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# 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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Onen to Public Inspection

_		nue Service	<u> </u>			<del></del>		of this return to sa							<u>.</u>
	For the	2008 calend	dar year,			inning Aug	<sub>[</sub> 1	, 200	08, and	ending	Jul			, 2009	
<b>B</b> 0	Check if	applicable	Dianes		me of orga	nization						D Employ	yer Ide	ntification N	umber
	Add	ress change	Please use IRS label	WILI	IAMS	ON COUNTY	SOCC	ER ASSOCI	ATIO	N		62-	112	1019	
Ī	Nan	ne change	or print or type.	Nu	mber and s	treet (or P O. box	if mail is no	t delivered to street	t addr)	Room/suite	T	E Teleph	one nui	mber	
Ī	Initia	al return	See specific	PO E	30X 6	30037						(61	5)	7 <u>91</u> –05	90_
Ī	Terr	nination	Instruc- tions.	City	y, town or	country		Sta	te ZIP c	ode + 4		•			
Ī	Ame	ended return		FRAN	KLIN			T	N 37	068-00	37	G Gross	receipts	s 569	,274.
Ì	_	lication pending	F Name			cipal officer						group retu	_		Yes X
			Terry W.	Porte	т 509 H	opewood Cou	ırt Frai	nklin '	TN 3706	54-5529 H(b		ffiliates inc			Yes
ī	Tax-e	exempt statu				(insert no	$\overline{}$	4947(a)(1) or	52		If 'No,' a	ttach a list	(see ii	nstructions)	
j						intysocce		(۵)(۱) 0.			Group e	xemption n	umber	<b>&gt;</b>	
<u></u> -		of organization	X Corpor		Trust	Association	Other •	· [1	l Year of	Formation	•			f legal domic	de TN
Par		Summa		ation	Titust	Association	1 T Outer		- rear or	TOMINATION	17,,	, , , ,	Julie 0	r legar donne	111
T				nanızatı	on's mis	ssion or most	significan	it activities:	Recre	ation	al sc	occer	lea	gue	
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Activities & Governance	_					. – – – – –									
Ē	_														
Š	2 (	Check this bo	x ► [	if the c	rganiza	tion discontin	ued its on	erations or dis	posed o	of more th	an 25%	ofitsa	ssets		
ŏ						erning body (				),o.o u				9	
95   0								dy (Part VI, line	e 1b).				4	0	
퉏	<b>5</b> T	otal number	of emplo	yees (F	Part V, li	ne 2a)							5	8	
ਰ						if necessary)				•			6	250	
⋖		-				ue from Part V							7 a	<del></del>	
	<u>b</u> N	let unrelated	business	taxabl	e incom	e from Form 9	990-T, line	e 34	•				7t	)	
											Pr	ior Year		Cu	rrent Year
	8 Contributions and grants (Part VIII, line 1h)														
Prevence	9 F	Program serv	ice reven	ue (Pa	rt VIII, li	ne 2g) .				_		530,8			512,31
						(A), lines 3, 4							L47.		88
•						lines 5, 6d, 8							090.		28,91
$\dashv$								, column (A), l	ine 12)			538,1			542,11
									500.		3,62				
	14 E	Benefits paid	to or for	membe	rs (Part	IX, column	A), line 4)			. L					
۵	<b>15</b> S	Salaries, othe	er columber	າsatເທກ	pengp(py	ree benefits of	art IX, co	olumn (A), line:	s 5-10)	. L		217,9	916.	·	117,89
95	16a F	Professional i	fundfáistr	g fees	Part IX	, column (A);	ine 11e)			.					
Expenses			1-1			plumn (D), lin	8			0.					•
			9 -		11 11 11 11	ines tra-Tic	JI		<del></del>	<del></del>  -		367,	750		410,07
										-					
		•			•	st equal Part I		ı (A), IIIIe ∠5)	•	-		589,1			531,58
	19 F	kevenue less	expense	s. Subt	iact line	18 from line	12 .					-51 <u>,</u> (			10,52
Net Assets or Fund Balancos										<u> </u>	Begin	ning of Y		En	d of Year
Bolo		otal assets (		•				•		<b> </b> -		299,9		1	280,25
F E	<b>21</b> T	otal liabilitie	s (Part X	, line 26	b)					-		76,9	<del>1</del> 11.	-	46,75
					Subtract	line 21 from	line 20					223,0	083.		233,50
Par	rt II	Signati	ure Blo	<u>ck</u>				· · · · · · · · · · · · · · · · · · ·							
		Under penaltie	s of perjury,	I declare	that I hav	e examined this re	etyrn, includi	ng accompanying s sed on all informati	chedules	and stateme	ents, and t	to the best	of my l	knowledge a	nd belief, it is
		jauc, conect, a	Somplete	occiala فر	on or pre	Daily Couler trial	Ciricei) is Da	JOH OIT AIT IIIIOIIIIAU	OH ULWIN	en breharer	iia saliy K	euge			
		-	7		,	V.N-	<u>۔                                    </u>				•	3/22/1	.0		
Sigi	n	<b>&gt;</b>	<u></u>		<u> </u>				-		Date	. –			
Sigi	n e	Signature	of officer		-1							;			
Sigi	n e		of officer	orte:	r						ecre		<u>/</u> T:	reasur	er
Sigi	n e	► Terry			r										
Sigi	n re	► Terry	/ W. P		r				Date	S	Secre	tary	- Ti		entifying numbe
Sigi Her	re 	Terry Type or pr	/ W. P		r				Date	S	Che	tary		Preparer's id (see instruct	entifying numbe
Sigi Here	e d	► Terry	/ W. P		r - /	J. Ka				23/10	Che	tary		Preparer's id (see instruct	entifying numbe
Sigi Here	d - er's	Terry Type or pr  Preparer's signature  Firm's name (i	W. P	d title	7/	). Marine SE	RVICE				Che	tary		Preparer's id (see instruct	entifying numbe
Sigi Here Paid Pre- pard Use	d er's	Terry Type or pr  Preparer's signature  Firm's name (i) yours if self-	W. Punt name an	LE B	OOKKE		RVICE				Che self em	tary		Preparer's id (see instruct	entifying numbe
Sign Here Paid Pre- pard Use Only	d er's	Terry Type or pr  Preparer's signature  Firm's name (control yours if self-employed), address, and	W. P int name an  EAG  509	LE BO	OOKKE EWOOD		RVICE	TN 370	03/2	23/10	Che self em	tary	x	Preparer's id (see instruct	entifying number ons) 4850.
Sign Here Paid Pre- pard Use Only	d - er's	Terry Type or pr  Preparer's signature  Firm's name (control yours if self-employed), address, and ZIP + 4	W. P int name an  or EAG  509  FRA	LE BONKLI	OOKKE EWOOD					23/10	Che self em	tary		Preparer's id (see instruct POOL)	entifying numbe

Form 990 (2008) WILLIAMSON COUNTY SOCCER ASSOCIATION	62-1121019 Page 2
Part III Statement of Program Service Accomplishments (see instructions)	
Briefly describe the organization's mission	
2 Did the organization undertake any significant program services during the year which were not listed	
Form 990 or 990-EZ?	Yes X No
If 'Yes,' describe these new services on Schedule O	
3 Did the organization cease conducting, or make significant changes in how it conducts, any program s	services? Yes X No
If 'Yes,' describe these changes on Schedule O.	
	Control F01(a)(2)
4 Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a	ces by expenses Section 501(c)(3)
expenses, and revenue, if any, for each program service reported	and anocations to others, the total
4a (Code) (Expenses \$423,662. including grants of \$0.	(Revenue \$ 542,112.)
Soccer Programs: The Association operates a recreational	
soccer league in Williamson County, TN. The program fees	
received are player registration fees and sponsor contribution	
received are prayer redistration rees and sponsor contribution	15
to cover expenses of operating the Association.	
	\ \( \P\ \)
<b>4b</b> (Code) (Expenses \$ including grants of \$	_) (Revenue \$)
4c (Code) (Expenses \$ including grants of \$	) (Revenue \$
,, ,, ,, ,, ,	· · · · · · · · · · · · · · · · · · ·
4d Other program services. (Describe in Schedule O )	
(Expenses \$ including grants of \$ ) (Revenue	S )
4e Total program service expenses ► \$ 423, 662. (Must equal Part IX, Line 25, column	
+e rotal program service expenses ► 9 423,002. (wast equal Fart IX, Line 25, column	

•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		х
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		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		Х
5	Section 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		Х_
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
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		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V .	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the U.S?	14a		X
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		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		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and 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		X
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K If 'No,'go to question 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
ď	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
<b>2</b> 5 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		х
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Form 990 (2008)

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: a 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 Х b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete 28b Schedule L, Part IV 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 Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 X Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes.' complete Schedule N, Part II 32 Х 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 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х 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 35 Х **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 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 37 Х

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· ·		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable			
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	х	
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 . 8			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u></u>
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 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
<b>b</b> If 'Yes,' enter the name of the foreign country.			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a Did the organization solicit any contributions that were not tax deductible?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6ь		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75?	7a		Х
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		х
d if 'Yes,' indicate the number of Forms 8282 filed during the year . 7d			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
<b>h</b> For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		х
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		х
<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	9b		Х
10 Section 501(c)(7) organizations. Enter:			
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:	ļ		
a Gross income from other members or shareholders			l
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? .	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
BAA	Form	990 (	2008

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

Sec	ction A.	Governing Body and Management		· · ·		
	For each processes	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, de s, or changes in Schedule O. See instructions.	escribe the circumstances,		Yes	No
1 a	a Enter the	number of voting members of the governing body	1a 9			
ŀ	<b>b</b> Enter the	number of voting members that are independent	1b 0	4		
2	Did any of officer, dir	fficer, director, trustee, or key employee have a family relationship or a business related rector, trustee or key employee?	ationship with any other	2	х	
3	Did the or of officers	ganization delegate control over management duties customarily performed by or un , directors or trustees, or key employees to a management company or other person	der the direct supervision ?	3		х
4	Did the or	ganization make any significant changes to its organizational documents		4		_X
	since the	prior Form 990 was filed?				
5		ganization become aware during the year of a material diversion of the organization'	s assets?	5		_X
6		organization have members or stockholders?		6		<u>X</u>
7 8	a Does the ogoverning	organization have members, stockholders, or other persons who may elect one or mo body?	ore members of the	7a	х	
ı	<b>b</b> Are any d	ecisions of the governing body subject to approval by members, stockholders, or other	er persons?	7b	X	
8	Did the or the following	ganization contemporaneously document the meetings held or written actions underting	taken during the year by			
á	a The gover	rning body?	•	8a	Х	
ı	<b>b</b> Each com	mittee with authority to act on behalf of the governing body?		8ь		X
9	a Does the	organization have local chapters, branches, or affiliates?		9a		<u>X</u>
1	<b>b</b> If 'Yes,' do and branc	oes the organization have written policies and procedures governing the activities of the chesic to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	9ь		
10	Was a cop describe ii	py of the Form 990 provided to the organization's governing body before it was filed? n Schedule O the process, if any, the organization uses to review the Form 990	All organizations must	10	х	
11	ls there ar organizati	ny officer, director or trustee, or key employee listed in Part VII, Section A, who cannion's mailing address? If 'Yes,' provide the names and addresses in Schedule O.	not be reached at the	11		_x_
Sec	ction B.	Policies				
					Yes	No
		organization have a written conflict of interest policy? If 'No,' go to line 13	•	12a		X
ł	<b>b</b> Are officed to conflict	rs, directors or trustees, and key employees required to disclose annually interests the second second contract the second secon	nat could give rise	12b		
•	c Does the of Schedule	organization regularly and consistently monitor and enforce compliance with the police of how this is done	cy? If 'Yes,' describe in	12c		
13		organization have a written whistleblower policy?		13		<u>X</u>
14		organization have a written document retention and destruction policy?		14		X
15	Did the propersions, of	rocess for determining compensation of the following persons include a review and a comparability data, and contemporaneous substantiation of the deliberation and deci	pproval by independent sion			
i	a The organ	nization's CEO, Executive Director, or top management official?		15a		X
(		cers of key employees of the organization?		15b		X
		the process in Schedule O (see instructions)				
16	a Did the or entity duri	rganization invest in, contribute assets to, or participate in a joint venture or similar a ing the year?	arrangement with a taxable	16a		х
1	in joint ve	as the organization adopted a written policy or procedure requiring the organization tenture arrangements under applicable federal tax law, and taken steps to safeguard the respect to such arrangements?	o evaluate its participation he organization's exempt	16b		
Sec		Disclosures				
17	List the st	ates with which a copy of this Form 990 is required to be filed Tennessee				
18	Section 6	104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an in Indicate how you make these available. Check all that apply	d 990-T (501(c)(3)s only) ava	aılable	for pu	plic
	Own	website Another's website X Upon request				
19	Describe i statement	in Schedule O whether (and if so, how) the organization makes its governing docume ts available to the public	ents, conflict of interest polic	y, and	financ	cial
20	State the	name, physical address, and telephone number of the person who possesses the bo	oks and records of the organ	ızatıor	I	
	► <u>Eagle B</u>	ookkeeping Service 509 Hopewood Court Franklin T	<u>N</u> 37064-5529(6	15)_5	99-	1640

# 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) or 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	compens	ate ar	у о	fice	r, dı	rector	, trus	stee, or key employee.	·	
(A)	(B)			•	c)			(D)	(E)	<b>(F)</b>
Name and Trtle	Average hours per week					that app		Reportable compensation from the organization	Reportable compensation from related organizations	Estimated amount of other compensation
		adivict et fraktee or direx oor	institutional trustee	Office	key employee	Highest compensated employee	Forner	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
Lance McKerley										· · · · · · · · · · · · · · · · · · ·
President	15.00	Х						0.	0.	0.
Terry W. Porter										
Secretary/Treasurer	20.00	Х						0.	0.	0.
Bill Milton					ĺ					
Vice President	20.00	Х						9,902.	0.	0.
Chris Sprankle										
Vice President	20.00	Х						0.	0.	0.
Preston Hester										
Vice President	20.00	Х						0.	0.	0.
Marc Dominguez										
Vice President	20.00	Х						0.	0.	0.
Jose Dirube						,				
Vice President	20.00	Х						13,816.	0.	0.
Lee Bagby										
Vice President	20.00	Х						0.	0.	0.
Mary K. Anderson										
Registrar/Exec Director/Director of Sponsor	30.00	Х						41,905.	0.	0.
Beverly Aurora										
Registrar	10.00				Х			7,752.	0.	0.
Robin Davis										
Office Manager	30.00		<u> </u>		X			23,968.	0.	0.
David Cordero			i							
Director of Coaching	30.00	X						16,191.	0.	0.
Stuart_Davis										
Director of Concessions	15.00	<u> X</u>						7,400.	0.	0.
	:									

· (A)	(B) (c) (D) (E)		(F)								
Name and Title	Average hours	Posi	tion (		k all	that a		- componentian from componentian fro		_ E	stimated
	per week	무교	İnst	Officer	ě	emp High	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	СОГ	unt of other npensation from the
		director	i e	œ.	employee	Highest co	Ę	(** 2 *********************************	(	or a	ganızatıon nd related
		ndividual trustee or director	Institutional trustee		oyee					org	anizations
		ee	stee		:	mpensat					
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	1										
1 b Total	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	<b>•</b>	120,934.	0.		0.
2 Total number of individuals (including those in 1a) w	ho rece	ived	moi	re th	an	\$100	0.00	•		 e	
organization >						•	,				
								·			Yes No
3 Did the organization list any former officer, director of	or truste	e. ke	ev e	mple	ove	e. or	hial	hest compensated	employee	ŀ	
on line 1a? If 'Yes,' complete Schedule J for such in	dıvıdual		-		_		_	•	•	3	X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th	ortable an \$150	com	ipen	isatı f 'Ye	on a	and o	othe Jete	r compensation fro Schedule J for su	om ch		
individual						Jp		007,000,00	<b>.</b>	4	X
5 Did any person listed on line 1a receive or accrue co	mpensa	ation	fro	m a	nyι	ınrel	ated	l organization for s	services		
rendered to the organization? If 'Yes,' complete School	edule J t	for s	uch	per	son			•	.,,,,,	5	X
Section B. Independent Contractors  1 Complete this table for your five highest compensate	d indep	ende	ent d	cont	ract	ors t	that	received more tha	n \$100,000 of	•	<del></del>
compensation from the organization									4.00,040 0.		
(A)								(B;		. (	C)
Name and business addres	<u>s</u>							Description o	of Services	Comp	ensation
						-			-		
											<del></del> -
									_		
2 Total number of independent contractors (including t	hose in	1) v	vho	rece	ive	d mo	re th	han \$100,000 in			
compensation from the organization ►								<del></del>		<i></i>	

	t viii   Statement of Nevenue	·			<del></del>	<del></del>
•			<b>(A)</b> Total revenue	(B)  Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>د</u> رو	1a Federated campaigns 1a				· · · · · · · · · · · · · · · · · · ·	
ANTS	b Membership dues 1b					
a S	c Fundraising events 1c					
FIS	d Related organizations 1d					
5₹	e Government grants (contributions) 1 e	· · · · · · · · · · · · · · · · · · ·				
S S	, , ,					
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above	· · · ·				
N ON	g Noncash contributes included in line 1a-1f \$					1
34	h Total. Add lines 1a-1f	<b>•</b>			<del></del>	
3		Business Code			_	
Ę	2a Registration Fees	713940	408,742.	408,742.	0.	0.
Ä	b Sponsors	713940	61,125.	61,125.	0.	0.
Š	c Processing_Fees	713940	2,831.	2,831.	0.	0.
SE	d Camps	713940	39,614.	39,614.	0.	0.
ΑM	e					
20	f All other program service revenue					
8	g Total. Add lines 2a-2f	<b>&gt;</b>	512,312.		··	·
	3 Investment income (including dividends	, interest and				_
	other similar amounts)	▶	889.	889.	0.	0.
	4 Income from investment of tax-exempt	bond proceeds				
	5 Royalties	<u> </u>				
	(ı) Real	(ii) Personal				
	6a Gross Rents	ļ				
	b Less rental expenses					
	c Rental income or (loss)	1				
	d Net rental income or (loss)	<u> </u>				
	7a Gross amount from sales of assets other than inventory	(II) Other				
	<b>b</b> Less: cost or other basis and sales expenses					
	c Gain or (loss)	· .				
	d Net gain or (loss)	▶				
IUE	8a Gross income from fundraising events (not including \$					
OTHER REVENI	of contributions reported on line 1c)					
E. E.	See Part IV, line 18	a 11,967.				
Ŧ		b[				_
_	c Net income or (loss) from fundraising e	vents	11,967.	11,967.	0.	0.
	9a Gross income from gaming activities See Part IV, line 19	a				
	<b>b</b> Less direct expenses .	b				
	c Net income or (loss) from gaming activ	ities . ►				
	<b>10a</b> Gross sales of inventory, less returns and allowances .	a 40,389.				
	<b>b</b> Less: cost of goods sold	b 27,162.				
	c Net income or (loss) from sales of inve		13,227.	13,227.	0.	0.
	Miscellaneous Revenue	Business Code			<del></del>	
	11a Miscellaneous Income	713940	3,717.	3,717.	0.	0.
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		3,717.			
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5	5 6d 7d 8c 9c				
	10c, and 11e	, ou, ru, oc, sc,	542,112.	542,112.	0.	0.

Page 10

Part IX | Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</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				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22.	3,622.	3,622.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees	67,216.	18,430.	48,786.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	07,210.	10, 130.	40,700.	
7	Other salaries and wages	40,284.	40,284.	0.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	10,390.	3,948.	6,442.	0.
	Fees for services (non-employees)				
	a Management		_		
	<b>L</b> egal	2,340.	0.	2,340.	0.
	Accounting	16,750.	0.	16,750.	0.
	Lobbying .				
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees	161 660	150.000	11 427	
•	Other	161,660.	150,223.	11,437.	0.
	Advertising and promotion	14,536.	14,536.	0.	0.
	Office expenses	22,846.	12,639.	10,207.	0.
14	Information technology .	246.	246.	0.	0.
15	Royalties .	A1 717	27 071	2 746	
16 17	Occupancy Travel	41,717. 1,318.	37,971. 1,318.	3,746.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,316.	1,316.	0.	
19	Conferences, conventions, and meetings	793.	0.	793.	0.
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,932.	988.	1,944.	0.
23 24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )	10,796.	9,512.	1,284.	0.
á	Uniforms & Equipment	94,042.	94,042.	0.	0.
	Trophies	16,693.	16,693.	0.	0.
•	Supplies	1,148.	222.	926.	0.
(	Registration Fees	4,591.	4,591.	0.	0.
	Camps	9,967.	9,967.	0.	0.
1	All other expenses	7,697.	4,430.	3,267.	0.
	Total functional expenses. Add lines 1 through 24f	531,584.	423,662.	107,922.	0.
26	Joint Costs. Check here ► ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				Form <b>990</b> (2008)

BAA

```	<u> </u>	Dalatice Street			(A) Beginning of year		(E End of	B) f year	
	1	Cash – non-interest-bearing			300.	1		20,0	000.
	2	Savings and temporary cash investments			212,989.	2		B3,2	
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net .			20,116.	4			0.
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule	s, trusi L	tees, key employees,		5			
	6	Receivables from other disqualified persons (as define	ed und	er section 4958(f)(1))					
		and persons described in section 4958(c)(3)(B). Comp	olete P	art II of Schedule L		6			
A S E T S	7	Notes and loans receivable, net				7			
Ē	8	Inventories for sale or use .			62,538.	8	(	64,4	128.
Š	9	Prepaid expenses and deferred charges	_			9	-	11,4	24.
	10 a	Land, buildings, and equipment cost basis	10a	9,460.					
	b	Less: accumulated depreciation. Complete Part VI of							
		Schedule D	10b	8,341.	4,051.	10 c		1,1	19.
	11	Investments - publicly-traded securities		•		11			
	12	Investments – other securities. See Part IV, line 11		. [		12			
	13	Investments – program-related See Part IV, line 11				13			
	14	Intangible assets				14			
	15	Other assets. See Part IV, line 11		[	•	15			
	16	Total assets. Add lines 1 through 15 (must equal line	34) .		299,994.	16	28	30,2	59.
	17	Accounts payable and accrued expenses			43,211.	17		45,9	
	18	18 Grants payable 18							
	19	Deferred revenue		Ī	33,700.	19		8	300.
Ļ	20	Tax-exempt bond liabilities		Ī		20			
Á	21	Escrow account liability. Complete Part IV of Schedule	D :	Ī		21			
LIABILIT	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per	tees, sons. (	key employees, Complete Part II	-				
- 1		of Schedule L	22						
E S	23	Secured mortgages and notes payable to unrelated th	rd par	ties		23			
	24	Unsecured notes and loans payable .				24			
	25	Other liabilities. Complete Part X of Schedule D		<u> </u>		25			
	26	Total liabilities. Add lines 17 through 25			76,911.	26		46,7	<u>53.</u>
N E		Organizations that follow SFAS 117, check here ►	a	nd complete lines					
		27 through 29 and lines 33 and 34.							
ASSE	27	Unrestricted net assets		-		27			
E S	28	Temporarily restricted net assets .		-		28			
	29	Permanently restricted net assets			<del></del>	29			
R		Organizations that do not follow SFAS 117, check he	re 🟲	X and complete					
UZC.		lines 30 through 34.							
	30	Capital stock or trust principal, or current funds			<u>.</u> .	30			
B	31	Paid-in or capital surplus, or land, building, and equip		_		31			
Ā	32	Retained earnings, endowment, accumulated income,	or oth	er funds	223,083.	32			06.
<b>野々しる玄い世の</b>	33	Total net assets or fund balances.		-	223,083.	33		33,5	
	101 Total Habilities and Hot assets full balaness.							30,2	<u>59.</u>
Pa	rt X	Financial Statements and Reporting						1	
			Cash		Other			Yes	No
		re the organization's financial statements compiled or r			countant?		2a		<u> X</u>
		re the organization's financial statements audited by ar			_		2b	Х	
	rev	res' to 2a or 2b, does the organization have a committee, or compilation of its financial statements and selections.	ction o	f an independent accour	ntant?		2c		<u> </u>
3	a AS Au	a result of a federal award, was the organization requir tit Act and OMB Circular A-133?	ea to i	undergo an audit or audi	ts as set forth in the Si	ngie	3a	- 1	х
		'es,' did the organization undergo the required audit or	audits	?			3b		<del></del> _
BA		, and an analysis of together dutie of		<u></u>	<u> </u>		Form	990 (	2008)

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

**Public Charity Status and Public Support** 

047(-)(1)

2008

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization

Employer identification number

<u>мтг</u>	<u> 나 1 년</u>	AMSON COUNTY	SOCCER ASSOC	LATION					105-T1	.21019	,		
Par	t I	Reason for Pul	blic Charity Statu	s (All organizations	must d	comple	te this	part.)	(see i	nstruct	ions)		
The c	rgar	nization is not a priv	rate foundation becaus	se it is: (Please check on	ly <b>one</b> or	rganızatı	ion )						
1	П	A church, convention	on of churches or asso	ciation of churches desci	ribed in s	section '	170(b)(1	(A)(i).					
2	П	A school described	in section 170(b)(1)(A	(Attach Schedule E	)								
3	П			organization described in		n 170(b)	(1)(A)(iii	i). (Atta	ch Sche	dule H.)			
4	П	A medical research	organization operated	d in conjunction with a ho	spital de	escribed	ın <b>secti</b>	on 170(	<b>ЬХ1ХАХ</b>	iii). Ente	r the hospi	tal's	
	_	name, city, and sta	-	,	•					•	•		
5			erated for the benefit of	of a college or university	owned o	r operat	ed by a	govern	mental u	nit descr	ibed in <b>sec</b>	tion	
6		A federal, state, or	local government or g	overnmental unit describ	ed in <b>se</b>	ction 17	0(ь)(1)(	4)(v).					
7		ın section 170(b)(1)	<b>((A)(vi).</b> (Complete Pa			_	ernment	tal unit (	or from t	he gener	ral public d	escribi	ed
8	Ш	A community trust of	described in section 1	<b>70(b)(1)(A)(vi).</b> (Complete	e Part II	)							
9	X	from activities relations	ed to its exempt functi	more than 33-1/3 % of ons — subject to certain s taxable income (less somplete Part III)	exceptio	ns, and	(2) no r	nore tha	an 33-1/3	3 % of its	s support fr	om gre	oss
10		An organization org	anized and operated	exclusively to test for pub	olic safet	y. See s	ection 5	509(a)(4	). (see 1	nstructio	ns)		
11		more publicly support	orted organizations de	exclusively for the benefit escribed in section 509(a ation and complete lines	)(1) or s	ection 5	09(a)(2)	ions of, See <b>s</b> e	or carry ection 50	out the <b>09(a)(3).</b>	purposes of Check the	of one box th	or nat
		a Type I	<b>b</b> Type II	c 🔙 Type III	- Func	tionally	ıntegrate	ed		d 📗	Type III-	Other	
е		By checking this bo than foundation ma 509(a)(2).	x, I certify that the org inagers and other than	janization is not controlle i one or more publicly su	d directl pported	y or indi organiza	rectly by	y one or escribed	r more d I in secti	isqualifie on 509(a	ed persons a)(1) or sec	other tion	
f		If the organization r check this box	received a written dete	ermination from the IRS to	hat is a	Type I, T	Гуре II о	r Type	III suppo	rtıng org	anızatıon,		
g		Since August 17, 20	006, has the organizat	ion accepted any gift or	contribu	ition fror	n any of	the foll	lowing p	ersons?			
												Yes	No
		(i) a person who below, the go	directly or indirectly overning body of the su	ontrols, either alone or to pported organization?	ogether v	with pers	sons des	scribed	ın (ıı) an	d (III)	11 g (i)		
		(ii) a family mem	ber of a person desci	ribed in (i) above?							11 g (ii)		
		(iii) a 35% control	lled entity of a person	described in (i) or (ii) ab	ove? .						11 g (iii)		
h		Provide the following	ng information about th	ne organizations the orga	nızatıon	support	s.						
	Ø	) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	Is the tion in col d in your erning ment?	the organ	ou notify ization in (i) of upport?	(vi) I: organizati (i) organiz U S	on in col	(vii) Amour	it of Sup	port
					Yes	No	Yes	No	Yes	No	-		
					1								
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		- <u>-</u> -			<u> </u>								
Γotal						1							

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

Schedule A (Form 990 or 990-EZ) 2008

	from line 4		[		1		
Sec	tion B. Total Support						
Cale beg	endar year (or fiscal year inning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income form unrelated business activities, whether or not the business is regularly carried on		ı				
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 14 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f 15 % 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 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 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 Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schodula A /Form aan or aan ET 2008

Complete only if you che	•		Section 509(	a)(2)		
Section A. Public Support	cked the box on his	e 9 of Part 1.)				<del></del>
Calendar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	<b>(d)</b> 2007	<b>(e)</b> 2008	(f) Total
Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').	413,680.	466,888.	477,611.	487,512.	460,117	
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	156,555.	97,085.	83,654.	73,882.	92,585	
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	25,000.	25,000.	25,000.	25,000.	25,000	
6 Total. Add lines 1-5	595,235.	588,973.	586,265.	586,394.	577 <b>,7</b> 02	2,934,569.
7a Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0	0.
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	0.	0.	0.	0.	C	0.
8 Public support (Subtract line						
7c from line 6)						2,934,569.
Section B. Total Support	•		·			•
Calendar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	595,235.	588,973.	586,265.	586,394.	577,702	2,934,569.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	738.	2,739.	3,147.	3,147.	889	
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on	738.	2,739.	3,147.	3,147.	889	10,660.
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)			7,186.	7,056.	15,684	29,926.
13 Total support. (add Ins 9, 10c, 11, and 12)		· · · · ·		•		2,975,155.
14 First five years. If the Form 990 organization, check this box and	is for the organizat	ion's first, second	, third, fourth, or	fifth tax year as a	section 501(c)	
Section C. Computation of Pu				<del>.</del>	·	
15 Public support percentage for 20			13 column (ft)		15	98.64%
16 Public support percentage from	•				10	-
Section D. Computation of In						- JO:07 N
17 Investment income percentage				n (ft)	17	7 0.36%
18 Investment income percentage			-	. (//	18	
19a 33-1/3 support tests — 2008. If it more than 33-1/3%, check this it	the organization did	not check the box	on line 14, and	line 15 is more thi	an 33-1/3%, at	·
<b>b 33-1/3 support tests</b> – <b>2007.</b> If the support is not more than 33-1/3%, check	the organization did k this box and <b>stop</b>	not check a box of here. The organization	on line 14 or 19a, ation qualifies as a	and line 16 is more a publicly supported	re than 33-1/39 ed organization	%, and line 18
20 Private foundation. If the organ	ization did not chec	k a box on line 14	, 19a, or 19b, che	ck this box and se	e instructions	▶

Schedule /	4 (Form 990	or 990-EZ) 2008	WILLIAMSON	COUNTY	SOCCER	ASSOCIA'	TION	62-1121019	Page 4
Part IV	Supplem Part II, II	nental Informatine 17a or 17b	<b>tion.</b> Complete ; or Part III, lin	this part to e 12. Provi	o provide de any o	the explar ther addition	nation requonal inform	ired by Part II, III ation. (see instru	ne 10; ictions)
Other_	Income F	Part III, Li	ine_12					· <del></del>	·
Descri	ption: F	rocessing [	ees					<del></del>	
2006:	130							·	
Descri	<u>ption:</u> F	undraisers			<del></del>				
2006:	<u>6299</u>			<b>-</b>					
2007:	6299								
2008:	11967						<b></b> -		
Descri	<u>ption: M</u>	lisc							<b></b>
2006:_	757					<b></b>			
2008:	<u>3717.</u>	<b></b>							
		<del></del>		<b>-</b>					
<b>-</b>								. <b></b>	
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# SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer Identification number

WI	LLIAMSON COUNTY SOCCER ASSOCI	ATION		62-1121019
Pa	rt I Organizations Maintaining Dono	r Advised Funds or Othe	er Similar Funds or Ac	counts Complete if
	the organization answered 'Yes' t	o Form 990, Part IV, line	e 6.	·
		(a) Donor advised t	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 don funds are the organization's property, subject t			Yes No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for timpermissible private benefit??	s, and donor advisors in writing the benefit of the donor or dono	g that grant funds may be r advisor or other	☐ Yes ☐ No
Pai	rt II Conservation Easements Comple	ete if the organization an	swered 'Yes' to Form	
	Purpose(s) of conservation easements held by			350, 7 art 10, line 7.
•	Preservation of land for public use (e.g., re	` `	¬'' <i>*'</i>	rically important land area
	Protection of natural habitat	ecreation or pleasure)	Preservation of certified	• •
	Preservation of open space	ι		Thistoric structure
2	Complete lines 2a-2d if the organization held a	a qualified conservation contrib	ition in the form of a conse	evation easement on the last day
_	of the tax year		ation in the form of a consc	valion casement on the last day
			,	Held at the End of the Year
	Total number of conservation easements		. 2a	
ı	Total acreage restricted by conservation easen	nents	2b	
•	Number of conservation easements on a certif	red historic structure included in	n (a) 2c	
•	Number of conservation easements included in	(c) acquired after 8/17/06	<b>2d</b>	
3	Number of conservation easements modified, to	ransferred, released, extinguis	hed, or terminated by the o	rganization during the taxable
	year ►			
4	Number of states where property subject to con	nservation easement is located	<b>•</b>	
5	Does the organization have a written policy recenforcement of the conservation easement it has been seen as a second of the conservation of the conservation easement in the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation of the conservation	garding the periodic monitoring, olds?	, inspection, violations, and	Yes No
6	Staff or volunteer hours devoted to monitoring,	inspecting, and enforcing ease	ements during the year	
7	Amount of expenses incurred in monitoring, in	specting, and enforcing easem	ents during the year > \$_	
8	Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the req	urements of section	. Yes No
9	In Part XIV, describe how the organization rep- include, if applicable, the text of the footnote to conservation easements	orts conservation easements in the organization's financial st	its revenue and expense satements that describes the	statement, and balance sheet, and e organization's accounting for
Pa	Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or Other S , Part IV, line 8.	Similar Assets
1 6	a If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial statemen	ic exhibition, education, or rese	revenue statement and bala earch in furtherance of publi	ance sheet works of art, historical c service, provide, in Part XIV,
•	b If the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items.	SFAS 116, not to report in its in certain exhibition, education, or reserved.	revenue statement and bala earch in furtherance of publi	ance sheet works of art, historical c service, provide the following
	(i) Revenues included in Form 990, Part VIII,	line 1		<b>►</b> \$
	(ii) Assets included in Form 990, Part X .			<b>►</b> \$
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	t, historical treasures, or other 16 relating to these items.	similar assets for financial	gain, provide the following
•	Revenues included in Form 990, Part VIII, line	1		. <b>&gt;</b> \$
	Assets included in Form 990, Part X		•	<b>▶</b> \$

Schedule D (Form 990) 2008 WILL: Part III Organizations Mainta				62-112 r Other Similar Ass				
'3 Using the organization's accession that apply)	n and other rec	ords, check any of the	e following that are a sign	gnificant use of its collec	tion items (check all			
a Public exhibition	a Public exhibition d Loan or exchange programs							
<b>b</b> Scholarly research	a Public exhibition b Scholarly research d Loan or exchange programs e Other							
c Preservation for future genera	ations	_						
4 Provide a description of the organ Part XIV.					ın			
	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No							
Part IV Trust, Escrow and Cu IV, line 9, or reported	an amount o	ngements Compl on Form 990, Par	ete if organization t X, line 21.	answered 'Yes' to f	Form 990, Part			
1a Is the organization an agent, trus included on Form 990, Part X? .		or other intermediary		er assets not	Yes No			
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and	complete the following	g table					
					Amount			
c Beginning balance				1c				
d Additions during the year				1 d				
e Distributions during the year				1 e				
f Ending balance				1f				
2a Did the organization include an ai	mount on Form	990, Part X, line 21?			Yes No			
<b>b</b> If 'Yes,' explain the arrangement								
Part V   Endowment Funds Co	mplete if org	anization answer	ed 'Yes' to Form 9	90, Part IV, line 10.				
	(a) Current ye	ar (b) Prior yea	r (c) Two years bad	k (d) Three years back	(e) Four years back			
1 a Beginning of year balance								
<b>b</b> Contributions								
c Investment earnings or losses								
d Grants or scholarships								
<ul> <li>Other expenditures for facilities and programs</li> </ul>								
f Administrative expenses								
<b>g</b> End of year balance								
2 Provide the estimated percentage	of the year end	f balance held as:						
a Board designated or quasi-endow	ment 🟲	%						
<b>b</b> Permanent endowment ►								
c Term endowment ►	<del>8</del>							
3a Are there endowment funds not in organization by	n the possession	n of the organization t	hat are held and admin	istered for the	Yes No			
(i) unrelated organizations			•		3a(i)			
(ii) related organizations				•	3a(ii)			
<b>b</b> If 'Yes' to 3a(II), are the related of	_				3b			
4 Describe in Part XIV the intended								
Part VI Investments-Land, B								
Description of investment	(a	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value			
1 a Land	_							
<b>b</b> Buildings								
c Leasehold improvements				2 2 2 2				
<b>d</b> Equipment	-	_	9,460.	8,341.	1,119.			
e Other								
Total. Add lines 1a-1e (Column (d) sho	uid equal Form	990, Part X, column (	(B), line 10(c) ) .	•	1,119.			
BAA				Sched	lule <b>D</b> (Form 990) 2008			

Schedule **D** (Form 990) 2008

Schedule D (Form 990) 2008 WILLIA	MSON COUNTY	SOCCER ASSOCIA	TION	62-1121019	Page 3
Part VII Investments—Other Se					
(a) Description of security or c (including name of security	ategory tv)	(b) Book value	(cost o	c) Method of valuation or end-of-year market value	
Financial derivatives and other financial p			00310	Toria or your market value	
Closely-held equity interests	T T				
Other					
			<del></del>		_
			<del></del>		
Total. (Column (b) should equal Form 990 Part X, co	(R) ling 12)				
Part VIII Investments—Program		orm 990 Part X II	ne 13)	<del></del>	
(a) Description of investmen		(b) Book value		c) Method of valuation	· ·
(L) Description of investment	,,,,,	(1) 500% 74.40	Cost	or end-of-year market value	
<u></u>					
<del>.</del>					
	<del></del>		· · · · · · · · · · · · · · · · · · ·	<del> </del>	
Total. Column (b)(should equal Form 990, Part X, Co	of (B) line 13.) ►				
Part IX Other Assets (See Form	n 990, Part X, I	ne 15)			
	(a) Des	cription		<b>(b)</b> Bo	ok value
		·			
	<del></del>				
		· · · · · · · · · · · · · · · · · · ·			
Total. Column (b) Total (should equal For	m 990 Part X col (	R) line 15)	<del></del>	•	
Part X Other Liabilities (See F			·		······
(a) Description of Liab		(b) Amount			
Federal Income Taxes					
		<u> </u>			
			_		
	· · · · · · · · · · · · · · · · · · ·		_		
Total Column (h) Total (about)	4 V and (D) time (C) =				
Total. Column (b) Total (should equal Form 990, Par		<u> </u>	that reports the area	anization's liability for uncert	ain toy
In Part XIV, provide the text of the footnot positions under FIN 48	e to the organizatio	ir s imanciai statements	mai reports the orga	anization 5 hability for uncerta	ант шх

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		2-1121019	Page 4
	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
. 1	Total evenue (Form 990, Part VIII,column (A), line 12)	<b> </b>	542,112.
2		<del>-</del>	531,584.
3 4	Excess or (deficit) for the year. Subtract line 2 from line 1		10,528.
_	Net unrealized gains (losses) on investments	<del> </del>	<del></del>
5	Donated services and use of facilities	<b> </b>	<del></del>
6	Investment expenses .	<del></del>	
7	Prior period adjustments		<del></del>
8	Other (Describe in Part XIV)	<u> </u>	<del></del>
9		<u> </u>	10 500
	Excess or (deficit) for the year per financial statements Combine lines 3 and 9  rt XII   Reconciliation of Revenue per Audited Financial Statements With Revenue per F	Poturn	10,528.
1	Total revenue, gains, and other support per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	<del> -                                    </del>	
	a Net unrealized gains on investments	1 1	
	b Donated services and use of facilities 2b	-	
	c Recoveries of prior year grants	-	
		-	
	d Other (Describe in Part XIV)		
_	•	2e	
3	1 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	a investments expenses not included on Form 990, Part VIII, line 7b		
	b Other (Describe in Part XIV)	-	
	c Add lines 4a and 4b	4c	
	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
Pa	rt XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses per	r Keturn	
1	Total expenses and losses per audited financial statements .		
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	[ ]	
	a Donated services and use of facilities	_	
	b Prior year adjustments	-	
	c Losses reported on Form 990, Part IX, line 25	-	
	d Other (Describe in Part XIV)	-  _	
	e Add lines 2a through 2d	2e	
_	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b	_	
	b Other (Describe in Part XIV)	_	
	c Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	5	
Pa	rt XIV   Supplemental Information	<del></del>	
Corr	iplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	lines 1b and 2b	; Part V,
DAA	TTT 1001 10/10/10	Cuhad to B /	000/ 2000

Schedule D	(Form 990) 2008 Supplementa	WILLIAMSON	COUNTY SOC	CER ASSOCI	ATION		62-1121019	Pa	age 5
Part XIV	Supplementa	Information (	continued)	<del>-</del>					
•									
					- <del>-</del>				
								- <b></b>	
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Schedule **D** (Form 990) 2008

### SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service additional

► 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.

WILLIAMSON COUNTY SOCCER ASSOCIATION	62-1121019
WILLIAMSON COUNTY SOCCER ASSOCIATION	02 1121015
Pt VI-A, Line 2 Stuart Davis is the son of Robin Davis.	
Pt VI-A, Line 6 Each coach is a member.	
Pt VI-A, Line 7a Each coach has 1 vote in the annual election of	directors.
Pt VI-A, Line 7b Changes to the organization's by-laws have to be	approved by the members.
Pt VI-A, Line 8 _ The Secretary/Treasurer takes minutes of each monthly meeting of the board of	dirrectors and the annual meeting of t
Pt VI-A, Line 10 Form 990 is reviewed by the Secretary/Treasurer, President and Executive	re Vice President before it is filed.
Pt VI-C, Line 19 The organization will provide a copy of its governing documents and financial	statements upon written notification.
·	
	<b> </b>