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Form **990**

Department of the Treasury Internal Revenue Service

932001 02-04-10

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)

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

2009
Open to Public Inspection

<u>A</u>	For the	e 2009 calendar year, or tax year beginning SEP 1, 2009 and ending	AUG 31, 2010	
_		Riessa C Name of organization	D Employer identifi	
В	Check if applicable	Please use IRS	D Employer identifi	Cation number
Γ	~_]Addre	tabel or [
<u> </u>	chang Name	F		000004
<u> </u>	chang	Doing Business As		282394
<u></u>	retum	[Constitution Constitution Const	1 '	
<u>_</u>	Termii	Instructure 1270 JUNGERMANN STE.	<u>E</u> 636.	936.3676
L_	return	City or town, state or country, and ZIP + 4	G Gross receipts \$	<u>973,654.</u>
	Application	SI. PEIERS, MO 033/0	H(a) Is this a group re	eturn
	pendi	F Name and address of principal officer.KELLY ROSS	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	cluded? Yes No
1	Tax-ex	empt status X 501(c) (0 3) ◀ (insert no.)	If "No," attach a	list (see instructions)
		te: WWW.MYSA.ORG	H(c) Group exemptio	
				A State of legal domicile. MO
	art I	Summary		
		Briefly describe the organization's mission or most significant activities: TO PROMOT	E, FOSTER, A	ND
Governance		PERPETUATE THE GAME OF YOUTH SOCCER IN THE ST		
nar		Check this box If the organization discontinued its operations or disposed of mo		
Ver	1	•	1	13
Ĝ		Number of voting members of the governing body (Part VI, line 1a)	3	13
≪ರ		Number of independent voting members of the governing body (Part VI, line 1b)	4	13
Activities &		Total number of employees (Part V, line 2a)	5	10
ξį	1	Total number of volunteers (estimate if necessary)	6	10
Ac	1	Total gross unrelated business revenue from Part VIII, column (C), line 12	<u>7a</u>	7,375.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	6,375.
ē		<u> </u>	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	19,295.	26,377.
en	9	Program service revenue (Part VIII, line 2g)	754,233.	935,865.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14.	1.
п.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12,394.	11,411.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	785,936.	973,654.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
Ø	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	184,223.	221,098.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	
ē	ь	Total fundraising expenses (Part IX, column (D), line 25) 54,555.		
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	802,377.	750,294.
		Total expenses Add lines 13-17 (must equal Part IX, column 14), line 25)	986,600.	971,392.
		Revenue less expenses Subtract line 18 from line RFCEIVED	<200,664.	
es		TOVERSON OCCUPANTO TO THE TIME FILL OF THE TOP OCCUPANTO TO THE TIME FILL OF THE TIME FILL OF THE TOP OCCUPANTO TO THE TIME FILL OF THE TIME	Beginning of Current Year	End of Year
Net Assets or Fund Balances	20		82,750.	49,113.
Ass	21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	290,085.	306,990.
Lee Lee	22	Net assets or fund balances Subtract line 21 from line 20	<207,335.	
请	art II	Signature Block	<u> </u>	<u> </u>
<u></u>	JI C 11	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements	s and to the best of my knowled	ne and belief it is true, correct
2		and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	ye	3 • • · · · · · · · · · · · · · · ·
			16-1	1-2011
Sig		Signature of officer	Date	7 20.1
Her	е		Date	
		KELLY ROSS, PRESIDENT		
		Type or print name and title Propagation Date Date	Check if Prepar	to do to the control of
Paid	er's identifying number structions)			
	parer's	signature Transport, 1 Jegaras CHT 6-7-2011 e	elf- employed	
	Only	Firm's name (or BROWN SMITH WADLACE, L.L.C.	EIN ▶	
096	July	self-employed), address, and 1551 WALL ST #280		
_		ZIP + 4 ST. CHARLES, MO 63303	Phone no. ► 6	36.255.3000
Ma	v the II	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

	990 (2009) MISSOURI YOUTH SOCCER ASSOCIATION, INC. 43-1282394 Page 2 t III Statement of Program Service Accomplishments
1	Bnefly describe the organization's mission TO PROMOTE, FOSTER, AND PERPETUATE THE GAME OF YOUTH SOCCER IN THE STATE OF MISSOURI.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? 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 services? Yes 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 services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code)(Expenses \$ 773,113. including grants of \$)(Revenue \$ 935,865.) TO CREATE, ORGANIZE AND PROVIDE OPPORTUNITIES FOR AMATEUR ATHLETIC COMPETITION AND SPORTING EVENTS FOR SOCCER PLAYERS; ORGANIZE AND PROVIDE COACHING AND DEVELOPMENT TRAINING.
4b	(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 \$)
	Total program service expenses \$ 773.113.

Is the organization described in section 501(c)(S) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 1					
If Yes,* complete Schedule A 1 X 2 Si the organization required to complete Schedule B, Schedule of Contributors? 3 Dd 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 II Section 501(c)(3) organizations. Dd the organization engage in lobbying activities of in individual public office? If Yes,* complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(3)(a) incline and reporting requirement and proxy tax II Yes,* complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations is. Is the organization service on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advised funds or any similar funds or accounts? If Yes,* complete Schedule D, Part II Section 501(c)(4), 501(c)(6), and area, or historic off amounts in such funds or accounts? If Yes,* complete Schedule D, Part II Section 501(c)(6), 501(c)(6), and area, or historic off amounts in such funds or accounts? If Yes,* complete Schedule D, Part IV Dd 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 in management, credit repair, or debt inegotiation services? If Yes,* complete Schedule D, Part IV Dd 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 in management, credit repair, or debt inegotiation services? If Yes,* complete Schedule D, Part IV Dd the organization report an amount for line, buildings, and equipment in Part X, line 10 If Yes,* complete Schedule D, Part IV If Yes,* complete Schedule D, Part X, If Yes,* If Yes,* If Yes,* If Yes,* If Yes,* If				Yes	No
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b Dd the organization maintain collections of works of art, historical treasures, or other similar assets? // "Yes," complete Schedule D, Part I// Dd 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? // "Yes," complete Schedule D, Part I// Dd the organization feetly or through a related organization, hold assets in term, permanent, or quasi-endowments? // "Yes," complete Schedule D, Part V 10	•		_		v
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10 bit the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part VI 1s the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X IX Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X IX Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IX IX Awas the organization as chool described in section 170(b)(1)(b)(i)(i)? If "Yes," complete Schedule E 1da Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part II 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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assis	3	· ·			v
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b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 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 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 to and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
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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 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 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	b				
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Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	17				
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	18				
complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X		•	18		<u>X</u> _
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19				
		·			
	20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		000	

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	l		٠,,
	United States 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 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<u> </u>	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			•
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			4,5
	Schedule J	_23_		X
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 lines 24b through 24d and complete			4,7
	Schedule K. If "No", go to line 25	24a	<u>.</u>	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u>-</u>	
25a	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
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	<u> </u>	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? 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?	1	•	
	If "Yes," complete Schedule N, Part I	31	<u> </u>	<u> X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		
	Schedule N, Part II	32	ļ	<u> X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	<u> X</u>
34	Was the organization related to any tax-exempt or taxable entity?	1		
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u> </u>	<u> X</u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		ŀ	
	If "Yes," complete Schedule R, Part V, line 2	35		<u> X</u>
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		X
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	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
		Form	990 (2009)

Form 990 (2009) MISSOURI YOUTH SOCCER ASSOCIATION, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

			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 1a 30						
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
	(gambling) winnings to prize winners?	1c					
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 4						
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)		j				
3а	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 it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b_	X				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			х			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?						
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		1				
	Financial Accounts						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u> X</u>			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>			
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited		ļ				
	Tax Shelter Transaction?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit						
	any contributions that were not tax deductible?	6a		_ <u>X</u> _			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
_	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			v			
	provided to the payor? If "You " did the payoration potify the depay of the value of the goods as services assembled?	7a 7b		<u>X</u>			
	b If "Yes," did the organization notify the donor of the value of the goods or services provided?						
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	1	Х			
Ч	If "Yes," indicate the number of Forms 8282 filed during the year 7d	-,-					
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal						
•	benefit contract?	7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g					
•	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the						
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings						
	at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?	9a					
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter		-				
а	Initiation fees and capital contributions included on Part VIII, line 12	ł					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities						
11	Section 501(c)(12) organizations. Enter						
	Gross income from members or shareholders . 11a	1					
b	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them)						
	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						

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a	13			
b	Enter the number of voting members that are independent	1b	13			
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?		ļ	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision	ŀ			
	of officers, directors or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 990 was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	s?		5		X
6	Does the organization have members or stockholders?			6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	mbers of the				
	governing body?			7a	X	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other per	sons?		7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during the year				
	by the following		İ			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?	•	į	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code)				
			r		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		<u>X</u>
b	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?			10b	х	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?					
11A	A Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	2a Does the organization have a written conflict of interest policy? If "No," go to line 13					
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ld give rise				
	to conflicts?			12b		_ <u>X</u> _
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," describe				
	ın Schedule O how this is done			12c	<u>X</u>	
13	Does the organization have a written whistleblower policy?			13		<u>X</u>
14	Does the organization have a written document retention and destruction policy?		}	14		_ <u>X</u> _
15	Did the process for determining compensation of the following persons include a review and approva	l by independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		İ			
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		ŀ			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent with a				
	taxable entity during the year?		-	16a		<u> </u>
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eval		n			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organical statements are safeguard to safeguard the organical statements.	inization's				
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(501(c)(3)s only) av	ailable t	or		
	public inspection. Indicate how you make these available. Check all that apply					
	Own website					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, co	onflict of interest po	licy, an	d fina	ncıal	
	statements available to the public			_		
20	State the name, physical address, and telephone number of the person who possesses the books ar	nd records of the org	janızatı	on: 🕨	·	
	THE ORGANIZATION - 636.936.3676					
	1270 JUNGERMANN SUITE E, ST. PETERS, MO 63376					

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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

X Check this box if the organization did not		ıy cu	ırren			, dire	ecto	1		
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours	(6)			sition Il that apply)		LΑ	Reportable compensation	Reportable compensation	Estimated amount of
	per		T	l all	lilat	app	ינעוי ו	from	from related	other
	week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
TRAVIS ROSS (RESIGNED 6/5/10)										
PRESIDENT	10.00	X		X				0.	0.	0.
KELLY ROSS (INTERIM PRES 6/5/10)	1			ļ			ŀ			
VICE PRESIDENT	1.00	X		X	_			0.	0.	0.
WARREN BROWN										
TREASURER	1.00	X		X				0.	0.	0.
CHRIS GRISHAM	1									
SECRETARY	1.00	X		X				0.	0.	0.
VINCE GENTILE	1									!
REGISTRAR	5.00	X		X			_	0.	0.	0.
TERRY CAVIN	İ									
CENTRAL DISTRICT COMMISSIO	1.00	X						0.	0.	0.
JIM OVERMANN										
EASTERN DISTRICT COMMISSIO	1.00	X						0.	0.	0.
V.A. SAMARANAYAKE									:	
SOUTHERN DISTRICT COMMISSI	1.00	X						0.	0.	0.
HILARY PARMALEE								ľ		
WESTERN DISTRICT COMMISSIO	1.00	X						0.	0.	0.
MISTI HOLLRAH										
CENTRAL DISTRICT ALT, COMM	1.00	X	_					0.	0.	0.
MIKE DEANE								_	_	_
EASTERN DISTRICT ALT. COMM	1.00	X						0.	0.	0.
CHRISTINE PHILPOT								_		_
SOUTHERN DISTRICT ALT. COM	1.00	X			<u> </u>	<u> </u>	_	0.	0.	0.
DAVID HIXSON								_	_	_
WESTERN DISTRICT ALT. COMM	1.00	X	_	<u> </u>	ļ	<u>. </u>	ļ	0.	0.	0.
							_			
		 	ļ	 -	<u> </u>	 	<u> </u>			
		\vdash	├	-	\vdash	\vdash	\vdash			

Par	t VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)			
	(A)	(B) (C)							(D)	(E)		(F)	
	Name and title	Average hours	 (c		Pos		n app	kΛ	Reportable compensation	Reportable compensation		Estima amour	
		per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)		othe compens from torganize and rele organize	er sation the ation ated
					. :							•	·
			-										
													
1b	Total								0.	0			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	no re	eceived more than \$100	,000 in reportable			0
	compensation from the organization											Yes	0 No
3	Did the organization list any former officer,		stee	, key	em e	plo	yee,	or h	nighest compensated er	nployee on			
	line 1a? If "Yes," complete Schedule J for s								_		-	3	<u> </u>
4	For any individual listed on line 1a, is the su and related organizations greater than \$150									the organization		.	x
5	Did any person listed on line 1a receive or a									ces rendered to		4	├ ^
•	the organization? If "Yes," complete Sched	•			0	u.,,	u		oo organization to corr	300 101140104 10		5	X
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest co the organization NONE	mpensated inc	lepe	nde	nt c	ontr	acto	rs tl	hat received more than	\$100,000 of compe	nsatio	on from	
	(A) Name and business	address							(B) Description of s	ervices	Con	(C) npensat	ion
													_
								\perp					
	-		•										
2	Total number of independent contractors (i \$100,000 in compensation from the organization)	-	ot lır	nited	d to		se lis)	sted	above) who received m	ore than			
											Fo	rm 990	(2009)

MISSOURI YOUTH_SOCCER ASSOCIATION, INC.

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Form 990 (2009)

	1 990, rt VI			TH SOCCER	ASSOCIATI	ON, INC.	43-1282	394 Page 9
		j Guatomont of theve			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts its	1 a	Federated campaigns	1a					
<u>ra</u>	b	Membership dues	1b					
aŭ.	С	Fundraising events	1c					
ar f	d	Related organizations	1d					
ξ. ÏΞ	е	Government grants (contribu	itions) 1e					
tion S	f	All other contributions, gifts, gra	nts, and	ŀ		,		
Contributions, gifts, grants and other similar amounts		similar amounts not included abo	ove 1f	26,377.				
d d	g	Noncash contributions included in line	s 1a-1f \$	8,631.				
<u>Q g</u>	h	Total. Add lines 1a-1f		•	26,377.			
				Business Code				
S	2 a			711300	484,422.	484,422.		
ervi		OLYMPIC DEVELOR	PMENT	711300	220,974.	220,974.	·	
o Si		CUP PROGRAMS		711300	117,716.		· · · · · · · · · · · · · · · · · · ·	
ev ev		COACHING DEVELO		711300	83,272.	83,272.		
Program Service Revenue	е	OTHER SOCCER F	EES	711300	29,481.	29,481.		
۱ م	f	All other program service rev	enue					-
_	g	Total. Add lines 2a-2f		•	935,865.			
}	3	Investment income (including	g dividends, intere	est, and	4			
		other similar amounts)		•	1.			1.
	4	Income from investment of ta	ex-exempt bond p	proceeds 🕨				
	5	Royalties		•				.
	_		(i) Real	(ii) Personal				
	6 a							
	b	•						
	C	, ,						
		Net rental income or (loss)		(2.01)				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		 				
}	D	Less cost or other basis						
1	_	and sales expenses						
1		Gain or (loss) Net gain or (loss)	L					
		Gross income from fundraisir	a avante (not					
Other Revenue	0 4	including \$	of	+				
Ş		contributions reported on line						
œ		Part IV, line 18	a 10, 000	1				
ᇐ	h	Less: direct expenses	b					
Ó		Net income or (loss) from fun		•				
		Gross income from gaming a	-					
		Part IV, line 19	а					
	b	Less direct expenses	b					
	С	Net income or (loss) from gar	ning activities	•				
-	10 a	Gross sales of inventory, less	returns					
l		and allowances	а					
1	b	Less cost of goods sold	b					
	С	Net income or (loss) from sale	es of inventory	>				
Ī		Miscellaneous Reveni		Business Code				
Ī	11 a	MAILING LIST SA		511140	7,375.		7,375.	
j	ь			900099	7,375. 4,036.			4,036.
ļ	С							
l	d	All other revenue	_					
ŀ	е	Total. Add lines 11a-11d		▶ Ū	11,411.			
	12	Total revenue See instructions.		▶	973,654.	935,865.	7,375.	4,037.
93200 02-04	9 - 10							Form 990 (2009)

MISSOURI YOUTH SOCCER ASSOCIATION, INC.

Form 990 (2009) MISSOURI YOUT
Part IX Statement of Functional Expenses

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

				ete columns (B), (C), and	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) 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	Grants and other assistance to governments,				
	organizations, and individuals outside the US				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	200,573.	89,649.	63,222.	47,702
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	2,276.	2,276.		
9	Other employee benefits				
10	Payroll taxes	18,249.	8,157.	5,752.	4,340
11	Fees for services (non-employees)				
а	Management				
b	Legal	7,505.		7,505.	
С	Accounting	10,810.	5,405.	5,405.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	196.		98.	98.
12	Advertising and promotion	4,830.	2,415.		2,415
13	Office expenses	47,876.	15,727.	32,149.	
14	Information technology				
15	Royalties				
16	Occupancy	28,436.	14,218.	14,218.	
17	Travel	23,973.	23,973.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,694.	3,232.	2,462.	
20	Interest			•	
21	Payments to affiliates				<u> </u>
22	Depreciation, depletion, and amortization	1,662.	831.	831.	
23	Insurance	64,758.	58,282.	6,476.	
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.)				
а		278,468.	278,468.		
b	OLYMPIC AND COACHING DE	257,119.	257,119.		
С	RISK MANAGEMENT	10,242.	10,242.		
d	MISCELLANEOUS EXPENSES	6,238.	3,119.	3,119.	
е	UBI TAXES & PENALTIES	2,487.		2,487.	
f	All other expenses	*			
25	Total functional expenses. Add lines 1 through 24f	971,392.	773,113.	143,724.	54,555.
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				

Part X **Balance Sheet** (A) (B) Beginning of year End of year 21,239. Cash · non-interest-bearing 10. 1 1 74.471. 1,383. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 12,248. 4 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 7 Inventories for sale or use 8 4,300. Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 21,822. basis Complete Part VI of Schedule D 10a 17,705. 1,938. 10b 4,117. b Less accumulated depreciation 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments · program-related. See Part IV, line 11 13 14 Intangible assets 14 5,826. 6,331. 15 Other assets See Part IV. line 11 15 82,750. 49,113. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 5,085. 17 43,870. 18 Grants payable 18 19 Deferred revenue 10,120. 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 253,000. 24 Unsecured notes and loans payable to unrelated third parties 285,000. 24 25 Other liabilities Complete Part X of Schedule D 25 290,085 306,990. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here

X
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances <207,335.>27 27 Unrestricted net assets <257,877.> 28 Temporanly restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances <207,335.>33 <257,877.> 82,750. 49,113. Total liabilities and net assets/fund balances

Form 990 (2009)

Form	990 (2009) MISSOURI YOUTH SOCCER ASSOCIATION, INC. 43-128	2394	Pa	ge 12			
Pa	rt XI Financial Statements and Reporting						
			Yes	No			
1	Accounting method used to prepare the Form 990 Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O						
2a Were the organization's financial statements compiled or reviewed by an independent accountant?							
b	Were the organization's financial statements audited by an independent accountant?	2b		X			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,						
	review, or compilation of its financial statements and selection of an independent accountant?	2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a						
	consolidated basis, separate basis, or both						
	X Separate basis Consolidated basis Both consolidated and separate basis						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						
	Act and OMB Circular A-133?	3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b					
		Form	990 (2009)			

SCHEDULE À (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization **Employer identification number** 43-1282394 MISSOURI YOUTH SOCCER ASSOCIATION, Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) |X| An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II c ____ Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (iii) Type of (vi) Is the (iv) is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization in col. organization in col. (i) listed in your organization in col. (i) organized in the U.S.? organization support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes No Yes No

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

Schedule A (Form 990 or 990-EZ) 2009

•	• •						
	edule,A (Form 990 or 990-EZ) 2009						Page 2
Pa	rt II Support Schedule for	Organization:	s Described in	Sections 170	(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(v	
	(Complete only if you checked	the box on line	5, 7, or 8 of Part I)				
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not		•				1
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf					1	
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions		1				
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included		}				
	on line 1 that exceeds 2% of the		ŀ				
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support		<u> </u>		•		
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources				1		
9	Net income from unrelated business	-					
	activities, whether or not the				ŀ		
	business is regularly carried on						
	Other income. Do not include gain						
	or loss from 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 instructi	ions)			12	
13	First five years. If the Form 990 is for	the organization	s first, second, thir	d, fourth, or fifth ta	ax year as a section		
	organization, check this box and stop	-			•	· // /	▶□
	tion C. Computation of Publi		rcentage				, ————————————————————————————————————
14	Public support percentage for 2009 (li	ne 6, column (f) d	livided by line 11, o	column (f))		14	%
	Public support percentage from 2008			• • •		15	%
	33 1/3% support test - 2009. If the or			line 13, and line 1	14 is 33 1/3% or n		
	stop here. The organization qualifies a	_		•			
	33 1/3% support test - 2008. If the or		_		line 15 is 33 1/3%	or more, check the	s box
	and stop here. The organization qualit						ightharpoons
17a	10% -facts-and-circumstances test	- 2009. If the org	anization did not c	heck a box on line	13, 16a, or 16b,	and line 14 is 10% o	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

b 10% -facts-and-circumstances test - 2008. 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

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Sch Pa	edule A (Form 990 or 990-EZ) 2009 Mart III Support Schedule for (IISSOURI Y Organizations	OUTH SOCC Described in	ER ASSOCI Section 509(a	ATION, IN	C. 43-128	2394 Page 3
Sec	ction A. Public Support				T (Complete only	n you bridding the o	ox on and o or rare a.
-	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and	(4) 4000	(5) 2000	(0) 200.	(4) 2000	(6) 2000	(i) Total
	membership fees received (Do not						
	include any "unusual grants.")	59,289.		8,915.	19,295.	26.377.	113,876.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	708,809.	855,816.		754,233.		3967349.
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization'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						
6	Total. Add lines 1 through 5	768,098.	855,816.	721,541.	773,528.	962,242.	4081225.
7a	Amounts included on lines 1, 2, and					-	
	3 received from disqualified persons				15,173.	15,431.	30,604.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
С	Add lines 7a and 7b		1.2.		15,173.	15,431.	30,604.
_ 8	Public support (Subtract line 7c from line 6)						4050621.
	ction B. Total Support						
Sec	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Sec Cale		(a) 2005 768, 098.	(b) 2006 855,816.	(c) 2007 721, 541.	(d) 2008 773,528.	(e) 2009 962, 242.	(f) Total 4081225.
Sec Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					(e) 2009 962,242.	
Sec Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	768,098.	855,816.	721,541.	773,528.	962,242.	4081225.
Sec Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	768,098.	855,816.	721,541.	773,528.	962,242.	4081225.
Sec Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	768,098. 3,218.	855,816. 455.	721,541. 45.	773,528.	962,242.	3,733.
Sec Cale 9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	768,098.	855,816.	721,541.	773,528.	962,242.	4081225.
Sec Cale 9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain	768,098. 3,218.	855,816. 455.	721,541. 45. 45.	773,528.	1.	3,733.
Sec Cale 9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	768,098. 3,218. 3,218.	455. 455.	721,541. 45. 45.	773,528. 14.	962,242. 1. 1.	3,733. 3,733. 4,951.
Calde 9 10a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12)	768,098. 3,218. 3,218. 771,316.	455. 455. 856,271.	721,541. 45. 45. 915. 722,501.	773,528. 14. 14.	1. 1. 4,036. 966,279.	3,733. 3,733. 4,951. 4089909.
Calde 9 10a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for	768,098. 3,218. 3,218. 771,316.	455. 455. 856,271.	721,541. 45. 45. 915. 722,501.	773,528. 14. 14.	1. 1. 4,036. 966,279.	3,733. 3,733. 4,951. 4089909.
Cale 9 10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	768,098. 3,218. 3,218. 771,316. the organization's	855,816. 455. 455. 856,271. first, second, third	721,541. 45. 45. 915. 722,501.	773,528. 14. 14.	1. 1. 4,036. 966,279.	3,733. 3,733. 4,951. 4089909.
Cale 9 10a b c 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	768,098. 3,218. 3,218. 771,316. the organization's	855,816. 455. 455. 856,271. first, second, third	721,541. 45. 45. 915. 722,501.	773,528. 14. 14.	1. 1. 4,036. 966,279.	3,733. 3,733. 4,951. 4089909. ation, ▶□
Cale 9 10a b c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here	3,218. 3,218. 771,316. the organization's ic Support Per une 8, column (f) dri	855,816. 455. 455. 856,271. first, second, third	721,541. 45. 45. 915. 722,501.	773,528. 14. 173,542. x year as a section	1. 1. 4,036. 966,279.	3,733. 3,733. 4,951. 4089909. ation, ▶□ 99.04 %
Cale 9 10a b c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here Etion C. Computation of Public Public support percentage from 2008	3,218. 3,218. 771,316. the organization's ic Support Per une 8, column (f) div Schedule A, Part	855,816. 455. 455. 856,271. first, second, third first, second, third first, second, third	721,541. 45. 45. 915. 722,501.	773,528. 14. 14. 773,542. x year as a section	962,242. 1. 4,036. 966,279. 1501(c)(3) organiza	3,733. 3,733. 4,951. 4089909. ation, ▶□
Cale 9 10a b c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here Stion C. Computation of Public support percentage from 2008 Public support percentage from 2008	3,218. 3,218. 771,316. The organization's ic Support Perine 8, column (f) division Schedule A, Part istment Income	855,816. 455. 455. 856,271. first, second, third recentage vided by line 13, co.	721,541. 45. 45. 722,501. d, fourth, or fifth ta	773,528. 14. 14. 773,542. x year as a section	962,242. 1. 1. 4,036. 966,279. 501(c)(3) organization	3,733. 3,733. 3,733. 4,951. 4089909. ation, 99.04 % 99.78 %
Cale 9 10a b c 11 12 13 14 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here etion C. Computation of Public support percentage for 2009 (in Public support percentage from 2008 investment income percentage for 20	3,218. 3,218. 3,218. 771,316. the organization's ic Support Perine 8, column (f) directions and the schedule A, Part is street income og (line 10c, column og (line 10c, colum	855,816. 455. 455. 856,271. first, second, third centage vided by line 13, could by line 15 e Percentage in (f) divided by line	721,541. 45. 45. 722,501. d, fourth, or fifth ta	773,528. 14. 14. 773,542. x year as a section	962,242. 1. 1. 4,036. 966,279. 1501(c)(3) organiz	3,733. 3,733. 4,951. 4089909. ation, 99.04 % 99.78 % .09 %
Cale 9 10a b c 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here etion C. Computation of Public support percentage for 2009 (in Public support percentage from 2008 Investment income percentage from 2001)	3,218. 3,218. 3,218. 771,316. the organization's ic Support Perine 8, column (f) directions and schedule A, Part istment Income 2008 Schedule A, F	855,816. 455. 455. 856,271. first, second, third centage vided by line 13, colli, line 15 e Percentage in (f) divided by line 17	721,541. 45. 45. 722,501. d, fourth, or fifth ta	773,528. 14. 14. 773,542. x year as a section	962,242. 1. 4,036. 966,279. 15 16 17 18	3,733. 3,733. 3,733. 4,951. 4089909. ation, 99.04 % 99.78 % .09 % .19 %
Cale 9 10a b c 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here tion C. Computation of Public support percentage from 2008 thorus D. Computation of Investion D. Computation of Investion D. Computation of Investion 33 1/3% support tests - 2009. If the	3,218. 3,218. 771,316. the organization's ic Support Per line 8, column (f) dir Schedule A, Part Istment Income 09 (line 10c, colum 2008 Schedule A, Forganization did no	855,816. 455. 455. 856,271. first, second, third centage vided by line 13, collil, line 15 e Percentage in (f) divided by line Part III, line 17 ot check the box of	915. 722,501. d, fourth, or fifth ta	773,528. 14. 773,542. x year as a section	962,242. 1. 4,036. 966,279. 1501(c)(3) organization in the initial in the initial in the initial initial in the initial in	3,733. 3,733. 4,951. 4089909. ation, 99.04 % 99.78 % .09 % .19 % 7 is not
Cale 9 10a b c 11 12 13 14 Sec 17 18 19a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here Etion C. Computation of Public public support percentage for 2009 (Investment income percentage from 2018 Investment income percentage from 2018 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box ar 33 1/3% support tests - 2008. If the	3,218. 3,218. 3,218. 771,316. the organization's ic Support Per one 8, column (f) divided by the street income one (line 10c, column 2008 Schedule A, Forganization did not stop here. The coorganization did not organization did not organization did not organization did not stop here.	855,816. 455. 455. 856,271. first, second, third centage vided by line 13, co lill, line 15 Percentage in (f) divided by line Part III, line 17 ot check the box of organization qualified to check a box on	721,541. 45. 45. 915. 722,501. d, fourth, or fifth ta column (f)) e 13, column (f)) en line 14, and line les as a publicly su line 14 or line 19a,	773,528. 14. 773,542. x year as a section supported organization and line 16 is more than 3.	962,242. 1. 4,036. 966,279. 1501(c)(3) organization 1518 31/3%, and line 1 tion re than 33 1/3%, a	3,733. 3,733. 3,733. 4,951. 4089909. 408909. 408909
Cale 9 10a b c c 11 12 13 14 Sec 17 18 19a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here Etion C. Computation of Public support percentage for 2009 (Investment income percentage from 2018 Investment income percentage from 2018 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box and stop here	3,218. 3,218. 3,218. 771,316. the organization's ic Support Per ine 8, column (f) divided by Schedule A, Part is street Income 2008 Schedule A, Forganization did not stop here. The coorganization did not keep the street ine street in the street ine street in the street ine street in the street ine street in the street	855,816. 455. 455. 455. first, second, third centage vided by line 13, co lill, line 15 Percentage in (f) divided by line Part III, line 17 ot check the box of organization qualified the check a box on op here. The organ	915. 722,501. d, fourth, or fifth ta column (f)) e 13, column (f)) in line 14, and line ies as a publicly su line 14 or line 19a, inzation qualifies as	14. 1773,528. 14. 1773,542. x year as a section apported organization and line 16 is most appointed supported su	1. 4,036. 966,279. 1501(c)(3) organization 1718 31/3%, and line 1 tion re than 33 1/3%, a rted organization	3,733. 3,733. 3,733. 4,951. 4089909. 408909. 408909

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization

MISSOURI YOUTH SOCCER ASSOCIATION, INC.

Employer identification number 43-1282394

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	·
		(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 advise	ed 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	dvisors in writing that grant funds can be i	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose o	conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pa	art IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e g, recreation or p	pleasure) Preservation of an hist	orically important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of	of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06	2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per	nodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements du	ırıng the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during t	the year 🕨 \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(I	n)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		└── Yes No
9	In Part XIV, describe how the organization reports conservati	•	·
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes t	he organization's accounting for
Da	conservation easements	EAst Listarias Transcorres on Ot	han Cimilan Assats
Fai	rt III Organizations Maintaining Collections of		ner Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
_	With a control of the		
па	If the organization elected, as permitted under SFAS 116, no		
	treasures, or other similar assets held for public exhibition, ed		lic service, provide, in Part XIV, the text of
_	the footnote to its financial statements that describes these r		
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service,	provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical trea		gaın, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items.	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		> \$

	rt III Organizations Maintaining C	1 YOUTH SO								L Page ∠
	3									
3	Using the organization's acquisition, access	ion, and other record	os, cnec	k any of the	tollowing th	at are a si	ignificant (use ot its	collection	items
	(check all that apply):		. $ egin{array}{c} $							
a	Public exhibition	-			hange progr	rams				
ь	Scholarly research	•	• 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co							se in Par	t XIV	
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	sures, or oth	ner sımılar	assets	_	_	
	to be sold to raise funds rather than to be m.								_ Yes	No_
Pai	t IV Escrow and Custodial Arran		ete if org	ganization ai	nswered "Ye	s" to For	m 990, Pa	rt IV, line	9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other a	ssets not	ıncluded		_	
	on Form 990, Part X?								_ Yes	U No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table						
									Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	212						Yes	No
	If "Yes," explain the arrangement in Part XIV									
Pai		f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 1	0			
		(a) Current year		rior year	(c) Two year		(d) Three ye	ears back	(e) Four	years back
1a	Beginning of year balance			7	107		1=1		1-7	2
b	Contributions									
c	Net investment earnings, gains, and losses						•			
4	Grants or scholarships									
	Other expenditures for facilities				 					
•	and programs									
	Administrative expenses									
f	'									
g	End of year balance	, , , , d b alance b ald a			l		 			
2	Provide the estimated percentage of the year	r end balance neid a								
a	Board designated or quasi-endowment	0/	_%							
D	Permanent endowment	%								
C		%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administr	ered for th	ne organiz	ation	Γ.	
	by									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations	•							3b	
4	Describe in Part XIV the intended uses of the									
Pai	t VI Investments - Land, Building			e Form 990	, Part X, line	10				
	Description of investment	(a) Cost or o basis (investr	I		or other (other)	1	ccumulate preciation	d	(d) Book	value
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment			1	6,112.		13,73	37.	2	,375.
e	Other				5,710.		3,96		1	,742.
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colun	nn (B), line 1	'0(c))				4	,117.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 MISSOURI Y	OUTH SOCCER	ASSOCIATION,	INC. 43	-1282394 Page 3
Part VII Investments - Other Securities.	See Form 990, Part X, Im	e 12		
(a) Description of security or category	(b) Book value		(c) Method of value	
(including name of security)	(b) Book value	Co	st or end-of-year ma	rket value
Financial derivatives				
Closely-held equity interests				
Other				
			<u> </u>	· · · · · · · · · · · · · · · · · · ·
				·
				<u></u>
Total (Col (b) must equal Form 990, Part X, col (B) line 12)				
Part VIII Investments - Program Related.	See Form 990, Part X, II	ne <u>13</u>		
(a) Description of investment type	(b) Book value		(c) Method of value	
	(b) Dook Value	Co	st or end-of-year ma	rket value
				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, lin				,, , ,
) Description	· · · · · · · · · · · · · · · · · · ·		(b) Book value
SECURITY DEPOSIT - RENT				2,500.
EMPLOYEE ADVANCES				3,326.
	······································			
				
			···	
Total. (Column (b) must equal Form 990, Part X, col (B) lin			<u> </u>	5,826.
Part X Other Liabilities. See Form 990, Part X	(, line 25.		T	
1 (a) Description of liability		(b) Amount		
Federal income taxes				
			1	
			ļ	
			Į	
			ļ	
Total. (Column (b) must equal Form 990, Part X, col (B) lir	ne 25)			

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for

	dule.D (Form 990) 2009 MISSOURI YOUTH SOCCER ASSOC					1282394	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audite	ed Fina	ancial S	tatemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3			
4	Net unrealized gains (losses) on investments			4		 	
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV)			8			
9	Total adjustments (net). Add lines 4 through 8			9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		u. D.	10			
	t XII Reconciliation of Revenue per Audited Financial Statemen	nts Wit	in Kev	enue p	er Keturr		
1	Total revenue, gains, and other support per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1					
а	Net unrealized gains on investments	2a					
b	Donated services and use of facilities	2b					
С	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIV)	2d					
е	Add lines 2a through 2d				2e		
3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b					
С	Add lines 4a and 4b				4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5		
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents w	ith Exp	penses	per Hetu	<u>m</u>	····
1	Total expenses and losses per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1					
a	Donated services and use of facilities	2a					
b	Prior year adjustments	2b					
С	Other losses	2c					
d	Other (Describe in Part XIV)	2d					
e	Add lines 2a through 2d				2e		
3	Subtract line 2e from line 1				3		-
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1					
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
	Other (Describe in Part XIV)	_4b_					
	Add lines 4a and 4b				4c		
Dai	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) t XIV Supplemental Information				. 5		
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,						4; Part
Α, ΙΙΙΙΙ	2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also compl	iete tnis p	part to p	rovide an	iy addπionai	intormation	
							
				-			-
							
					·		

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

THE COUNCIL.

MISSOURI YOUTH SOCCER ASSOCIATION, INC.

Employer identification number 43-1282394

FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERSHIP OF THE ORGANIZATION IS DIVIDED INTO TWO CLASSES OF MEMBERS, PROVISIONAL MEMBERS AND FULL PROVISIONAL MEMBERS ARE COMPRISED OF THOSE MEMBERS WHOSE APPLICATION FOR MEMBERSHIP HAS BEEN APPROVED BY THE DISTRICT COUNCIL AND THE BOARD OF DIRECTORS, BUT HAS NOT BEEN APPROVED BY THE COUNCIL AT AN ANNUAL MEETING OF THE MEMBERS OF THE ORGANIZATION. FULL MEMBERS ARE COMPRISED OF THOSE MEMBERS WHOSE MEMBERSHIP APPLICATION HAS BEEN ACCEPTED BY THE COUNCIL AT AN ANNUAL MEETING OF THE MEMBERS OF THE CORPORATION. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS OF THE GOVERNING BODY ARE ELECTED BY MAJORITY VOTE OF THE DELEGATES OF THE FULL MEMBERS OF THE ORGANIZATION AT THE ANNUAL MEETING. FORM 990, PART VI, SECTION A, LINE 7B: THE LEGISLATIVE AND JUDICIAL POWERS OF THE ORGANIZATION ARE VESTED IN A COUNCIL CONSISTING OF DULY ELECTED DELEGATES FROM EACH FULL MEMBER. THE COUNCIL HAS THE POWER TO RATIFY,

THE BOARD OF DIRECTORS SHALL TRANSACT ALL BUSINESS OF THE ORGANIZATION,

APPROVE OR REJECT APPLICATIONS FOR PROVISIONAL MEMBERSHIP, RE-EVALUATE AND

RE-DEFINE DISTRICT BOUNDARIES, AND/OR THE NUMBER OF DISTRICTS. SAID

ACTIONS OF THE BOARD OF DIRECTORS SHALL BE SUBJECT TO THE FINAL APPROVAL OF

ALTER, OR REJECT DECISIONS AND POLICIES OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11: UPON RECEIPT OF A DRAFT FORM 990, A

COPY IS PROVIDED TO THE ENTIRE BOARD. CHANGES, IF ANY, ARE INCORPORATED

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

Schedule O (Form 990) 2009

032211
02-03-10

SCHEDULE O

Supplemental Information to Form 990

Department of the Treasury

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

MISSOURI YOUTH SOCCER ASSOCIATION, INC.

Employer identification number 43-1282394

INTO THE FINAL COPY PRIOR TO ITS FILING WITH IRS.

FORM 990, PART VI, SECTION B, LINE 12C: DIRECTORS NOTIFY THE BOARD OF

POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE. THE BOARD OF DIRECTORS

REVIEWS AND SUBSEQUENTLY VOTES ON THE POTENTIAL CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A: THE PROCESS FOR DETERMINING

COMPENSATION OF THE ORGANIZATION'S EXECUTIVE DIRECTOR INCLUDES A REVIEW OF

COMPARABILITY DATA, INCLUDING COMPENSATION OF EXECUTIVE DIRECTORS OF OTHER

STATE SOCCER ASSOCIATIONS, AND CONTEMPORANEOUS SUBSTANTIATION AND

DELIBERATION OF THE DECISION. THE ORGANIZATION DOES NOT CURRENTLY HAVE KEY

EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS

AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 1:

THE ORGANIZATION IS CHANGING FROM A CASH BASIS FORM 990 TO AN ACCRUAL BASIS FORM 990 TO MORE APPROPRIATELY MATCH THE METHOD OF ACCOUNTING UTILIZED FOR BOOK PURPOSES.

FORM 990, PART XI, LINE 2C:

THERE HAVE NOT BEEN ANY CHANGES IN THE EXECUTIVE BOARD'S PROCESS FOR

OVERSEEING THE COMPILATION OF THE FINANCIAL STATEMENTS OR SELECTING AN

INDEPENDENT ACCOUNTANT

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.



Name of the organization MISSOURI YOUTH SO	CCER ASSOCIATION, INC.	Employer identification number 43-1282394
FORM 990, PART I, SUMMARY, LINE 2	2.	
8/31/09 NET ASSETS		
8/31/10 NET INCOME	2,262	
PRIOR YEAR ACCRUAL TO CASH ADJUST	MENT <52,804>	
8/31/10 NET ASSETS	<257,877>	
		····
		· · · · · · · · · · · · · · · · · · ·
	100 - 100 -	
	· · · · · · · · · · · · · · · · · · ·	7.1.1

Form 990 (2008)

Form 990 (2008) MISSOURI YOUTH SOCCER ASSOCIATION, INC. 43-1282394 Page 9 Part VIII Statement of Revenue (D) (A) (B) (C) Revenue excluded from Total revenue Related or Unrelated exempt function business tax under sections 512, 513, or 514 revenue revenue Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 19,295. 8,773. g Noncash contributions included in lines 1a-1f \$ 19,295. h Total. Add lines 1a-1f Business Code 417,421 2 a MEMBERSHIP DUES 711300 417,421 Program Service Revenue 153,098. **b** OLYMPIC DEVELOPMENT 711300 153,098. c CUP PROGRAMS 711300 96,850. 96,850. d COACHING DEVELOPMENT 711300 56,923. 56,923. 29,941 OTHER SOCCER FEES 711300 29,941 f All other program service revenue g Total. Add lines 2a-2f 754,233. Investment income (including dividends, interest, and 14 other similar amounts) 14. Income from investment of tax-exempt bond proceeds 4 5 Royalties (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses . c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from garning activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a MAILING LIST SALES 511140 12,394. 12,394 d All other revenue 12,394. Total, Add lines 11a-11d 785,936. 754,233. Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e 12,394. 14.

Form 990 (2008)

MISSOURI YOUTH SOCCER ASSOCIATION, INC.

43-1282394 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).

	All other organizations must compl				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and	i			
	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	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.		i		
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	5,080.	2,540.	2,540.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			i	
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	163,994.	83,986.	38,321.	41,687.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	2,194.	2,194.	ł	
9	Other employee benefits				
10	Payroll taxes	12,955.	6,425.	3,237.	3,293.
11	Fees for services (non-employees):			-	
а	Management				
ь	Legal	3,631.		3,631.	
	Accounting	9,806.	4,903.	4,903.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	`			
g	Other	2,742.	·	1,372.	1,370.
12	Advertising and promotion	13,238.	6,619.		6,619.
13	Office expenses	40,892.	16,517.	24,375.	-
14	Information technology				
15	Royalties			Ī	
16	Occupancy	25,162.	12,581.	12,581.	
17	Travel	19,832.	19,832.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	İ			
19	Conferences, conventions, and meetings	25,959.	18,774.	7,185.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,092.	1,046.	1,046.	·
23	Insurance	54,182.	48,715.	5,467.	
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.)				
а	UBI TAXES & PENALTIES	3,892.		3,892.	
b	SETTLEMENT	275,000.		275,000.	
c	CUP PROGRAMS AND TOURNA	168,036.	168,036.		
ď	OLYMPIC AND COACHING DE	140,388.	140,388.		
е	MISCELLANEOUS EXPENSES	9,311.	5,153.	4,158.	
f	All other expenses	8,214.	8,214.		
25	Total functional expenses. Add lines 1 through 24f	986,600.	545,923.	387,708.	52,969
26	Joint Costs. Check here I 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				
	coocational campaign and fundraising solicitation				Form 990 (2008

Sch A - Part 1 - #3

* 8-31-2009 Frm 990 *

	n 990 e I rt X	(2008) MISSOURI YOUTH SOCCER ASSOCI	IATION,	INC.	43-	1282	394	. Pa	ige 11
			Beg	(A) inning of year			(B End of		
	1	Cash - non-interest-bearing			1				10.
	2	Savings and temporary cash investments		4,810.	2		7	4,4	71.
	3	Pledges and grants receivable, net			3				
	4	Accounts receivable, net			4				
	5	Receivables from current and former officers, directors, trustees, key							
		employees, or other related parties. Complete Part II of Schedule L			5				
	6	Receivables from other disqualified persons (as defined under section			1 1				
	1	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete							
		Part II of Schedule L			6				
əts	7	Notes and loans receivable, net			7				
Assets	8	Inventones for sale or use			8				
Q	9	Prepaid expenses and deferred charges			9				
	10a	Land, buildings, and equipment: cost basis 10a 17, 98	31.						
	b	Less accumulated depreciation. Complete							
		Part VI of Schedule D 16,04	3.	3,252.	10c			<u>1,9</u>	<u> 38.</u>
	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				<u>_</u>
	14	Intangible assets		2 500	14				-
	15	Other assets. See Part IV, line 11		2,500.	15				31.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	Torre	10,562.	16		8	<u> </u>	50.
	17	Accounts payable and accrued expenses \$745 Pension, \$4340 Pa	yron raxe	S	17			5,0	85.
	18 19	Grants payable			18				
	20	Deferred revenue Tax-exempt bond liabilities			19				
/A	21	Fearow account liability. Complete Part IV of Schodule D			20		-		
ij	22	Payables to current and former officers, directors, trustees, key employees,							
Liabilities	_	highest compensated employees, and disqualified persons. Complete Part I	,						
Ï		of Schedule L	'		22				
	23	Secured mortgages and notes payable to unrelated third parties			23				
	24	Unsecured notes and loans payable			24		28	5.0	00.
	25	Other liabilities Complete Part X of Schedule D		17,233.	25				0.
	26	Total liabilities. Add lines 17 through 25		17,233.	26		29	0,0	85.
		Organizations that follow SFAS 117, check here X and complete	•						
es		lines 27 through 29, and lines 33 and 34.							
anc S	27	Unrestricted net assets	Ł	<6,671.	>27		<20	7,3	35.
Bal	28	Temporanly restricted net assets			28	·			
힏	29	Permanently restricted net assets		i	29				
F		Organizations that do not follow SFAS 117, check here and							
o.		complete lines 30 through 34.							
sete	30	Capital stock or trust principal, or current funds			30				
As	31	Paid-in or capital surplus, or land, building, or equipment fund			31				
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		6 654	32				
_	33	Total net assets or fund balances	-		>33				35.
Do	34 4 VII	Total liabilities and net assets/fund balances		10,562.	34		8	2,7	50.
Pai	t XI	Financial Statements and Reporting		-				Yes	No
	A===					1		. 63	
1		unting method used to prepare the Form 990: X Cash Accruai	Other	-10				v	ш
		the organization's financial statements compiled or reviewed by an independ		nt?	-	-	2a	X	
		the organization's financial statements audited by an independent accountains. To lines 2a or 2b, does the organization have a committee that encumes re-	•		اسلس بيمي		2b		X
C		es" to lines 2a or 2b, does the organization have a committee that assumes re	•	oversignt of the	audπ,		2-	x	1
32		w, or compilation of its financial statements and selection of an independent a result of a federal award, was the organization required to undergo an audit o		t forth in the Sine	 نام ۸۰۰۸	d	2c	Α.	\vdash
Ju		ind OMB Circular A-133?	، مانانان ما كال	CIOILLIAI LIE OMG	ine waa		20		v

Form **990** (2008)

b If "Yes," did the organization undergo the required audit or audits?

Application for Change in Accounting Method

Department of the Treasury Internal Revenue Service			
Name of filer (name of parent corporation if a consolidated group) (s	see instructions)	Identification number (see instructions)	
• //	,	43-1282394	
		Principal business activity code number (see instru	ctions)
MISSOURI YOUTH SOCCER ASSOCIA	TION, INC.	711300	•
Number, street, and room or suite no. If a P.O. box, see the instruct		Tax year of change begins (MM/DD/YYYY) 09	701/2009
1270 JUNGERMANN, SUITE E		Tax year of change ends (MM/DD/YYYY) 08	73172010
City or town, state, and ZIP code		Name of contact person (see instructions)	
ST. PETERS, MO 63376		JENNIFER M. VACHA	
Name of applicant(s) (if different than filer) and identification number	r(s) (see instructions)	Contact person's te	ephone number
		636.754.02	30
If the applicant is a member of a consolidated group,			▶ 🗌
If Form 2848, Power of Attorney and Declaration of	Representative, is attache	ed (see instructions for when Form 2848 is	
	· · · · · · · · · · · · · · · · · · ·		.▶ 🏻
Check the box to indicate the type of applicant.		Check the appropriate box to indicate the	
	· · · · · · · · · · · · · · · · · · ·	of accounting method change being rec	uested.
	•	see instructions)	
'0 05m	poration	Depreciation or Amortization	
		Financial Products and/or Financial Act	ivities of
	ance co. (Sec. 831)	Financial Institutions	-
Qualified personal service	(specify) ► [☑ Other (specify) ► SECTION 446	
 Exempt organization. Enter Code section ► 501 	101/31	FROM CASH TO ACCRUAL E	ASIS
			
Caution. To be eligible for approval of the requested change or to the tay payer's requested change in mathed of accounting			
or to the taxpayer's requested change in method of accounting well as any other information that is not specifically requ	rnis includes all lillorniaudit it lested	equested on this Form 3 i 15 (including its insti	uctions), as
The taxpayer must attach all applicable supplement		throughout this form.	
Part I Information For Automatic Change			
Enter the applicable designated automatic account		per for the requested automatic change. Ente	Yes No
only one designated automatic accounting meth-			
IRS If the requested change has no designated a	automatic accounting metho	d change number, check "Other," and provide	
both a description of the change and citation of the	ie IRS guidance providing th	ne automatic change. See instructions	- 1 1 1 1 1 1
► (a) Change No 122 (b) Other	☐ Description ►		
2 Do any of the scope limitations described in	section 4 02 of Rev Proc	c. 2008-52 cause automatic consent to be	
unavailable for the applicant's requested chan	ge? If "Yes," attach an exp	planation	X
Note. Complete Part II below and then Part IV, and a	also Schedules A through	E of this form (if applicable)	
Part II Information For All Requests			Yes No
3 Did or will the applicant cease to engage in	the trade or business to	which the requested change relates, of	r
terminate its existence, in the tax year of chan			X
If "Yes," the applicant is not eligible to make the	ie change under automation	c change request procedures	31 1 1 2 2 3
4a Does the applicant (or any present or former of			
applicable tax year(s)) have any Federal incor	ne tax retum(s) under exa	mination (see instructions)?	X
If "No," go to line 5			1.5
b Is the method of accounting the applicant is re			
any present or former consolidated group in w			·
either (i) under consideration or (ii) placed in s	<u> </u>		N/A
	Signature (see instruction	•	
Under penalties of perjury, I declare that I have examined this application contains all the relevant facts relating to the application.	cation, including accompanying sition, and it is true, correct, and it	chedules and statements, and to the best of my kno complete Declaration of preparer (other than applicate the complete in the properties of the complete in t	wledge and belief, int) is based on all
information of which preparer has any knowledge	, , , , ,		
) Filer		Preparer (other than filer/applicant	:)
- 6-11.	2011	()	400
		and 1) 1 Jeansel	<u> </u>
Signature and date	•	Signature of individual preparing the application a	nu datė
KELLY ROSS, PRESIDENT Name and title (print or type)		Name of individual preparing the application (print	or tupe)
realing and due (print or type)		7	o, type)
	BROWN	SMITH WALLACE, LLC Name of firm preparing the application	
		ramo or min proparing the application	

Part	II Information For All Requ	iests (continu	ed)		Yes	No
					'	
4c				ue pending (with respect to either the	- ;	
	tax year(s)) for any tax year under	er examination (s	see instructions)?	nt was a member during the applicable	N/	Α
þ				rocedures requining that the operating	- - N1 /	7
	division director consent to the fill If "Yes," attach the consent stater	-			N/	A
a	Is the request to change the meth			day or 120-day window period?	N/	Ā·
·	If "Yes," check the box for the app					
		Date examination		,		
f	If you answered "Yes" to line 4a,	enter the name	and telephone number of the	he examining agent and the tax		
	year(s) under examination	_			1	
	Name ►		[elephone number ▶	Tax year(s) ►	-	7
g	Has a copy of this Form 3115 bee	•			N/	<u> </u>
5a	applicable tax year(s)) have any f			he applicant was a member during the		Х
	If "Yes," enter the name of the (ch		Appeals officer and/or			
	telephone number, and the tax ye		peals and/or a Federal cou	rt	- 1	Ę,
	Name ▶		elephone number >	Tax year(s) ▶	- (
b	Has a copy of this Form 3115 be on line 5a?	en provided to	the Appeals officer and/or	counsel for the government identified	N/	A
С				under consideration by Appeals and/or	, -	63 5 - 5
	,			ed group in which the applicant was a	N/	7
	member for the tax year(s) the ap If "Yes," attach an explanation.	plicant was a m	ember) (see instructions)?		1/ /	
6		to line 4a and/c	or 5a with respect to any p	present or former consolidated group,		
-	attach a statement that provides	each parent co	rporation's (a) name, (l	b) identification number, (c) address,		ľ
		the applicant wa	as a member that is under	examination, before an Appeals office,	,	- 4
	and/or before a Federal court.				- '	-4 '
7				g a limited liability company) treated as d of accounting that is an issue under		-1- -,
				t, with respect to a Federal income tax		
	return of a partner, member, or sh				N	A
	If "Yes," the applicant is not eligi	ble to make the	change			-31
8a				sent) state that the applicant does not		:
	receive audit protection for the rec	quested change	(see instructions)? .			X
	If "Yes," attach an explanation					
ча				le (under either an automatic change of accounting within the past 5 years		
	(including the year of the requeste		· · · · · · · · · · · ·			X
b	· · · · · · · · · · · · · · · · · · ·		lescription of each reques	sted change in method of accounting	-	-3
	(including the tax year of change)	and state wheth	ner the applicant received o	consent		
С				Agreement granting a change was not		÷. ~ .
	an explanation.	r the change wa	is not made or not made in	the requested year of change, attach	· -	- ;
10a		essor or a rela	ated party currently have	pending any request (including any	1	- 1
. va	concurrently filed request) for a pr					X
b				taxpayer, identification number(s), the	-,* ,**	* (; ; ;
		g, change in me	ethod of accounting, or tech	nnıcal advice), and the specific issue(s)	-	
14	in the request(s)	nno ito nun!!	mothed of accounts - 0		X	
11	Is the applicant requesting to character "Yes," check the appropriate	-	_	present and proposed methods of		
	accounting. Also, complete Sched			present and proposed memous of	-	
	Present method:	⊠ Cash	☐ Accrual	☐ Hybrid (attach description)		
	Proposed method:	☐ Cash	☑ Accrual	☐ Hybrid (attach description)	[]	
	· · · · · · · · · · · · · · · · · · ·					

Par	Information For All Requests (continued)	Yes	No				
12 a	If the applicant is either (i) not changing its overall method of accounting, or (ii) is changing its overall method of accounting and also changing to a special method of accounting for one or more items, attach a detailed and complete description for each of the following: The item(s) being changed	- :	-				
b	The applicant's present method for the item(s) being changed	·.					
C	The state of the s						
d							
13	Attach a detailed and complete description of the applicant's trade(s) or business(es), and the principal business	-	- :				
	activity code for each If the applicant has more than one trade or business as defined in Regulations section	1.					
	1.446-1(d), describe: whether each trade or business is accounted for separately; the goods and services		.~.				
	provided by each trade or business and any other types of activities engaged in that generate gross income; the	-: .	1. ,2				
	overall method of accounting for each trade or business, and which trade or business is requesting to change its						
14	accounting method as part of this application or a separate application	-					
14	Will the proposed method of accounting be used for the applicant's books and records and financial statements? For insurance companies, see the instructions	X	-~ ·				
	If "No," attach an explanation		, ,				
15a	Has the applicant engaged, or will it engage, in a transaction to which section 381(a) applies (e.g., a		٠.,				
	reorganization, merger, or liquidation) during the proposed tax year of change determined without regard to any	<u> </u>	1 -				
	potential closing of the year under section 381(b)(1)?		X				
ь	If "Yes," for the items of income and expense that are the subject of this application, attach a statement identifying	- '					
	the methods of accounting used by the parties to the section 381(a) transaction immediately before the date of distribution or transfer and the method(s) that would be required by section 381(c)(4) or (c)(5) absent consent to		J" ,				
	the change(s) requested in this application	1	;				
16	Does the applicant request a conference with the IRS National Office if the IRS proposes an adverse response?	X					
17	If the applicant is changing to either the overall cash method, an overall accrual method, or is changing its method	,=.					
	of accounting for any property subject to section 263A, any long-term contract subject to section 460, or		,				
	inventories subject to section 474, enter the applicant's gross receipts for the 3 tax years preceding the tax year of change.)] 1 ⁵ 1 ²				
		-	* 6 7				
	1st preceding year ended mo 8 yr 09 year ended mo 08 yr 08 yr 08 yr 07	,					
	\$ 785,936 \$ 734,680 \$ 856,271		1				
Part		Yes	No				
18	Is the applicant's requested change described in any revenue procedure, revenue ruling, notice, regulation, or other published guidance as an automatic change request?	N/	7\				
	OHEL DUDISHED QUIDANCE AS AN ADIOMANC CHANGE TECHESIZ		Α				
	· · · · · · · · · · · · · · · · · · ·	11/	` '				
	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent	11/	- :				
19	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures						
19	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent	107					
19	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority						
19	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a						
	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists.						
20	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions)						
20	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists.						
20 21 22	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed?		A				
20 21 22	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation		A				
20 21 22 23a	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation Enter the amount of user fee attached to this application (see instructions).		A				
20 21 22 23a	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation Enter the amount of user fee attached to this application (see instructions).	N/					
20 21 22 23a b Part	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation Enter the amount of user fee attached to this application (see instructions).		No				
20 21 22 23a b Part 24	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation Enter the amount of user fee attached to this application (see instructions). Section 481(a) Adjustment Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment?	N/	No				
20 21 22 23a b Part 24	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation Enter the amount of user fee attached to this application (see instructions). If the applicant qualifies for a reduced user fee, attach the required information or certification (see instructions). Section 481(a) Adjustment Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to	N/	No				
20 21 22 23a b Part 24	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation Enter the amount of user fee attached to this application (see instructions). Section 481(a) Adjustment Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment? If "Yes," do not complete lines 25, 26, and 27 below. Enter the section 481(a) adjustment. Indicate whether the adjustment is an increase (+) or a decrease (-) in	N/ Yes	No				
20 21 22 23a b Part 24	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation Enter the amount of user fee attached to this application (see instructions). Section 481(a) Adjustment Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment? If "Yes," do not complete lines 25, 26, and 27 below. Enter the section 481(a) adjustment. Indicate whether the adjustment is an increase (+) or a decrease (-) in income. O Attach a summary of the computation and an explanation of the methodology	N/ Yes	No				
20 21 22 23a b Part 24	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation Enter the amount of user fee attached to this application (see instructions). Section 481(a) Adjustment Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment? If "Yes," do not complete lines 25, 26, and 27 below. Enter the section 481(a) adjustment. Indicate whether the adjustment is an increase (+) or a decrease (-) in income. O Attach a summary of the computation and an explanation of the methodology used to determine the section 481(a) adjustment. If it is based on more than one component, show the	N/ Yes	No				
20 21 22 23a b Part 24	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Include either a discussion of the contrary authorities or a statement that no contrary authority exists. Attach a copy of all documents related to the proposed change (see instructions) Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation Enter the amount of user fee attached to this application (see instructions). Section 481(a) Adjustment Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment? If "Yes," do not complete lines 25, 26, and 27 below. Enter the section 481(a) adjustment. Indicate whether the adjustment is an increase (+) or a decrease (-) in income. O Attach a summary of the computation and an explanation of the methodology	N/ Yes	No				

Form 3	115 (Rev 12-2009)		Page 4
Par	t IV Section 481(a) Adjustment (continued)		Yes No
26	If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to to entire amount of the adjustment into account in the year of change?	ake the	N/A
27	Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated groupound group, or other related parties?	roup, a	X
Sche	edule A—Change in Overall Method of Accounting (If Schedule A applies, Part I below must be	complete	ed.)
Pai	Change in Overall Method (see instructions)		
1	Enter the following amounts as of the close of the tax year preceding the year of change. If none, state "Nor statement providing a breakdown of the amounts entered on lines 1a through 1g.	ne." Also,	attach a
		At	nount
а	Income accrued but not received (such as accounts receivable)	\$	NONE
b	Income received or reported before it was earned (such as advanced payments) Attach a description of the income and the legal basis for the proposed method		NONE
С	Expenses accrued but not paid (such as accounts payable)		NONE
d	Prepaid expenses previously deducted		NONE
е	Supplies on hand previously deducted and/or not previously reported		NONE
f	Inventory on hand previously deducted and/or not previously reported. Complete Schedule D, Part II		NONE
g	Other amounts (specify) Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment. ▶		NONE
. h	Net section 481(a) adjustment (Combine lines 1a–1g) Indicate whether the adjustment is an increase (+) or decrease (-) in income Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25	\$	NONE
2	Is the applicant also requesting the recurring item exception under section 461(h)(3)?	☐ Yes	⊠ No
3	Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet the close of the tax year preceding the year of change. Also attach a statement specifying the accounting repreparing the balance sheet. If books of account are not kept, attach a copy of the business schedules are Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amount of the profit and loss statement and the balance sheet, a explaining the differences.	method u submitted ounts in l	sed when I with the Part I, lines
Par			
Applic	ants requesting a change to the cash method must attach the following information		
1	A description of inventory items (items whose production, purchase, or sale is an income-producing factor) supplies used in carrying out the business		
2 Sche	An explanation as to whether the applicant is required to use the accrual method under any section of the Codule B—Change to the Deferral Method for Advance Payments (see instructions) N/A	oue or reg	juiations

- If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev. Proc 2004-34, 2004-1 C B. 991, attach the following information
- A statement explaining how the advance payments meet the definition in section 4.01 of Rev. Proc 2004-34.
- If the applicant is filing under the automatic change procedures of Rev. Proc. 2008-52, the information required by section 8.02(3)(a)-(c) of Rev. Proc. 2004-34
- If the applicant is filing under the advance consent provisions of Rev. Proc. 97-27, the information required by section 8 03(2)(a)-(f) of Rev Proc. 2004-34.
- If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 2 1.451-5(b)(1)(ii), attach the following.
 - A statement explaining how the advance payments meet the definition in Regulations section 1.451-5(a)(1).
- A statement explaining what portions of the advance payments, if any, are attributable to services, whether such services are integral to the provisions of goods or items, and whether any portions of the advance payments that are attributable to non-integral services are less than five percent of the total contract prices. See Regulations sections 1 451-5(a)(2)(i) and (3).
- c A statement explaining that the advance payments will be included in income no later than when included in gross receipts for purposes of the applicant's financial reports. See Regulations section 1.451-5(b)(1)(II).
- d A statement explaining whether the inventoriable goods exception of Regulations section 1.451-5(c) applies and if so, when substantial advance payments will be received under the contracts, and how the exception will limit the deferral of income.

Schedule C—Changes Within the LIFO Inventory Method (see instructions)

Part I General LIFO Information

N/A

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all Forms 970, Application To Use LIFO Inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items:
- a Valuing inventory (e.g., unit method or dollar-value method).
- **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc.).
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.).
- **d** Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method).
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable
- 4 If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable.
- 5 Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970.

Part II Change in Pooling Inventories

N/A

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use
- If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1.472-8(b)(1) and (2)
- a A description of the types of products produced by the applicant. If possible, attach a brochure.
- b A description of the types of processes and raw materials used to produce the products in each proposed pool.
- c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces
- d A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared.
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool
- f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
- g A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing.
- If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1 472-8(b)(3)
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1.472-8(c)

Form 3115 (Rev 12-2009) Page 6 Schedule D-Change in the Treatment of Long-Term Contracts Under Section 460, Inventories, or Other Section 263A Assets (see instructions) Change in Reporting Income From Long-Term Contracts (Also complete Part III on pages 7 and 8) N/A To the extent not already provided, attach a description of the applicant's present and proposed methods for reporting income and expenses from long-term contracts. Also, attach a representative actual contract (without any deletion) for the requested change. If the applicant is a construction contractor, attach a detailed description of its construction activities Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see instructions)? ☐ Yes □ No b If "Yes," do all the contracts qualify for the exception under section 460(e) (see instructions)? . . . ☐ Yes ☐ No If line 2b is "No," attach an explanation. If line 2b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-tocost under Regulations section 1 460-4(b)? ☐ Yes □ No If line 2c is "No," is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1 460-4(c)(2)? ☐ Yes ☐ No If line 2d is "Yes," attach an explanation of what cost companson the applicant will use to determine a contract's completion factor If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)? ☐ Yes □ No If "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for longterm manufacturing contracts Attach a description of the applicant's manufacturing activities, including any required installation of manufactured goods C To determine a contract's completion factor using the percentage-of-completion method Will the applicant use the cost-to-cost method in Regulations section 1 460-4(b)? ☐ Yes ☐ No If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and b Regulations section 1 460-5(c))? ☐ Yes □ No Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term 5 contracts or Federal long-term contracts Part II Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III on pages 7 and 8) N/A 1 Attach a description of the inventory goods being changed. 2 Attach a description of the inventory goods (if any) NOT being changed. Is the applicant subject to section 263A? If "No," go to line 4a . . . Yes □No Is the applicant's present inventory valuation method in compliance with section 263A (see instructions)? If "No," attach a detailed explanation ☐ No ☐ Yes Inventory Not Inventory Being Changed 4a Check the appropriate boxes below Being Changed Identification methods: Present method Proposed method Present method Specific identification FIFO . . . LIFO . . Other (attach explanation) Valuation methods Cost Cost or market, whichever is lower Retail, lower of cost or market .

- If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the following information (see instructions).
 - Copies of Form(s) 970 filed to adopt or expand the use of the method

Enter the value at the end of the tax year preceding the year of change

Other (attach explanation)

- Only for applicants requesting advance consent. A statement describing whether the applicant is changing to the method required by Regulations section 1.472-6(a) or (b), or whether the applicant is proposing a different method.
- Only for applicants requesting an automatic change. The statement required by section 22.01(5) of the Appendix of Rev. Proc. 2008-52 (or its successor).

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Part III Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions))

Section A—Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method)
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method).
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S. ratio, or other reasonable allocation method).

Section B—Direct and Indirect Costs Required To Be Allocated

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460 Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked. N/A

		Present method	Proposed method
1	Direct material		
2	Direct labor		
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		-
8	Purchasing costs		
9	Handling, processing, assembly, and repackaging costs		
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities		
	placed in service and not temporarily idle		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes	,	
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18	Engineering and design costs (not including section 174 research and experimental expenses)		
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant .		
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)		
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		
27	Interest		
28	Other costs (Attach a list of these costs)		

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Page 8

	t III Method of Cost Allocation (see instructions) (continued)
Secti	on C-Other Costs Not Required To Be Allocated (Complete Section C only if the applicant is requesting to change its
meth	od for these costs)
	Present method Proposed method
1	Marketing, selling, advertising, and distribution expenses
2	Research and expenses not included in Section B, line 26
3	Bidding expenses not included in Section B, line 22
4	General and administrative costs not included in Section B
5	
6	Cost of strikes
7	Warranty and product liability costs
8	Section 179 costs
9	On-site storage
10	Depreciation, amortization, and cost recovery allowance not included in Section B,
	line 11
11	Other costs (Attach a list of these costs.)
Saha	
Scrie	dule E—Change in Depreciation or Amortization (see instructions) N/A
Applic Applic	ants requesting approval to change their method of accounting for depreciation or amortization complete this section ants <i>must</i> provide this information for each item or class of property for which a change is requested.
	See the List of Automatic Accounting Method Changes in the instructions for information regarding automatic changes
under	sections 56, 167, 168, 197, 1400l, 1400L, or former section 168. Do not file Form 3115 with respect to certain late elections
	lection revocations (see instructions)
1	
•	
_	If "Yes," the only changes permitted are under Regulations section 1 167(a)-11(c)(1)(iii)
2	Is any of the depreciation or amortization required to be capitalized under any Code section (e.g., section
	263A)?
	If "Yes," enter the applicable section ▶
3	has a depreciation, amortization, or expense election been made for the property (e.g., the election under
	sections 168(f)(1), 179, or 179C)?
	If "Yes," state the election made ▶
4a	To the extent not already provided, attach a statement describing the property being changed. Include in the description the
	type of property, the year the property was placed in service, and the property's use in the applicant's trade or business or
	income-producing activity
ь	If the property is residential rental property, did the applicant live in the property before renting it?
C	Is the property public utility property?
5	
J	To the extent not already provided in the applicant's description of its present method, attach a statement explaining how the property is treated under the applicant's present method (e.g., depreciable property, inventory property, supplies under
	Regulations section 1 162-3, nondepreciable section 263(a) property, property deductible as a current expense, etc.)
_	
6	If the property is not currently treated as depreciable or amortizable property, attach a statement of the facts supporting the
_	proposed change to depreciate or amortize the property.
7	If the property is currently treated and/or will be treated as depreciable or amortizable property, provide the following
	information for both the present (if applicable) and proposed methods:
а	The Code section under which the property is or will be depreciated or amortized (e.g., section 168(g)).
b	The applicable asset class from Rev Proc. 87-56, 1987-2 C B. 674, for each asset depreciated under section 168 (MACRS) or
	under section 1400L, the applicable asset class from Rev Proc 83-35, 1983-1 C.B. 745, for each asset depreciated under
	former section 168 (ACRS); an explanation why no asset class is identified for each asset for which an asset class has not
	been identified by the applicant.
С	The facts to support the asset class for the proposed method.
_	
ď	The depreciation or amortization method of the property, including the applicable Code section (e.g., 200% declining balance
	method under section 168(b)(1))
e	The useful life, recovery period, or amortization period of the property.
f	The applicable convention of the property
g	A statement of whether or not the additional first-year special depreciation allowance (for example, as provided by section
	168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property. If not, also provide an explanation
	as to why no special depreciation allowance was or will be claimed

Department of the Treasury Internal Revenue Service

Part I Power of Attorney

Taxpayer name(s) and address

Power of Attorney and Declaration of Representative

Taxpayer information. Taxpayer(s) must sign and date this form on page 2, line 9.

OMB No 1545-0150
For IRS Use Only
Received by:

Date

Social security number(s) Employer identification

	For	IRS	Use	Only	
_					

ue Service	Type of print. See the separate instructions.	Name
Power of	Attorney	Telephone
Caution: For	m 2848 will not be honored for any purpose other than representation before the IRS.	Function

MISSOURI YOUTH SOCCER ASSOCIATION, INC.			number	
1270 JUNGERMANN, SUITE E				
ST. PETERS, MO 63376			43-1282394	
SI. IEIEKS, MO 05570		Daytime telephone num		
		636.936.367	6	
hereby appoint(s) the following representative(s) as attorney(s)-in	n-fact:			
O Department in (a) must also and data this factor as	0.0-4.0			
2 Representative(s) must sign and date this form on page Name and address	2, Part II	CAF No. 40-0004	226P	
FRANK D. MEGARGEL		Telephone No. 636.		
1551 WALL STREET, SUITE 280		Fax No. 636.947		
			ephone No. Fax No	
Name and address	- CHOOK II II	CAE No. 03-0127	347R	
JENNIFER M. VACHA		Telephone No. 636. Fax No. 636.947	754.0230	
1551 WALL STREET, SUITE 280		Fax No. 636.947	.6128	
ST. CHARLES, MO 63303	Check if n	ew: Address 🗌 💮 Tele	ephone No. Fax No.	
Name and address				
	·	Telephone No		
		Fax No.	·····	
	Check if no	ew: Address 🗌 💮 Tele	ephone No 🗌 💮 Fax No. 🔲	
to represent the taxpayer(s) before the Internal Revenue Service	for the following t	ax matters.	\	
O T				
3 Tax matters	T	Nii		
Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (see the instructions for line 3)		orm Number 941, 720, etc.)	Year(s) or Period(s) (see the instructions for line 3)	
	(12.12)	,,	(200 000 000 000 000 000 000 000 000 000	
INCOME		990	201008-201108	
			201008	
INCOME	:	3115		
4 Specific use not recorded on Centralized Authorization check this box See the instructions for Line 4. Specific U	File (CAF). If the p Jses Not Recorde	oower of attorney is for a s d on CAF	specific use not recorded on CAF,	
5 Acts authorized. The representatives are authorized to red I (we) can perform with respect to the tax matters describe documents. The authority does not include the power to recor add additional representatives, the power to sign certain information to a third party. See the line 5 instructions for	ed on line 3, for ex eive refund checks n returns, or the po more information.	ample, the authority to sig (see line 6 below), the pow ower to execute a request	on any agreements, consents, or other ver to substitute another representative to for disclosure of tax returns or return	
Exceptions. An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. See Unenrolled Return Preparer on page 1 of the instructions. An enrolled actuary may only represent taxpayers to the extent provided in section 10 3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan administrator may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practitioner's (levels k and l) authority is limited (for example, they may only practice under the supervision of another practitioner)				
List any specific additions or deletions to the acts otherwis	se authorized in th	is power of attorney		
6 Receipt of refund checks. If you want to authorize a repre	esentative named o	on line 2 to receive, BUT N	IOT TO ENDORSE OR CASH, refund	
checks, initial here and list the name of			,	
Name of representative to receive refund check(s) ▶				

Form	2848	(Rev	6-2008)	

Page	2

7	Notices and communications. Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2			
а	If you also want the second representation	ve listed to receive a cop	y of notices and communi	cations, check this box ▶
b	If you do not want any notices or comm	unications sent to your re	presentative(s), check this	box
8		Service for the same tax, check here	matters and years or pend	
9	 Signature of taxpayer(s). If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requeste otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer. IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED. 			
	+ Jane		6-11.11	PRESIDENT
	8ignature		Date	Title (if applicable)
	KELLY ROSS		MISSOURI YOU	TH SOCCER ASSOCIATION, INC.
	Print Name	PIN Number	Print name of tax	payer from line 1 if other than individual
	Signature		Date	Title (if applicable)
	Print Name	PIN Number		

Part II Declaration of Representative

Caution: Students with a special order to represent taxpayers in qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program (levels k and l), see the instructions for Part II.

Under penalties of penjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Circular 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuanes, and others,
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there, and
- I am one of the following
 - a Attorney-a member in good standing of the bar of the highest court of the junsdiction shown below
 - b Certified Public Accountant—duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c Enrolled Agent—enrolled as an agent under the requirements of Circular 230
 - d Officer---a bona fide officer of the taxpayer's organization.
 - e Full-Time Employee—a full-time employee of the taxpayer.
 - f Family Member—a member of the taxpayer's immediate family (for example, spouse, parent, child, brother, or sister).
 - g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230)
 - h Unenrolled Return Preparer—the authority to practice before the Internal Revenue Service is limited by Circular 230, section 10 7(c)(1)(viii). You must have prepared the return in question and the return must be under examination by the IRS. See Unenrolled Return Preparer on page 1 of the instructions
 - k Student Attorney—student who receives permission to practice before the IRS by virtue of their status as a law student under section 10 7(d) of Circular 230
 - I Student CPA—student who receives permission to practice before the IRS by virtue of their status as a CPA student under section 10.7(d) of Circular 230.
 - r Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

► IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. See the Part II instructions.

Designation—Insert above letter (a-r)	Jurisdiction (state) or identification	Signature	Date
b	МО	Garage V. Clart	6-7-11
b	MO	AGMINE SU	6-7-11

MISSOURI YOUTH SOCCER ASSOCIATION, INC. ATTACHMENT TO FORM 3115 E.I.N. 43-1282394 TAX YEAR ENDED AUGUST 31, 2010

Part II Question 13, Page 3

The applicant is a nonprofit organization exempt from federal income tax under IRC Section 501(c)(3) who's sole mission is to promote, foster, and perpetuate the game of youth soccer in the state of Missouri. The business code for their principal business activity is 711300.

Part IV Question 25

Net increase in income due to change in accounting method from cash to accrual \$0

Applicant's present method of accounting is cash basis. Applicant has not received any income in advance and has not prepaid any expenses, therefore, applicant's 481 adjustment is \$0.

Schedule A Part I Question 3

The cash method of accounting was used when preparing the Balance Sheet and Statement of Revenue, Expenses, and Other Changes in Net Assets for the year ended August 31, 2009. See the attached pages from Form 990 as filed for August 31, 2009.

Form 8868 (Rev. 1-2011)					Page 2	
 If you are filing for an Additional (Not Automatic) 3-More 	nth Extension,	complete only Part II and check this b	 ох		> X	
Note. Only complete Part II if you have already been grante			Form	8868		
If you are filing for an Automatic 3-Month Extension, co						
Part II Additional (Not Automatic) 3-Mor	nth Extensio	n of Time. Only file the original (no c	opies	needed).		
Type or Name of exempt organization				Employer identification number		
print MISSOURI YOUTH SOCCER AS:	SOCCER ASSOCIATION, INC.			43-1282394		
File by the extended Number, street, and room or surte no. If a P.O.			·			
due date for 1270 JUNGERMANN, NO. STE						
return See City, town or post office, state, and ZIP code. F	or a foreign add	fress, see instructions.				
ST. PETERS, MO 63376						
Enter the Return code for the return that this application is	for (file a separa	te application for each return)			01	
Application	Return	Application			Return	
ls For	Code	Is For			Code	
Form 990	01					
Form 990-BL Form 990-EZ	02	Form 1041-A Form 4720			08	
Form 990-PF	03	Form 5227	• •		10	
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other than above)	06	Form 8870			12	
STOP! Do not complete Part II if you were not already gr	anted an auton		siv file	ed Form 8868.		
● The books are in the care of ▶ THE ORGANIZATION						
Telephone No. ► <u>636.936.3676</u>		FAX No. ▶				
 If the organization does not have an office or place of bu 				······································		
If this is for a Group Return, enter the organization's four	digit Group Exe	emption Number (GEN) If th	ıs ıs fo	r the whole gro	oup, check this	
box 🕨 💹 . If it is for part of the group, check this box 🕨			memb	ers the extens	ion is for.	
4 I request an additional 3-month extension of time until	· · · · · · · · · · · · · · · · · · ·	<u>15, 2011</u> .				
5 For calendar year, or other tax year beginning					<u>10</u> .	
6 If the tax year entered in line 5 is for less than 12 mon	iths, check reas	on: Initial return	Final r	etum		
Change in accounting period						
7 State in detail why you need the extension INFORMATION INCOMPLETE AT 3	שדע שדאיו	E IN ODDED TO DDEDA	TC ITT	AV DEMIT	DNC	
INFORMATION INCOMPLETE AT	III 5 IIM	E IN ORDER TO PREPAR	.E. 1	AA KETU.	KIND	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4	720. or 6069. e	nter the tentative tax, less any	T	 -		
nonrefundable credits. See instructions.		······	8a	\$	0.	
b If this application is for Form 990-PF, 990-T, 4720, or	6069, enter any	refundable credits and estimated				
tax payments made. Include any prior year overpayments	ent allowed as a	credit and any amount paid				
previously with Form 8868			8b	\$	0.	
c Balance due. Subtract line 8b from line 8a. Include yo	our payment wit	h this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System). See			8c	\$	0.	
	_	d Verification				
Inder penalties of perjury, I declare that I have examined this form, t is true, correct, and complete, and that I am authorized to prepare	including accomp this form.	anying schedules and statements, and to the	best o	f my knowledge	and belief,	
$\gamma \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim \sim$		-RA	Date	▶ 4-1	3-2011	
				Form 886	58 (Rev. 1-2011)	

Form **8868** (Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev. 4-2009)

● If vou a	re filing for an Automatic 3-Month Extension, complete only Part I and check this box			■ X
	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	: form)		لما
	mplete Part II unless you have already been granted an automatic 3-month extension on a previously f			
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).			<u> </u>
A cornora	tion required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor	nnioto		
Part I only		npiete		▶ □
all other c	orporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a	n avtar	· ··	
	me tax returns.	i exter	ision of time	
noted belo (not autor you must	E Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronicatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consult the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file over the file for Charities & Nonprofits.	ically r	f (1) you want the ated Form 990-T.	additional
Type or orint	Name of Exempt Organization	Emp	loyer identificati	on number
	MISSOURI YOUTH SOCCER ASSOCIATION, INC.	4	3-1282394	Ļ
File by the due date for filing your	Number, street, and room or suite no. If a P O. box, see instructions 1270 JUNGERMANN, NO. STE. E			.,
eturn See nstructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ST. PETERS, MO 63376			
Check typ	e of return to be filed (file a separate application for each return):			
Forr	Form 990-T (corporation)	227 069		
	THE ORGANIZATION			
	oks are in the care of ► 1270 JUNGERMANN SUITE E - ST. PETERS,	MO	63376	
	one No ► 636.936.3676 FAX No. ► rganization does not have an office or place of business in the United States, check this box	-		
		ie ie fo	r the whole group	check this
oox ▶ [If it is for part of the group, check this box			
ıs fo	uest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary APRIL 15, 2011 and to file the exempt organization return for the organization named at the organization's return for a calendar year or tax year beginning SEP 1, 2009 and ending AUG 31, 2010		The extension	
2 If the	s tax year is for less than 12 months, check reason Initial return Final return		Change in accoui	nting period
	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			_
	efundable credits. See instructions	3a	\$. 0
	s application is for Form 990-PF or 990-T, enter any refundable credits and estimated			
	payments made Include any prior year overpayment allowed as a credit	3b	\$	0
	ince Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, but with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			
400	with the coupon of, it required, by using Entire (Electronic rederal Tax Payment System).	I	l	
	instructions	3c	s	

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.