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Short Form
Return of Organization Exempt From Income Tax

Department of the Treasury
Internal Revenue Service

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

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

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

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning		January 1	, 2008, and ending	January	, 20 08	
B Check if applicable		C Name of organization		D Employer identification number		
<input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Please use IRS label or print or type. See Specific Instructions. Wright County Soccer Number and street (or P O box, if mail is not delivered to street address) Room/suite c/o Megan Leipholtz, 898 Hansack Avenue		41 1868570		
		City or town, state or country, and ZIP + 4 Buffalo, MN 55313-4615		E Telephone number (763) 477-5473		
• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).			F Group Exemption Number ►			
I Website: ► www.wrcsoccer.org			G Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►			
J Organization type (check only one) — <input checked="" type="checkbox"/> 501(c) (3) ► (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527						
K Check ► <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A return is not required, but if the organization chooses to file a return, be sure to file a complete return						
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► \$						
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)						
Revenue	1	Contributions, gifts, grants, and similar amounts received	1	73,587		
	2	Program service revenue including government fees and contracts	2			
	3	Membership dues and assessments	3			
	4	Investment income	4			
	5a	Gross amount from sale of assets other than inventory	5a			
	b	Less: cost or other basis and sales expenses	5b			
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c			
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>				
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a			
b	Less: direct expenses other than fundraising expenses	6b				
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c				
7a	Gross sales of inventory, less returns and allowances	7a				
b	Less: cost of goods sold	7b				
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c				
8	Other revenue (describe ►)	8				
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8.	9	73,587			
Expenses	10	Grants and similar amounts paid (attach schedule)	10			
	11	Benefits paid to or for members	11			
	12	Salaries, other compensation, and employee benefits	12			
	13	Professional fees and other payments to independent contractors	13	7,835		
	14	Occupancy, rent, utilities, and maintenance	14			
	15	Printing, publications, postage, and shipping	15	334		
	16	Other expenses (describe ► Tournament Fees, Referee Fees, Uniforms, Field Fees, Regis)	16	45,942		
	17	Total expenses. Add lines 10 through 16	17	54,111		
				RECEIVED		
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	19,476		
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19			
	20	Other changes in net assets or fund balances (attach explanation)	20			
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	19,476		
	Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.					
	(See the instructions for Part II.)				(A) Beginning of year (B) End of year	
	22	Cash, savings, and investments	7,956	22	27,432	
	23	Land and buildings		23		
	24	Other assets (describe ►)		24		
25	Total assets	7,956	25	27,432		
26	Total liabilities (describe ►)		26			
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	7,956	27	27,432		

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity

34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.

a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?

b If "Yes," has it filed a tax return on **Form 990-T** for this year?

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► **37a**

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

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?

b If "Yes," complete Schedule L, Part II and enter the total amount involved

39 Section 501(c)(7) organizations. Enter:

a Initiation fees and capital contributions included on line 9

b Gross receipts, included on line 9, for public use of club facilities

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► _____ ; section 4912 ► _____ ; section 4955 ► _____

b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► _____

d Enter amount of tax on line 40c reimbursed by the organization ► _____

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.

41 List the states with which a copy of this return is filed. ► _____

42a The books are in care of ► _____ Telephone no. ► (_____)
Located at ► _____ ZIP + 4 ► _____

b 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)?
If "Yes," enter the name of the foreign country: ► _____
See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts**.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?
If "Yes," enter the name of the foreign country: ► _____

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► **43**

44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ

	Yes	No
33	✓	
34	✓	
35a	✓	
35b	✓	
36	✓	
37b	✓	
38a	✓	
38b		
39a		
39b		
40b	✓	
40e		✓

	Yes	No
42b	✓	
42c	✓	

	Yes	No
44	✓	
45	✓	

Part VI **Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46–49 and complete the tables for lines 50 and 51.

	Yes	No
46	✓	
47	✓	
48	✓	
49a	✓	
49b	✓	

46 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

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization(s) a section 527 organization?

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

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

Sign Here	<i>Elizabeth A. Bjork</i> Signature of officer	<i>5/13/2010</i> Date
Elizabeth A. Bjork, Treasurer Type or print name and title		

Signature of officer

5/13/2010

Signature of officer

Elizabeth A. Bjork, Treasurer

Type or print name and title

Paid Preparer's Use Only	Preparer's signature 	Date	Check if self- employed  <input type="checkbox"/>	Preparer's Identifying Number (See instructions)
	Firm's name (or yours if self-employed), Address 	EIN  <input type="text"/>		 <input type="text"/>

May the IRS discuss this return with the preparer shown above? See instructions.

Form 990-EZ (2008)

**SCHEDULE O
(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.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

Wright County Soccer

Employer identification number

41

1868570

Reason for not filing on time:

We did not realize the filing needed to be done. When we realized this, we made every effort to get the paperwork

up to date.

Name of the organization

Employer identification number