) Amount of non-cash assistance	Part IV and Schedule I- (f) Method of valuation (book, FMV, appraisal, other)	1 (Form 990) if addition (g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMENS SPORTS FOU	NDATION	23-7380557	501(C)(3)	15,000.	0.			TABLE AT A FUNDRAISER
							_	
	per of section 501(c)(3) a		rganizations					

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  Use Schedule I-1 (Form 990) if additional space is needed.										
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance					
		<u> </u>								
	_									
Part IV Supplemental Information. Complete this part to provi	de the information	n required in Part I,	line 2, and any other	additional information.						
<del></del>			_							
	_									

#### SCHEDULE J (Form 990)

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2008

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

Name of the organization

**Questions Regarding Compensation** 

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

UNITED STATES SOCCER FEDERATION

Employer identification number 13-5591991

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	Ì		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)		,	
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision		'	
	of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	_	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.		· 	
	X Compensation committee X Written employment contract		-	<b> </b>
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee		ľ	
		,		Ì
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:		*	
а	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.		,	,
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	'		
а	The organization?	5a		Х
	Any related organization?	5b		X
	If "Yes," to line 5a or 5b, describe in Part III.	80.0		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		1	w
	contingent on the net earnings of:			
а	The organization?	<b>6</b> a		X
	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.		•	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of \	N-2 and/or 1099-MIS	SC compensation	(C)	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	(i)	544,463.	0.	0.	90,203.	11,400.	646,066.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	326,305.	0.	0.	6,900.	16,740.	349,945.	0.
JAY BERHALTER	(ii)	0.	0.	0.	0.	0.	0.	0.
D.T.G.113 DD. 143 EMY114	(i)	151,215.	0.	0.	4,536.	11,400.	167,151.	0.
RICHARD MATTHYS	(ii)	0.	0.	0.	0.	0.	0.	0.
MTM DINMO	(i)	180,635.	0.	0.	5,419.	10,128.	196,182.	0.
	(ii)	212,862.	0.	0.	6,386.	16,740.	<u>0.</u> 235,988.	0.
	(i) (ii)	0.	0.	0.	0,300.	10,740.	235,366.	0.
	(i)	499,025.	0.	0.	6,900.	16,998.	522,923.	0.
	(ii)	0.	<del></del> 0.	0.	0,500.	0.	0.	0.
	(i)	230,025.	0.	0.	6,900.	16,776.	253,701.	0.
PIOTR NOWAK	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	257,000.	- 0.	0.	6,900.	4,992.	268,892.	0.
PIA SUNDAGE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	139,098.	0.	0.	4,173.	16,776.	160,047.	0.
GREG FIKE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	129,473.	0.	0.	3,884.	16,776.	150,133.	0.
THOMAS RONGEN	(ii)	0.	0.	0.	0.	0.)	0.	0.
	(i)							
	(ii)							
	(i)	_						
	(ii)							
	(i) (ii)		+					
	(i)					-		
	(ii)				-			
	(i)							_
	(ii)			-				
	(i)				İ			
	(ii)						_	

# SCHEDULE J-2 (Form 990)

Department of the Treasury Internal Revenue Service

# **Continuation Sheet for Form 990**

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

2008
Open to Public Inspection

Name of the Organization

Employer Identification number

UNITED S'									13-559	
Part I Continuation of Officers, D		ust	tee			En	ıple			
(A) <sub>.</sub>	(B)				<b>C)</b>			(D)	(E)	(F)
Name and Title	Average	,_,		Posi			. ii.	Reportable	Reportable	Estimated
	hours per	(C	neci	( all '	tnat	app	iy)	compensation from	compensation from related	amount of other
	week		ļ			gg Qg		the	organizations	compensation
		ctor		ļ		nploy		organization	(W-2/1099-MISC)	from the
		or dire			1	led el		(W-2/1099-MISC)		organization
		stee (	truste			bensa				and related
		ual fru	ional		ploye	t co				organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	<b>Former</b>			
THOMAS RONGEN		<u> </u>		L	<u> </u>	Ε.	-			
U-20M HEAD COACH	40.00					x		129,473.	0.	20,660.
o zon mad coach	40.00	┢	-			<u> </u>		129,475.		20,000.
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

#### SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

# **NonCash Contributions**

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

**2008** 

Open to Public Inspection

Employer identification number 13-5591991

Name of the organization

UNITED STATES SOCCER FEDERATION

Par	t I Types of Property	_		<del></del>				
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of dete revenue		9	
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications						_	
5	Clothing and household goods							
6	Cars and other vehicles	_					_	
7	Boats and planes					_		
8	Intellectual property							
9	Securities - Publicly traded	_	<del></del>					
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution				_			
	(historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles				-			
19	Food inventory				_			
20	Drugs and medical supplies	_			_			
21	Taxidermy							
22	Historical artifacts					_	-	
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶ (AIR TICKETS -)	X	1	58,505.	FAIR MAKRET V	7ALU	E	
26	Other ( )							
27	Other ( )							
28	Other ( )	_		_				
29	Number of Forms 8283 received by the organ	ization durin	g the tax year	for contributions				
	for which the organization completed Form 82	283, Part IV,	Donee Acknow	wledgment 29				
							Yes	No
30a	During the year, did the organization receive b	y contributi	on any propert	ty reported in Part I, lines 1-2	8 that it must hold for			: 1
	at least three years from the date of the initial	contribution	n, and which is	not required to be used for	exempt purposes for	. :		
	the entire holding period?			***************************************		<b>30</b> a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that i	equires the re	view of any non-standard co	ntributions?	31	X	
32a	Does the organization hire or use third parties							
	contributions?		•			32a		Х
b	If "Yes," describe in Part II.							
33	If the organization did not report revenues in o	column (c) fo	or a type of pro	perty for which column (a) is	checked,	{		
	describe in Part II.					1		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2008

### SCHEDULE O

(Form 990)

# **Supplemental Information to Form 990**

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

UNITED STATES SOCCER FEDERATION

Employer identification number 13-5591991

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
RECOGNIZED FOR EXCELLENCE IN PARTICIPATION, SPECTATOR APPEAL,
INTERNATIONAL COMPETITION AND GENDER EQUALITY.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
OTHER INCLUDES OPEN CUP AND OTHER PROGRAM RELATED EXPENSES.
EXPENSES \$ 1242323. INCLUDING GRANTS OF \$ 0. REVENUE \$ 26596827.
FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERSHIP OF THE FEDERATION IS
OPEN TO ALL SOCCER ORGANIZATIONS AND ALL SOCCER PLAYERS, COACHES, TRAINERS,
MANAGERS, ADMINISTRATORS AND OFFICIALS WITHOUT DISCRIMINATION ON THE BASIS
OF RACE, COLOR, RELIGION, AGE, SEX, OR NATIONAL ORIGIN.
THE FEDERATION HAS THE FOLLOWING CATEGORIES OF MEMBERSHIP:
(1) ORGANIZATION MEMBER COMPOSED OF THE FOLLOWING CLASSIFICATIONS OF
MEMBERS:
(A) ASSOCIATE.
(B) DISABLED SERVICE ORGANIZATION.
(C) INDOOR PROFESSIONAL LEAGUE.
(D) NATIONAL AFFILIATE.
(E) NATIONAL ASSOCIATION.
(F) NATIONAL MEMBER.
(G) OTHER AFFILIATE.
(H) PROFESSIONAL LEAGUE.
(I) STATE ASSOCIATION.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

AN ORGANIZATION DESIRING TO BECOME AN ORGANIZATION MEMBER OF THE FEDERATION

MUST SUBMIT A WRITTEN APPLICATION FOR MEMBERSHIP TO THE SECRETARY GENERAL.

2008
Open to Public Inspection

N	lame	of	the	organization
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UNITED STATES SOCCER FEDERATION

Employer identification number 13-5591991

(2) LIFE MEMBER.

(3) INDIVIDUAL SUSTAINING MEMBER

THE APPLICANT SHALL SPECIFY THE CATEGORY OF ORGANIZATION MEMBER BEING APPLIED FOR AND, IF APPLYING TO BE A NATIONAL ASSOCIATION, THE YOUTH OR ADULT COUNCIL THE APPLICANT INTENDS TO JOIN. THE APPLICANT SHALL INCLUDE WITH THE APPLICATION COPIES OF ITS CHARTER OR ARTICLES OF INCORPORATION, BYLAWS, RULES, REGULATIONS, ANY RULES OF PLAY, AND OTHER GOVERNING DOCUMENTS APPROPRIATE TO UNDERSTANDING THE STRUCTURE AND ACTIVITIES OF THE ORGANIZATION. THE SECRETARY GENERAL SHALL PRESCRIBE THE NUMBER OF COPIES OF EACH DOCUMENT TO BE SUBMITTED. THE SECRETARY GENERAL SHALL REFER AN APPLICATION TO BE AN ORGANIZATION MEMBER TO THE BOARD OF DIRECTORS FOR CONSIDERATION. THE BOARD SHALL SUBMIT THE APPLICATION AND ACCOMPANYING DOCUMENTS TO THE APPROPRIATE COMMITTEE OR COMMITTEES OF THE FEDERATION FOR REVIEW AND REPORT. THE BOARD SHALL DETERMINE WHETHER THE APPLICANT COMPLIES WITH THE BYLAWS, POLICIES AND REQUIREMENTS OF THE FEDERATION FOR THE MEMBERSHIP CATEGORY APPLIED FOR. IF THE APPLICANT DOES COMPLY, THE BOARD MAY (1) ADMIT THE APPLICANT TO PROVISIONAL MEMBERSHIP IN THE FEDERATION UNTIL THE NEXT MEETING OF THE NATIONAL COUNCIL THAT THE APPLICATION CAN BE CONSIDERED AND RECOMMEND THAT THE APPLICANT BE ADMITTED INTO FULL MEMBERSHIP OF THE FEDERATION, OR (2) THE NATIONAL COUNCIL HAS DELEGATED TO THE BOARD AUTHORITY TO APPROVE AN APPLICATION, ADMIT THE APPLICANT TO FULL MEMBERSHIP IN THE FEDERATION. IF LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

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iname of the organization	UNITED STATES	SOCCER FEDERA	ATION	13-5591991
APPLICANT DOES 1	NOT COMPLY, THE	BOARD SHALL	RECOMMEND TO T	HE NATIONAL
COUNCIL THAT THE	E APPLICANT NOT	BE APPROVED	FOR MEMBERSHIP	IN THE
FEDERATION. THI	E NATIONAL COUN	CIL OR BOARD	SHALL ADMIT AN	APPLICANT INTO
FULL MEMBERSHIP	OF THE FEDERAT	ION BY MAJOR	TY VOTE. PROV	ISIONAL MEMBERSHIP
OF AN APPLICANT	IS TERMINATED	IF THE NATION	NAL COUNCIL DOE	S NOT APPROVE THE
APPLICANT FOR FU	ULL MEMBERSHIP	AT THAT NEXT	COUNCIL MEETIN	G.
				-
LIFE MEMBERS				
A MEMBER ELIGIBLE TO VOTE AT THE NATIONAL COUNCIL MAY NOMINATE AN				
INDIVIDUAL TO B	E A LIFE MEMBER	OF THE FEDER	RATION. THE NOM	INATION MUST BE
SUBMITTED IN WR	ITING TO THE SE	CRETARY GENER	RAL AT LEAST 12	0 DAYS BEFORE THE
NATIONAL COUNCIL	L MEETING AT WH	ICH THE NOMIN	NATION IS TO BE	CONSIDERED. THE
NOMINATION SHALL	L BE INCLUDED I	N THE MEETING	G NOTICE SENT C	UT BY THE
SECRETARY GENERA	AL ABOUT THE ME	ETING.		
			<del></del>	

A MAJORITY VOTE OF THE NATIONAL COUNCIL SHALL BE REQUIRED TO GRANT LIFE MEMBERSHIP TO AN INDIVIDUAL NOMINATED UNDER SECTION 1 OF THIS BYLAW. LIFE MEMBER ONLY HAS VOTING RIGHTS AS PROVIDED AT NATIONAL COUNCIL MEETINGS AND HAS NO OTHER VOTING OR REPRESENTATIONAL RIGHTS RELATED TO THE ACTIVITIES AND PROGRAMS OF THE FEDERATION.

INDIVIDUAL SUSTAINING MEMBER

INCLUDING ANY ATHLETE, TRAINER, MANAGER, ADMINISTRATOR AND ANY INDIVIDUAL, OFFICIAL ACTIVE IN SOCCER IN THE UNITED STATES MAY BECOME AN INDIVIDUAL LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

#### **SCHEDULE O**

(Form 990)

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UNITED STATES SOCCER FEDERATION

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ONTIED STATES SOCCER FEDERATION 13-3391991
SUSTAINING MEMBER OF THE FEDERATION. THE BOARD OF DIRECTORS SHALL PRESCRIBE
PROCEDURES FOR BECOMING AN INDIVIDUAL SUSTAINING MEMBER AND THE DUES AND
BENEFITS OF MEMBERSHIP.
AN INDIVIDUAL SUSTAINING MEMBER SHALL HAVE NO VOTING OR OTHER
REPRESENTATIONAL RIGHTS IN THE FEDERATION.
FORM 990, PART VI, SECTION A, LINE 7A: SECTION 1
THE NATIONAL COUNCIL SHALL BE THE REPRESENTATIVE MEMBERSHIP BODY OF THE
FEDERATION AND HAVE THE FOLLOWING AUTHORITY:
(1) THE ELECTION OF THE PRESIDENT AND VICE PRESIDENT OF THE FEDERATION.
(2) THE ADOPTION OF AMENDMENTS TO THE ARTICLES OF INCORPORATION AND BYLAWS
OF THE FEDERATION.
(3) APPROVING THE BUDGETS OF THE FEDERATION, INCLUDING BUDGETS OF THE
YOUTH, ADULT, PROFESSIONAL AND ATHLETES' ADVISORY COUNCILS.
(4) GRANTING LIFE MEMBER STATUS TO INDIVIDUALS AS PROVIDED UNDER BYLAW 231.
(5) APPROVE CHANGES IN BOUNDARIES UNDER SECTION 5 OF BYLAW 213.
(6) APPROVE FEES.
(7) APPROVE MEMBERSHIP OF ALL ORGANIZATION MEMBERS.
(8) ADOPT POLICIES AND RESCIND OR AMEND POLICIES ADOPTED BY THE BOARD OF
DIRECTORS.
(9) AFFIRMING ACTIONS OF THE BOARD OF DIRECTORS FOR THE PAST YEAR.
(A) THE FOLLOWING SHALL BE MEMBERS OF THE NATIONAL COUNCIL AND ENTITLED TO
ONE VOTE UNLESS OTHERWISE SPECIFIED IN THIS BYLAW:

(1) DELEGATES FROM THE STATE ASSOCIATIONS, NATIONAL ASSOCIATIONS AND

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PROFESSIONAL LEAGUES HAVING VOTES AS DETERMINED AND WEIGHTED UNDER SECTION
2 OF THIS BYLAW.

- (2) ATHLETE DELEGATES HAVING VOTES AS DETERMINED AND WEIGHTED UNDER SECTION 3 OF THIS BYLAW.
- (3) EACH VOTING MEMBER OF THE BOARD OF DIRECTORS.
- (4) EACH PAST PRESIDENT OF THE FEDERATION.
- (5) EACH LIFE MEMBER, EXCEPT THAT THE TOTAL OF ALL VOTES CAST BY LIFE

  MEMBERS SHALL NOT EXCEED 12. IF THERE ARE MORE THAN 12 LIFE MEMBERS, THEN

  EACH LIFE MEMBER® VOTE SHALL EQUAL THE FRACTION OF 12 DIVIDED BY THE

  NUMBER OF LIFE MEMBERS AT THAT MEETING, ROUNDED OFF TO 2 DECIMAL PLACES.
- (6) EACH NATIONAL MEMBER, NATIONAL AFFILIATE, OTHER AFFILIATE, INDOOR PROFESSIONAL LEAGUE, AND ASSOCIATE.
- (B) AN INDIVIDUAL ELIGIBLE TO VOTE IN MORE THAN ONE CAPACITY UNDER SUBSECTION (A) OF THIS SECTION MAY ONLY VOTE IN ONE OF THOSE CAPACITIES, AS SELECTED BY THAT INDIVIDUAL.
- (C) (1) NO VOTING BY PROXY IS ALLOWED. EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBPARAGRAPH, ONE INDIVIDUAL MAY CAST ALL OR PART OF THE VOTES OF AN ORGANIZATION MEMBER HAVING MORE THAN ONE VOTE AT A COUNCIL MEETING. HOWEVER, ANY INDIVIDUAL CASTING A VOTE FOR AN ORGANIZATION MEMBER MUST BE AN OFFICER OR DIRECTOR OF THE ORGANIZATION MEMBER OR A CHIEF EXECUTIVE OFFICER, CHIEF OPERATING OFFICER, CHIEF ADMINISTRATIVE OFFICER, EXECUTIVE DIRECTOR, PROFESSIONAL LEAGUE COMMISSIONER, SENIOR MANAGEMENT OFFICIAL, OR OTHER POSITION OF COMPARABLE AUTHORITY OF THE ORGANIZATION MEMBER.
- (2) FOR ANY NATIONAL COUNCIL MEETING, ONE INDIVIDUAL OF AN ORGANIZATION

  MEMBER MAY NOT CAST VOTES THAT EXCEED 2 PERCENT OF THE VOTES ELIGIBLE TO BE

  CAST AT A COUNCIL MEETING.

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(D) AN ORGANIZATION MEMBER MAY HAVE ALTERNATES TO A NATIONAL COUNCIL MEETING. AN ALTERNATE MAY NOT VOTE BUT HAS THE RIGHT TO SPEAK. SECTION 2. (A) THE NUMBER OF DELEGATES FROM EACH OF THE ORGANIZATION MEMBERS IN THE YOUTH, ADULT, AND PROFESSIONAL COUNCILS SHALL BE DETERMINED BY THE RESPECTIVE COUNCILS. THE NUMBER OF DELEGATES VOTING WITHIN A COUNCIL SHALL BE PROPORTIONAL AMONG ITS ORGANIZATION MEMBERS BASED ON THE FOLLOWING: IN THE YOUTH COUNCIL, THE NUMBER OF DELEGATES FOR (A) STATE ASSOCIATIONS SHALL BE BASED ON THE NUMBER OF PLAYERS REGISTERED AND FEES PAID TO THE FEDERATION BY THAT STATE ASSOCIATION, AND (B) NATIONAL ASSOCIATIONS SHALL BE BASED ON THE NUMBER OF PLAYERS REGISTERED AND FEES PAID BY THAT NATIONAL ASSOCIATION DIRECTLY TO THE FEDERATION AND NOT THROUGH A STATE ASSOCIATION, EXCEPT THAT IF A NATIONAL ASSOCIATION DOES NOT REGISTER ANY PLAYERS DIRECTLY WITH THE FEDERATION, THAT NATIONAL ASSOCIATION SHALL HAVE ONE VOTE AT EACH NATIONAL COUNCIL MEETING. IN EACH CASE, PLAYERS REGISTERED AND FEES PAID SHALL BE AS OF 30 DAYS BEFORE THE MEETING, AS CERTIFIED BY THE MEMBER OF THE BOARD OF DIRECTORS AUTHORIZED TO SERVE AS THE FEDERATION'S TREASURER. (2) IN THE ADULT COUNCIL, THE NUMBER OF DELEGATES FOR (A) STATE ASSOCIATIONS SHALL BE BASED ON THE NUMBER OF PLAYERS REGISTERED AND FEES PAID TO THE FEDERATION BY THAT STATE ASSOCIATION, AND (B) NATIONAL ASSOCIATIONS SHALL BE BASED ON THE NUMBER OF PLAYERS REGISTERED AND FEES PAID DIRECTLY TO THE FEDERATION BY THAT NATIONAL ASSOCIATION AND NOT THROUGH A STATE ASSOCIATION. IN EACH CASE, PLAYERS REGISTERED AND FEES PAID SHALL BE AS OF 30 DAYS BEFORE THE MEETING, AS CERTIFIED BY THE MEMBER LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

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OF THE BOARD OF DIRECTORS AUTHORIZED TO SERVE AS THE FEDERATION'S TREASURER.

- (3) IN THE PROFESSIONAL COUNCIL, THE NUMBER OF DELEGATES FOR EACH
  PROFESSIONAL LEAGUE SHALL BE BASED ON THE LEVEL OF COMPETITIVE DIVISION
  AMONG THE PROFESSIONAL LEAGUES.
- (B) IF THE MEMBERS OF A COUNCIL ARE UNABLE TO REACH AGREEMENT ON THE

  NUMBER OF DELEGATES FOR EACH MEMBER UNDER SUBSECTION (A) OF THIS SECTION,

  THE BOARD OF DIRECTORS SHALL DETERMINE THE NUMBER.
- (C) THE BASIS FOR CALCULATING THE NUMBER OF DELEGATES WITHIN A COUNCIL MAY BE CHANGED BY THE BOARD OF DIRECTORS UPON AGREEMENT WITH THE COUNCIL.
- (D) TO PROVIDE EQUAL REPRESENTATION AMONG THE YOUTH, ADULT, AND
  PROFESSIONAL COUNCILS, THE VOTES OF THE DELEGATES FROM EACH OF THOSE
  COUNCILS SHALL BE MULTIPLIED BY A COUNCIL MULTIPLIER. THE COUNCIL
  MULTIPLIER SHALL EQUAL THE NUMBER OF DELEGATES FOR THE COUNCIL WITH THE
  LARGEST NUMBER OF DELEGATES DIVIDED BY THE NUMBER OF DELEGATES OF THE
  RESPECTIVE COUNCIL, ROUNDED OFF TO 2 DECIMAL PLACES.

SECTION 3.

- (A) AT LEAST 20 PERCENT OF THE VOTES ELIGIBLE TO BE CAST AT A NATIONAL COUNCIL MUST BE ATHLETES, AND THE BOARD OF DIRECTORS SHALL MAKE NECESSARY ADJUSTMENTS TO ENSURE THAT THIS 20 PERCENT ATHLETE REQUIREMENT IS SATISFIED.
- (B) ATHLETE DELEGATES TO THE NATIONAL COUNCIL SHALL BE DETERMINED BY THE ATHLETES AS PROVIDED BY BYLAW 321.
- (C) ONE INDIVIDUAL MAY CAST ALL OR PART OF THE VOTES FOR THE ATHLETES AT A

  NATIONAL COUNCIL MEETING, BUT THAT INDIVIDUAL MAY NOT CAST VOTES FOR ANY

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OTHER ORGANIZATION MEMBER OR INDIVIDUAL AT THE MEETING. THE INDIVIDUAL MAY

CAST THE VOTES AS AN ATHLETE DELEGATE OR BY PROXY AS DETERMINED BY THE

ATHLETES' COUNCIL .

(D) TO ENSURE AT LEAST 20 PERCENT ATHLETE REPRESENTATION ON THE NATIONAL COUNCIL, THE VOTES OF THE ATHLETE DELEGATES SHALL BE MULTIPLIED BY AN ATHLETE COUNCIL MULTIPLIER. THE MULTIPLIER SHALL BE CALCULATED AS FOLLOWS:

((TWV/.8) - TWV)/AD ROUNDED OF TO 2 DECIMAL PLACES. "TWV" MEANS THE TOTAL WEIGHTED VOTE OF ALL NON-ATHLETE DELEGATES AT THE NATIONAL COUNCIL. "AD"

MEANS THE NUMBER OF ATHLETE DELEGATES AT THE NATIONAL COUNCIL MEETING.

FORM 990, PART VI, SECTION A, LINE 10: GOVERNING BODY REVIEW OF FORM 990 THE BOARD RETAINS THE SERVICES OF AN INDEPENDENT CPA FIRM TO PREPARE THE
ORGANIZATION'S FORM 990. MANAGEMENT REVIEWS THE COMPLETED FORM 990 AND
PROVIDES A FULL COPY TO THE BUDGET AND AUDIT COMMITTEE. A CONFERENCE CALL
IS SCHEDULED WITH THE CPA FIRM, MANAGEMENT AND THE BUDGER AND AUDIT
COMMITTEE TO DISCUSS THE FORM 990 IS SENT TO ALL VOTING MEMBERS OF THE
GOVERNING BODY AND A CONFERENCE CALL IS SET UP FOR ANY QUESTIONS THEY MAY
HAVE.

FORM 990, PART VI, SECTION B, LINE 12C: CONFLICTS OF INTEREST POLICY

MONITORING - OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES ARE ANNUALLY

REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT AS A

PRECURSOR TO THEIR SERVICE TO THE ORGANIZATION. POTENTIAL CONFLICTS ARE

LOGGED WITH AND MONITORED BY THE SECRETARY OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 15: THE SALARY OF THE CEO IS DETERMINED

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USING A COMPENSATION SPECIALIST AND A COMPENSATION SURVEY WHICH IS THEN
APPROVED BY THE BOARD. THE SALALRY OF KEY EMPLOYEES IS DETERMINED BY
INDUSTRY SURVEY'S WHICH COVER OTHER ORGANIZATION'S AND SPORTING TEAMS. THE
SLALRY OF ALL OTHER EMPLOYEE'S ARE DETERMINED BY COMPARING THEM AGAINST
OTHER SIMILAR SIZED ORGANIZATON'S.
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS AND FINANCIAL
STATEMENTS ARE AVAILABLE THROUGH APPLICABLE GOVERNMENTAL AGENCIES; THE
CONFLICT OF INTEREST POLICY IS AVAILABLE UPON WRITTEN REQUEST TO THE
ORGANIZATION.
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