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Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

OMB No 1545-0047

<u>A</u>	For th	e 2010 calendar year, or tax year beginning APR 1, 2010 and ending	MAR 3	31, 2011	
	Check if applicab		D Em	ployer identifi	cation number
	Addre	USA FOOTBALL, INC.	i		
	Name chang	Doing Business As		11-3	667205
	In:tial return	Number and street (or P.O. box if mail is not delivered to street address) Room/su	ite E Tele	ephone numbe	
	Terma			-	614-7750
	Amen	ded Ct.	G Gros	s receipts \$	14,088,401.
	Apple		<u> </u>	this a group re	
	pendi	F Name and address of principal officer:SCOTT HALLENBECK		or affiliates?	Yes X No
		SAME AS C ABOVE			luded? Yes No
<u> </u>	Tax·ex				list. (see instructions)
		te: > WWW.USAFOOTBALL.COM		roup exemptio	,
					State of legal domicile: IN
		Summary	uai oi ioriita	1011. 2002 N	Otate of legal dofficies. 111
-		Briefly describe the organization's mission or most significant activities: SEE SCHE	DITTE C)	
Governance] `	DELICION DE LA CAMBRIA DE LA C	<u> </u>		
na	2	Check this box if the organization discontinued its operations or disposed of m	ore than 2	5% of its not as	ecate
Š	1	Alternative of realizer manufacture of the appropriate to the definition of the control of the c		3	15
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			15
లు లు	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	32
Activities	6	Total number of volunteers (estimate if necessary)		6	150
ŧ	7.2	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
٩		Net unrelated business taxable income from Form 990-T, line 34			0.
20	1 ~	The street of th		or Year	Current Year
(Tablehand)	8	Contributions and grants (Part VIII, line 1h)		00,000.	11,740,000.
ž,	9	Program service revenue (Part VIII, line 2g)		59,164.	1,013,405.
\$	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		71,330.	206,848.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		31,221.	1,128,148.
Ü		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		61,715.	14,088,401.
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	7,0	0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
		Salaries, other compensation, employee benefits, (Part X, column (A), tines 5-10)	1 5	24,646.	2,452,238.
§ (8	160	Professional fundraising fees (Part IX, column (A) line 11e)	<u> </u>	0.	2,432,236.
Sesuedx		Total fundraising expenses (Part IX, column (D), line 25)			
<u> </u>	17	Other expenses (Part IX, column (A), lines 1a-11(A) 1(24) 2012	<u> </u>	96,467.	6,810,561.
~		Total automorp Add Imag 40 47 (must be all Day IV)		21,113.	9,262,799.
		Revenue less expenses. Subtract line 18 from Ing 12 GAL 1.17			
28	19	Haverida less experises. Subtract line 18 from line 2.3.1. 1.1		59,398.	> 4,825,602.
anc and	20	Total assets (Part X, line 16)		of Current Year	End of Year
ASS	21	Total fiabilities (Part X, line 26)		28,419.	13,164,172.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		14,486. 13,933.	1,067,058.
P	artill	Signature Block	1,2	113,933.	12,097,114.
-		Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta	lomanta and	l to the best of m	viraniladas and halist wis
		et, and complete. Declaration of preparer (other than officer) is based on all information of which preparer			y knowledge and belief, it is
n ne	, GUITEL		arer nas any		
o:-		Signature of officer		1 /9 1 1 Z	······································
Sig				Date	
Her	0	SCOTT HALLENBECK, EXECUTIVE DIRECTOR			······································
_			Date ,	, Check	PTIN
Date		Print/Type preparer's name Preparer's signature	Valle	/ r	- 1
Paid		JOANN WOODSON Dinn Woodson	11176	self-employs	0
	Oab.	Firm's name CALIBRE CPA GROUP PLLC		Firm's EIN	
บชย	Only	Firm's address 1850 K STREET, N.W.			000\004 0004
	. 41	WASHINGTON, DC 20006		Phone no. (202)331-9880
		3S discuss this return with the preparer shown above? (see instructions)			X Yes No
0320	D1 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2010)

	990 (2010) USA FOOTBALL, INC.	11-3667205	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		🔲
1	Briefly describe the organization's mission:		
	AS FOOTBALL'S NATIONAL GOVERNING BODY, USA FOOTBALL LI		
	DEVELOPMENT, INSPIRES PARTICIPATION, AND ENSURES A POS	SITIVE EXPERIE	NCE
	FOR ALL YOUTH, HIGH SCHOOL AND OTHER AMATEUR PLAYERS.		
2	Did the organization undertake any significant program services during the year which were not listed on		r
	the prior Form 990 or 990 EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.	_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es? Yes	LX 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		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	t of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	VD 4 1 274	000 >
48	(Code:) (Expenses \$ 7,060,729. including grants of \$ BUILDING COALITIONS, ADVOCATING POSITIONS AND CAUSES,)(Revenue \$ 1,374,	<u>088.</u>)
	PRACTICES AND STANDARDS, AGGREGATING RESOURCES, AND I		POI.
	SPORT OF AMATEUR FOOTBALL FOR YOUTH.	ROMOTING THE	
	DIORI OF AMATEON FOOTBALLE FOR 1001H.		
			
			
		· · · · · · · · · · · · · · · · · · ·	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$	}
		, , , , , , , , , , , , , , , , , , , ,	
			·
		·····	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	. 1		
	· · · · · · · · · · · · · · · · · · ·		
		,	
			<u> </u>
4d	Other program services. (Describe in Schedule O.)		
4u	(Expenses \$ including grants of \$) (Revenue \$	1	
4e	Total program service expenses ► 7,060,729.		
	7 7 0 0 7 7 2 3 4	Earm Q	90 (2010)
03200		i omi o	(2010)

Form 990 (2010) USA FOOTBALL, INC.

Part IV Checklist of Required Schedules

<u> </u>			_	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			İ
_	If "Yes," complete Schedule A.		X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		\ .
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	_5		
O	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-0_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			-
•	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	Ŭ		
_	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	X	1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	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	11b		X
c	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	11c		X
d	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 IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			<u></u>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	<u> </u>	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			.,
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a	 -	_^
D	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		-21
.0	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
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	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			T
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
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		х
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
þ	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note, Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		<u> </u>
			~~~	

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	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		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			
	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			
	Schedule K. If "No", go to line 25	24a		<u> X</u>
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	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		
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
þ	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			77
	Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			v
~~	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			v
28	Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		X
20	instructions for applicable filing thresholds, conditions, and exceptions):		類類	
•	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	HEEVER	X
b		28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of		i	
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes X No			Ì
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			ĺ
	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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	1		
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	99U (	2010)

	Check if Schedule O contains a response to any question in this Part V			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 108		res	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b (	T	14 13. 7	
	Did the organization comply with backup withholding rules for reportable payments to vendors and re	1.0		7	E
	(gambling) winnings to prize winners?	-portable garring	1c	X	272 4
a.	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			3 84	· 22.
	filed for the calendar year ending with or within the year covered by this return	2a 32	1		1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2b	X	1
~	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction		20		192
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	5)	375-61	STERE	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3a		_
	• • • • • • • • • • • • • • • • • • • •		3b	-	<del>                                     </del>
ra	At any time during the calendar year, did the organization have an interest in, or a signature or other interest in a facility approach to a facility approach t			1	
•	financial account in a foreign country (such as a bank account, securities account, or other financial at #Wood account, or other financial at	account)?	4a	74.74°.4	X
D	If "Yes," enter the name of the foreign country:				in the
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	ccounts.			
5a			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>
Sa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit	1	Ì	
	any contributions that were not tax deductible?		6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contribut	ons or gifts			
	were not tax deductible?		6b		İ
,	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 ser	vices provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		154	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	··· <del>···</del>	7e	z z . <u> </u>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Fo				
ħ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7g 7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di		7.0.3	Callett	ن دید
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		CLACO		
٠.		any ume ouring the year?	8		-2 - 2
,	Sponsoring organizations maintaining donor advised funds.		REG	5.GE	
a	Did the organization make any taxable distributions under section 4966?		9a	<b> </b>	
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	- No 1 - 1	
)	Section 501(c)(7) organizations. Enter:	i			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	经验		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
ı	Section 501(c)(12) organizations. Enter:	1			
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				ؙ <u>ؙڔؙ؞</u> ڂؽ
	amounts due or received from them.)	11b			
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1211 - 121 1211 - 121		ili. Lipin i
	Section 501(c)(29) qualified nonprofit health insurance issuers.			1 47 jijî 3 47 jijî	-,:
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		MELL.	Çağin,	23:4
	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b	7 7		
	Catanaha a sasant at sasan sa sa sa sa	13c			<u>-</u> -
	Did the organization receive any payments for indoor tanning services during the tax year?	100	1	(광택 <u>조리)</u>	* ====
2	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14a 14b	}	X
ь				1	ı

Form 990 (2010) USA FOOTBALL. INC. 11-3667205 Page 6 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year ), i.e. b Enter the number of voting members included in line 1a, above, who are independent 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? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Х Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a X 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 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise X 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X 12c Does the organization have a written whistleblower policy? 13 Does the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official ....... b Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > IN Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for 18 public inspection. Indicate how you make these available. Check all that apply. Own website ___ Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: JIM ELIAS CPA - 317-614-7750

Form **990** (2010)

46204

45 N. PENNSYLVANIA STREET SUITE 700.

INDIANAPOLIS.

#### USA FOOTBALL, INC.

11-3667205

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

Section A. 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.
- 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, if any. 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.

(A)	(B)		organization compensat (C)					(D)	(E)	(F)	
Name and Title	Average			Pos				Reportable	Reportable	Estimated	
	hours per			(check all that apply)			ly)	compensation	compensation	amount of	
	(describe	ndividual trustee or director						from the	from related organizations	other compensation	
	hours for	5	8		į	E.		organization	(W-2/1099-MISC)	from the	
	related	ruste	irust		28	Tipen:		(W-2/1099-MISC)		organization	
	organizations	de l	institutional trustee		Key employee	yee yee	<b>5</b>			and related	
	in Schedule O)	Ngu	Instr	Officer	Keye	Highest compensated employee	Former			organizations	
RAY ANDERSON								_	_		
DIRECTOR	1.00	X		<u> </u>	<u> </u>			0.	0.	0.	
JOE BROWNE	1				1				_	_	
DIRECTOR	1.00	X	<u> </u>	├	-	<del> </del>		0.	0.	0 .	
BRIAN MITCHELL	1 00										
DIRECTOR	1.00	X			-			0.	0.	0.	
JASON BELSER	1 00	7						_		•	
DIRECTOR	1.00	Х			┢	$\vdash$		0.	0.	0	
TOM COVE	1.00	v	j					0.	0.	^	
DIRECTOR BOB GARDNER	1.00	Δ		$\vdash$	<del> </del>	-		<u> </u>	0.	0	
DIRECTOR	1.00	v						0.	0.	0	
MARK MEANA	1.00	Α	$\vdash$		$\vdash$		-	<u></u>	0.	<u> </u>	
SECRETARY	1.00	x	Ì		1			0.	0.	0.	
GRANT TEAFF											
DIRECTOR	1.00	x			1			0.	0.	0	
DEBBIE YOW					1	† -					
DIRECTOR	1.00	X						0.	0.	0	
JON BUTLER											
DIRECTOR	1.00	X						0.	0.	0	
MERRIL HOGE											
DIRECTOR	1.00	X						0.	0.	0	
ROGER GOODELL											
DIRECTOR	1.00	X				L		0.	0.	0 .	
CARL FRANCIS											
DIRECTOR	1.00	X	<u> </u>			<u> </u>		0.	0.	0.	
KEITH V. RUCKER											
DIRECTOR	1.00	X				<u> </u>		0.	0.	0.	
DEMAURICE F. SMITH									_		
DIRECTOR	1.00	X	<u> </u>	<u> </u>	ļ			0.	0.	0.	
CARL PETERSON								_	_	_	
CHAIRMAN	1.00	X	<u> </u>	<u> </u>	ļ	<u> </u>		0.	0.	0.	
ALEXIA GALLAGHER			ŀ					_		_	
DIRECTOR	1.00	X	<u> </u>				Ц	0.	0.	0 . Form <b>990</b> (2010	

032007 12-21-10

Tocolion Ac Officers, Directors, 1	usides, ivey	<u>inbi</u>	uyee	:S, 2	na i	підп	est	Compensated Employe	ees (commueu)		
(A) (B)				•	C)			(D)	(E)	(E)	<b>(F</b> )
Name and title	Average Position hours per (check all that apply)							Reportable Reportable			Estimated
	hours per week (describe hours for	trustee or director		k all		T		compensation from the organization	compensation from related organization (W-2/1099-Mi	d ns	amount of other compensation from the
	related	Stee	fuse	[발 ] (W-2/1099-MISC)		•		organization			
	organizations in Schedule O)	ਾ ਜ਼	institutional trustee	Officer	Key employee	Highest compensated employee	ormer				and related organizations
SCOTT HALLENBECK	+ -,	-	<del>  -</del>	<u> </u>	_	- 8	Ë	<u> </u>	······································		
EXECUTIVE DIRECTOR	40.00	Ì	}	x	x	$\mathbf{x}$		315,784.		0.	33,919.
STEPHEN ALIC			T		<del></del>	1					33/3131
DIRECTOR OF COMMUNICATIONS	40.00					X		107,778.		0.	18,508.
KAREN GOODWIN		$\Box$						, , , , , , , , , , , , , , , , , , , ,			
CONTROLLER	40.00	L				X	l	100,613.		0.	17,982.
NICK INZERELLO											
DIRECTOR OF FOOTBALL DEVELOPMENT	40.00		<u>L</u> .		İ	X		118,712.		0.	19,328.
MATTHEW SICCHIO											
DIRECTOR OF BUSINESS OPERATIONS	40.00	_	_		_	X		118,513.		0.	19,312.
				_		-					
		-			-						
		_	-								
							L				
1b Sub-total		••			. <b>.</b> .			761,400.		0.	109,049.
c Total from continuation sheets to Part								0.		0.	0.
d Total (add lines 1b and 1c)								761,400.	<del></del>	0.	109,049.
2 Total number of individuals (including but	not limited to th	nose	liste	ed al	bove	e) wh	no re	eceived more than \$100,	,000 in reportab	le	-
compensation from the organization	·										Yes No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for											3 X
4 For any individual listed on line 1a, is the s	sum of reportab	le co	 omn	ensa	 atıor		 I oti	her compensation from t	he organization	• •••	A A
and related organizations greater than \$19	50.000? <i>If</i> "Yes.	" co	mol	ete S	Sche	eduk	. J f	or such individual	ne organization		4 X
5 Did any person listed on line 1a receive or									dual for services		
rendered to the organization? If "Yes," con											5 X
Section B. Independent Contractors						•					
Complete this table for your five highest of the organization.	ompensated in	depe	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of con	npens	ation from
(A)							T	(B)			(C)
Name and busines	s address							Description of se	ervices	С	ompensation
HEADRUSH CREATIVE, 17 WA	SHINGTO	N .	STI	REI	ΞT						
4TH FLOOR, SOUTH NORWALK						•	k	CREATIVE CON	SULTING		347,193.
ORASES							_	WEB APPLICAT			
7101 GUILFORD DRIVE, FRE	DERICK,	MI	D 2	217	70:	1		DEVELOPMENT	<i>y</i> = •		233,925.
TABACCO ROAD TECHNOLOGIE							-	WEB APPLICAT	ION		
TRAIL, CHAPEL HILL, NC 2	-				_			DEVELOPMENT		l	177,500.
GARRET SHEA							SPONSORSHIP AND				
7 WYNNEWOOD DRIVE, CRANE	URY, NJ	_01	<u>85:</u>	12				EVENT CONSULY	ring	L	130,317.

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization

P	art V	Statement of Revenue					
200 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats	1:	a Federated campaigns 1a			1 .		
e z	l	b Membership dues		]	1 =	_	
s, c	(	c Fundraising events 1c			[-	ļ	
gifts, lar an	,	d Related organizations 1d			· · · · · · · · ·		, ; '
ഗ്⊏	Ι.	e Government grants (contributions) 1e					<i>₹ ,</i> - [™] #_
r Si	۱ ۱	f All other contributions, gifts, grants, and					
Per Per			1740000.			1 - 1 - 1 - 1 - 1 - 1	
o tr	١.	Noncash contributions included in lines 1a-1f; \$					
Contribution and other sir		h Total. Add lines 1a-1f		11740000.		<i>#</i> 1	
_	<u> </u>	Total ros mos ra ri	Business Code				,
ø)	2 :	MEMBERSHIP INCOME	900099		654,290.	,	THE COURT OF THE
Program Service Revenue	2 ;	EVENTS	900099	654,290. 359,115.	359,115.		
è a	•	-	900099	339,113.	359,115.		
ΕŞ	<b>'</b>	· · · · · · · · · · · · · · · · · · ·					
Ra Re		d	•	· · · · · · · · · · · · · · · · · · ·			
Š	<b>'</b>	e			<u> </u>		
т.	l '	f All other program service revenue			to Table 1 and Table 1 and 1		F
	<u> </u>	Total. Add lines 2a-2f		1,013,405.	<u>चित्रके स्वरा</u> क्त संस्थान		<b>在自動性的發展</b>
	3	Investment income (including dividends, intere					
i	}	other similar amounts)		206,848.			206,848.
	4	Income from investment of tax-exempt bond pa					
1	5	Royalties	🕨	26,240.			26,240.
		(i) Real	(ii) Personal				
	6 a	a Gross Rents					
	ı	Less: rental expenses					
		Rental income or (loss)					
		d Net rental income or (loss)		]	1		
	7 8	a Gross amount from sales of (i) Securities	(ii) Other			-,	
		assets other than inventory					
		Less: cost or other basis					
	-	and sales expenses		No. 2 and Care Control of the		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	han a sa sa sa sa sa sa sa sa sa sa sa sa s
	١,	Gain or (loss)					
		d Net gain or (loss)		77 F 14 W W			೬೩೨ ಕೆ ೧೫ ರವಿಕಾಡಿಸಿಕೆ! ೯ 
		Gross income from fundraising events (not	• • • • • • • • • • • • • • • • • • • •				-055 <u>-1967-1</u>
),e	"						
ver							
æ		contributions reported on line 1c). See					
Other Revenue		Part IV, line 18 a					
ਠ		b Less: direct expenses b				ารา <u>ร์โ</u> รร์หลัดใชกัดใช่ตู้เล้า	
		Net income or (loss) from fundraising events	<b>&gt;</b>				·
	9 a	a Gross income from gaming activities. See					
		Part IV, line 19 a					
	t						
	C	Net income or (loss) from gaming activities	<u></u>				
i	10 a	Gross sales of inventory, less returns			-11		
		and allowances a	94,590.				
	b	Less: cost of goods sold b			84, 54° - 15		
		Net income or (loss) from sales of inventory	<b>&gt;</b>	94,590.	94,590.		
		Miscellaneous Revenue	Business Code			า และเกลือน เรียก	
	11 a	SPONSORSHIPS	900099	741,225.			741,225.
	t	1/7/2/27/7 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	900099	198,048.	198,048.		
		PARTICIPANT INCOME	900099	58,655.	58,655.		
			900099	9,390.	9,390.		<del></del>
	_	Total. Add lines 11a-11d		1,007,318.		्री न ्≅ल डीक्ट डेंग्डर्स	
į	12	Total revenue. See instructions.			1,374,088.	0.	974,313.
03200		Total revenue. Con mandendina.	····	T#000#0T*	#12141000	U •	5 14,313.

### Part IX Statement of Functional Expenses

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

	All other organizations must con		not required to comple	te 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 U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	348,734.		348,734.	<u> </u>
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and	340,734.		340,734.	
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	1,558,204.	1,237,989.	320,215.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	124,494.			
9	Other employee benefits	281,262.			
10	Payroll taxes	139,544.	93,047.	46,497.	
11	Fees for services (non-employees):				
	Management		0.765	E4 053	
b	Legal	57,018.	2,765.	54,253.	
C	Accounting	4,500.		4,500.	
d	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees		<u> 1905 wikip la 154</u>	21 - 2	
g	Other	1,784,916.	1,700,437.	84,479.	
12	Advertising and promotion	319,033.			
13	Office expenses	915,106.			
14	Information technology	327,397.			
15	Royalties		•		
16	Occupancy	447,787.	72,630.	375,157.	
17	Travel	712,324.	636,929.	75,395.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	127,293.	109,043.	18,250.	
20	Interest		- · · · · · · · · · · · · · · · · · · ·		 
21	Payments to affiliates	F70 004			
22	Depreciation, depletion, and amortization	579,931.	<i></i>	579,931.	
23	Insurance	95,647.	66,164.	29,483.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A)				
а	amount, list line 24f expenses on Schedule 0.)  AWARDS	1,228,800.	1,228,800.	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	**************************************
b	SPONSORSHIP	74,668.	58,194.	16,474.	
C	DUES AND SUBSCRIPTIONS	67,604.	25,759.		
d	FULFILLMENT	27,961.	27,961.	41,043.	
e	MISCELLANEOUS	22,810.	21,471.	1,339.	
ť	All other expenses	17,766.	16,021.	1,745.	
25	Total functional expenses. Add lines 1 through 24f	9,262,799.	7,060,729.	2,202,070.	0.
26	Joint costs. Check here ▶ ☐ if following SOP				
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
02204	12-21-10			<del>!</del>	Form <b>990</b> (2010)

Form 990 (2010)
Part X Balance Sheet

Pa	ĽΫ́	Balance Sheet			<del></del>		
	1				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments	2,266,611.	2	981,869.		
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	40,933.	4	5,689,675.		
	5	Receivables from current and former officers, di					
		employees, and highest compensated employe of Schedule L					
	6	Receivables from other disqualified persons (as	define			- 5	F 1 - 42 T4229 - 267
		4958(f)(1)), persons described in section 4958(c				7-2	/ 15 Kangarangan
		employers and sponsoring organizations of section				1	1
		employees' beneficiary organizations (see instru				1	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
र्घ	7	Notes and leans receivable not	ictions)	* * * * * * * * * * * * * * * * * * * *		6	
Assets	8	Notes and loans receivable, net	•••		00.000	7	05.445
⋖	9	Inventories for sale or use					85,415.
			1		139,672.	9	207,426.
	IVa	Land, buildings, and equipment: cost or other		1 062 205			自用 12 第一套 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4
		basis Complete Part VI of Schedule D					
		Less: accumulated depreciation		910,545.		10c	952,780.
	11	Investments - publicly traded securities	4,700,828.	11	5,202,920.		
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets				14	
1	15	Other assets. See Part IV, line 11		·····	31,998.	15	44,087.
	16	Total assets. Add lines 1 through 15 (must equa	al line 3	4)	8,228,419.	16	13,164,172.
	17	Accounts payable and accrued expenses	725,678.	17	532,840.		
	18	Grants payable				18	
	19	Deferred revenue			288,808.	19	534,218.
	20	Tax-exempt bond liabilities				20	
Liabilities	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D,		21	
<u></u>	22	Payables to current and former officers, director				1	
Ë		highest compensated employees, and disqualifie		· ·		¥ - = ;	
		of Schedule L			·	22	
- 1	23	Secured mortgages and notes payable to unrela	ited thii	d parties		23	
	24	Unsecured notes and loans payable to unrelated	third p	oarties		24	
	25	Other liabilities. Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25	· · · ·	[	1,014,486.	26	1,067,058.
_		Organizations that follow SFAS 117, check he	re 🕨	X and complete		( T)	
893	_	lines 27 through 29, and lines 33 and 34.					
Ē	27	Unrestricted net assets			3,450,216.	27	2,579,473.
Fund Balances	28	Temporarily restricted net assets	763,717.	28	6,517,641.		
2	29	Permanently restricted net assets	3,000,000.	29	3,000,000.		
or Fu		Organizations that do not follow SFAS 117, ch complete lines 30 through 34.					
इ	30	Capital stock or trust principal, or current funds			Fig. 1899 Sauton 2 at Turn 7 -	30	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
SS	31	Paid-in or capital surplus, or land, building, or eq		31			
Net Assets or	32	Retained earnings, endowment, accumulated inc	cibilion	or other funde	<del></del>		
ž	33	Total not assets or fined halances			7,213,933.	32_	12 007 114
		Total liabilities and net assets/fund balances			8,228,419.	33	12,097,114.
	<del></del>		<del></del>		0,440,417.	34	13,164,172. Form <b>990</b> (2010)

Form	990 (2010) USA FOOTBALL, INC.	11-	-3667205	På	ge 12
Pa	rt-XI Reconciliation of Net Assets				×
	Check if Schedule O contains a response to any question in this Part XI				$\mathbf{x}$
1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,08	8,4	01.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,26		
3	Revenue less expenses. Subtract line 2 from line 1	3	4,82		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,21		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	5	7,5	79.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	12,09	7,1	14.
Pa	rt XII Financial Statements and Reporting		, .		
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>	<u> </u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				1.7.
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule (	Ο.	- F. (3)	1. velit 1	-,,,,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	L
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule C			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	on a			7721
	separate basis, consolidated basis, or both:				
	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 Sing	jie Au	dit		
	Act and OMB Circular A-133?		3a		_X_
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed aud	tít lit		
	or audits, explain why in Schedule O and describe any stens taken to underno such audits		26	1	

### **SCHEDULE A**

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

- Inspection

Name of the organization

Employer identification number

-			USA FOO							11	<u>-3667</u>	205
	art I			rity Status (All organi					tructions.			
The	organ			because it is: (For lines								_ <del></del> _
1	$\vdash$			es, or association of chui			ection 170	)(b)(1)(A)(i	).			
2	$\square$			<b>70(b)(1)(A)(ii).</b> (Attach So								
3				ital service organization								
4	Ш			operated in conjunction	with a hos	spital desc	ribed in se	ection 170	)(A)(1)(A)(i	ii). Enter th	ne hospital'	s name,
	_	city, and sta										
5	Ш			benefit of a college or u	niversity o	wned or o	perated by	y a govern	mental un	ıt describe	d in	
			)(b)(1)(A)(iv). (Comp	•								
6	닠			nent or governmental un								
7	X			ceives a substantial part	of its supp	ort from a	governme	ental unit d	or from the	general p	ublic descr	ibed in
			(b)(1)(A)(vi), (Comple									
8	$\vdash$			section 170(b)(1)(A)(vi).								
9	ш			ceives: (1) more than 33								
				nctions - subject to certa								
				taxable income (less sec	tion 511 ta	x) from bu	ISINESSES :	acquired b	y the orga	anization a	fter June 30	), 1975.
			509(a)(2). (Complet	•								
10	$\vdash$			perated exclusively to te								
11	ш			perated exclusively for the								
				ations described in secti				2). See see	ction 509(	a)(3). Che	ck the box t	ihat
		a Type		organization and compl	_	•					~ ~	
е		• •		i Type II at the organization is not			ctionally in				Type III - O	
•				than one or more publict								
f				tten determination from						9(a)(1) or s	ection 509(	a)(2).
•									9 111			
g	1	Since Augus	t 17 2006 has the	his box	ov aift or a		from any	of the fell				
b	,			directly controls, either a							ſ	Vee Ne
				supported organization?					• •		11g(i)	Yes No
				n described in (i) above?						··· · · · · · · · · · · · · · · · · ·		
				a person described in (i)		 -?					11g(iii)	
h				about the supported or					• • • • • • • • • • • • • • • • • • • •	•• • ••• • •	(119(10))	
			<b>3</b>		g	(-).						
/n	Name	of supported	(ii) EIN	(iii) Type of	(iv) is the c	roanization	(v) Did vo	u notify the	(vi) k	the	(will 0 mg	ount of
1.7		nization	(11,72.11	organization (described on lines 1.0)		sted in your	organizat	tion in col.	organizati (i) organiz	on in col. 🖯	(vii) Amı supp	
			ļ	(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	U.S		Capp	···
			·	(see instructions))	Yes	No	Yes	No	Yes	No		
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Form 990 or 990-EZ.

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Schedule A (Form 990 or 990-EZ) 2010

# Schedule A (Form 990 or 990-EZ) 2010 USA FOOTBALL, INC. 11-3667205 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support		•	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and		· · · · · · · · · · · · · · · · · ·				
	membership fees received. (Do not						
	include any "unusual grants.")	4333300.	6145920.	8192801.	6412444.	12394290.	37478755.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities				-		
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	4333300.	6145920.	8192801.	6412444.	12394290.	37478755.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						]
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4						37478755.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	4333300.	6145920.	8192801.	6412444.	12394290.	37478755.
8	Gross income from interest,						
	dividends, payments received on						
	secunties loans, rents, royalties						
	and income from similar sources	247,846.	332,853.	239,964.	195,970.	233,088.	1249721.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)			766,632.			
11	Total support. Add lines 7 through 10						42407496.
	Gross receipts from related activities,	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,,,		12	94,590.
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
Se	organization, check this box and store ction C. Computation of Publication						<u></u>
	Public support percentage for 2010 (I		<del></del>	column (f))		14	88.38 %
	Public support percentage from 2009						90.31 %
	33 1/3% support test - 2010.If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2009.If the o						
	and stop here. The organization qual	_		-			
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
t	10% -facts-and-circumstances tes						
	more, and if the organization meets the						
	organization meets the "facts-and-circ				-		▶□
18	Private foundation. If the organization		-	•	• • •		ns •
							or 990-EZ) 2010

# Schedule A (Form 990 or 990-EZ) 2010 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only	y if you checked t	the box on line 9 of Par	t I or if the organization	failed to qualify under P	art II. If the organization fails to

Se	ction A. Public Support	relow, please comp	piete Fait II )					
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009		(e) 2010	(f) Total
1	Gifts, grants, contributions, and						· ·	
	membership fees received. (Do not	1						
	include any "unusual grants.")		1		İ			
2	Gross receipts from admissions,							
	merchandise sold or services per-							
	formed, or facilities furnished in							
	any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that					-		
•	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-				<del> </del>	+		<del></del>
7	ization's benefit and either paid to							
	or expended on its behalf	1						
5	The value of services or facilities					$\vdash$		
J	furnished by a governmental unit to							
	the organization without charge					1		
_	- ·				<del> </del>	┼		
	Total. Add lines 1 through 5				<del></del>	+-		
/2	Amounts included on lines 1, 2, and				+			
h	3 received from disqualified persons Amounts included on lines 2 and 3 received				<del> </del>	<del> </del>		· 
	from other than dispersions that	!						
	exceed the greater of \$5,000 or 1% of the	1						
	amount on line 13 for the year					<del> </del>		
	Add lines 7a and 7b	elentina Pilipi III.	and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t			1 12 2		
	Public support (Subtract line 7c from line 6.)				NEAD & POSSESSEE	, - 6-4-	FETTI	
	· · · · · · · · · · · · · · · · · · ·	(a) 2006	(L) 0007	4.3.0000	1 2 2222	1	( ) 0040	40.7.1
	ndar year (or fiscal year beginning in)  Amounts from line 6	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009		(e) 2010	(f) Totai
	Gross income from interest.					+		
100	dividends, payments received on					1		
	securities loans, rents, royalties							
	and income from similar sources					<b>-</b>		
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is					1		
	regularly carried on					1		
12	Other income. Do not include gain							
	or loss from the sale of capital assets (Explain in Part IV.)					<u>L</u> .		
13	Total support (Add lines 9, 10c, 11, and 12.)							
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth t	ax year as a section	on 501	(c)(3) organiz	ation,
	check this box and stop here				<u>.</u>	<u> </u>	··· ·· <u>•</u> · · • · · · · · · · · · · · · · · · ·	<u></u> ▶□
Sec	tion C. Computation of Publ	ic Support Per	rcentage					
15	Public support percentage for 2010 (	ine 8, column (f) di	ivided by line 13, c	olumn (f))	*****	15		9
	Public support percentage from 2009			<u></u>		16		9
Sec	tion D. Computation of Inves	stment Incom	e Percentage					
	Investment income percentage for 20					17		9
18	Investment income percentage from 2	2009 Schedule A,	Part III, line 17	· · · · · · · · · · · · · · · · · · ·		18		9
	33 1/3% support tests - 2010. If the					33 1/3	%, and line 1	7 is not
	more than 33 1/3%, check this box ai							
b	33 1/3% support tests - 2009. If the							
	line 18 is not more than 33 1/3%, che	-					-	
20	Private foundation. If the organizatio						_	
	3 12-21-10							0 or 990-EZ) 201

### **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.

OMB No 1545-0047 Open-to Public Inspection -

Name of the organization

Employer Identification number USA FOOTBALL, INC. 11-3667205

Pai	t-1 Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	ne 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		sed funds
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for chantable purposes and not for the benefit of the donor		
Pai	竹川蓮 Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990.	Part IV. line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or	· · · · · · · · · · · · · · · · · · ·	storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	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		
b	<b>= 1 1</b>		5 L
C	Number of conservation easements on a certified historic st		
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year >	<b>3</b>	<b>gg</b> <del></del>
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements	- · · · · · · - · · · · · · · · · · · ·	
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		·
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		
Pa	Organizations Maintaining Collections of	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that described	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pu	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
			> \$
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS 1		- ·
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$_
b			

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Schedule D (Form 990) 2010

1

Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)		dute D (Form 990) 2010 USA FOO!					<del></del>		11-36			
Cincle All that apply :	ъá											
a Public oxhibition d	3		on, and other i	ecords,	check any of the	following tha	t are a s	ignifican	t use of its	collection	n item:	S
b Scholarly research e Other Preservation for Nuture generations  Provide a description of the organization's collection's and explain how they further the organization's exempt purpose in Part XIV.  Driving the year, did the organization solicit or neceive donations of art, historical treasures, or other similar assets to be sold to raise funder after than to be maintained as part of the organization collection?												
c	а	Public exhibition		đ	Loan or exc	hange progra	ıms					
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.    Part XIV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Is it is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIV and complete the following table:    Is it is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIV and complete the following table:    Is it is the organization in a management in Part XIV and complete the following table:   Is it is the organization include an amount on Form 990, Part X, line 21?   Yes   No	b	Scholarly research		е	Other							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization collection?  Part IV	¢	Preservation for future generations										
To be sold to raise funds rather than to be maintained as part of the organization's collection?   Yes   No   Part IV   Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 930, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b If 'Yes, 'explain the arrangement in Part XIV and complete the following table:   Amount   1c	4								oose in Par	rt XIV.		
Part   V   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, fusitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Ves	5	During the year, did the organization solicit or	r receive dona	tions of	art, historical treas	sures, or othe	er simıla	r assets		_		_
reported an amount on Form 990, Part X, Ine 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIV and complete the following table:    Amount	~								<u>.</u>			No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Pa			omplete	e if the organizatio	n answered '	'Yes" to	Form 99	0, Part IV,	line 9, or		
on Form 990, Part X?  □ If "Yes," explain the arrangement in Part XIV and complete the following table:  □ Beginning balance □ Amount □ to □ Additions during the year □ Distributions during the year □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Distributions during the year □ Ending balance □ Distributions during the year □ Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. □ If "Yes," explain the arrangement in Part XIV. □ Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Part Vision   Part XIV   Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Part XIV   Part Vision   Pa		reported an amount on Form 990, Par	t X, line 21.							_		
b   Fryes, *explain the arrangement in Part XIV and complete the following table:   C   Beginning balance	ta				-		sets not	t include		_		_
Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Comparison   Co		on Form 990, Part X?	. <b></b>						, , [	Yes		No
c Beginning balance d Additions during the year 1	þ	If "Yes," explain the arrangement in Part XIV	and complete	the follo	wing table:							
d Additions during the year    Distributions during the year   Ending balance   If										Amoun	t	
Example   Distributions during the year   1	C	Beginning balance						1c				
Example   Distributions during the year   1	d	Additions during the year						1d				
f Ending balance	e	Distributions during the year						1				
2a Did the organization include an amount on Form 990, Part X, line 21?  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Four yea	f							1f				
b If "Yes" explain the arrangement in Part XIV.    Part YV   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    1a   Beginning of year balance   3,000,000   3,000,000   3,000,000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000   0.000	2a	Did the organization include an amount on Fo	orm 990, Part	(, line 2	1?					Yes		No
4a   Beginning of year balance   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,0												
4a   Beginning of year balance   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,000   3,000,0	Pai	tV Endowment Funds. Complete if	the organizat	on ansv	wered "Yes" to For	rm 990, Part	IV, line 1	10.				
1a Beginning of year balance 3,000,000, 3,000,000, 3,000,000, 000,									vears back	(e) Four	vears	back
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 3,000,000, 3,000,000, 3,000,000, 3,000,000	1a	Beginning of year balance										
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 3,000,000, 3,000,000, 3,000,000, 3,000,000	ь				* * * * * * * * * * * * * * * * * * *	-,-,-	, , , ,	- 34.5				
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	c							<u> </u>		77		
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	ď	<b>F</b>								37.5 77.7	ما دروز	- 5.7.
and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Term endowment ▶ % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations (iii) x  3a(iii) X  3b  4 Describt VIII Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation  1a Land  b Buildings c Leasehold improvements 7,777. 2,024. 5,753. d Equipment 364,569. 156,225. 208,344. e Other  Other 7,739,979. 752,296. 738,683.	e	ſ					-		3 - 1 - 2 -			- 15 -
f Administrative expenses g End of year balance 3 000,000, 3 000,000, 3 000,000, 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ %  1 Term endowment ▶ %  2 Are there endowment tunds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 3a(ii) X (ii) related organizations 3a(ii) X b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment (a) Cost or other basis (investment) basis (other) depreciation  1a Land b Buildings c Leasehold improvements 7,777 2, 2,024 5,753. d Equipment 364,569 156,225 208,344. e Other 1,490,979 752,296 738,683.	-							ring. History				ائد المائد مائد
g End of year balance 3,000,000, 3,000,000, 3,000,000, 3,000,000	f								<del></del>			
Portivity Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment  Land  Description of investment  Land  Buildings  C Leasehold improvements  C Leasehold improvements  A Row there estimated percentage of the year end balance held as:  Board designated or quasi-endowment   %  Yes No  Yes No  Yes No  (i) unrelated organizations  (ii) related organizations  (iii) x  (iii) related organizations  (iii) x  (iii) related organizations  (iii) x  (iii) related organizations  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii) x  (iii)			3 000	000	3 000 000	3 000	000	المسادة	<del>Medi</del>			4:2
a Board designated or quasi-endowment ▶						3,000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			.  .***		<u></u>
b Permanent endowment		•	Cha balance									
c Term endowment ▶			9/4	<del></del>	70							
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment  (a) Cost or other basis (investment) basis (other) depreciation  1a Land  b Buildings  c Leasehold improvements  7,777.  2,024.  5,753. d Equipment  364,569.  156,225.  208,344. e Other  1,490,979.  752,296. 738,683.												
Yes   No   (i) unrelated organizations   3a(i)   X   X   (ii) related organizations   3a(ii)   X   X   (iii) related organizations   3a(ii)   X   X   (iii) related organizations   3a(ii)   X   X   (iii) related organizations   (iii) related organizations   (iii) related organizations   (iii) related organizations   (iii) related organizations   (iii) related organizations   (iii) related organizations   (iii) related organizations   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)   (iii)	_		•	oanizati	ion that are held a	nd administa	rad for t	he organ	ization			
(ii) unrelated organizations       3a(i) X         (iii) related organizations       3a(ii) X         b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?       3b	va		331011 01 1118 01	ya nzan	on that are new a	IIO doministe	ieu ioi i	iie Oigai	nzation	[	Van	No.
(ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part: VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (e) Buildings  (f) Book value  (g) Cost or other basis (other)  (h) Cost or other basis (other)  (h) Cost or other basis (other)  (h) Cost or other basis (other)  (h) Cost or other basis (other)  (h) Cost or other basis (other)  (h) Cost or other basis (other)  (h) Cost or other basis (other)  (h) Cost or other basis (other)  (h) Cost or other basis (other)  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value  (h) Book value		•								20(1)	res	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (e) Equipment basis (other)  (f) Equipment 2,024. 5,753.  (f) Equipment 364,569. 156,225. 208,344.  (f) Equipment 2,024. 738,683.												
4 Describe in Part XIV the intended uses of the organization's endowment funds.           Part VI         Land, Buildings, and Equipment. See Form 990, Part X, line 10.           Description of investment         (a) Cost or other basis (other)         (b) Cost or other depreciation         (c) Accumulated depreciation           1a Land         b Buildings         2,024.         5,753.           c Leasehold improvements         7,777.         2,024.         5,753.           d Equipment         364,569.         156,225.         208,344.           e Other         1,490,979.         752,296.         738,683.	ь	• • • • • • • • • • • • • • • • • • • •										
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.           Description of investment         (a) Cost or other basis (investment)         (b) Cost or other basis (other)         (c) Accumulated depreciation           1a Land         4 Buildings         4 Equipment         2,024.         5,753.           2 Equipment         364,569.         156,225.         208,344.           2 Other         1,490,979.         752,296.         738,683.	4	Decorbe in Part YIV the intended uses of the	orcenization's	neu on	ment funde					. : 30		
Description of investment	Pai	t-Vi I and Buildings and Equipm	ent See For	m ggn I	Part Y line 10							
basis (investment)         basis (other)         depreciation           1a Land			···			ar ather	(a) A		to d	(a) Dag		
1a Land       5         b Buildings       2,024.       5,753.         c Leasehold improvements       7,777.       2,024.       5,753.         d Equipment       364,569.       156,225.       208,344.         e Other       1,490,979.       752,296.       738,683.		bescription of investment							,	(a) Boo	K Value	3
b Buildings c Leasehold improvements d Equipment e Other 1,490,979.  b Buildings 2,024. 5,753. 156,225. 208,344. 752,296. 738,683.	10	Lond	-		Dadis (	(5.1101)		•		<del></del>	<del></del> -	
c Leasehold improvements       7,777.       2,024.       5,753.         d Equipment       364,569.       156,225.       208,344.         e Other       1,490,979.       752,296.       738,683.												
d Equipment 364,569. 156,225. 208,344. e Other 1,490,979. 752,296. 738,683.		•		7 7	<del>,,  </del>			2	24		E 7	<u> </u>
e Other												
								152,	446.			

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010

71	dule D (Form 990) 2010 USA FOOTBALL, INC.		<u> </u>	<u> 3667205</u>	Page 4
Pa	rt XI: Reconciliation of Change in Net Assets from Form 990 to Audited Finance	cial S	tatement	S	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		14,088	401.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		9,262	<u>,799.</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		4,825	602.
4	Net unrealized gains (losses) on investments	4			579.
5	Donated services and use of facilities	5			
6	Investment expenses	6	-		
7	Prior penod adjustments	7			
8	Other (Describe in Part XIV.)	8		· · · · · · · · · · · · · · · · · · ·	
9	Total adjustments (net). Add lines 4 through 8	9		57	579.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		4,883	
	TXII Reconciliation of Revenue per Audited Financial Statements With Rever		er Return		1010
1	Total revenue, gains, and other support per audited financial statements	<u> </u>	1	16,519	551
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			10,010	, ,,,,,,
~ a		7,5	70		
_					
b		3,3	<del>/-</del> +:::		
c	Recoveries of pnor year grants 2c				
ď	Other (Describe in Part XIV.)				4-0
е	Add lines 2a through 2d			2,431	
3	Subtract line 2e from line 1		3	14,088	401.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		radici, is Crass is		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a				
þ	Other (Describe in Part XIV.)				
C	Add lines 4a and 4b		4c		0.
_5	Total revenue. Add lines 3 and 4c, (This must equal Form 990, Part I, line 12.)		5	14,088,	401.
Pai	T XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses	per Retu	rn	
1	Total expenses and losses per audited financial statements		1	11,636,	370.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	3,5	71 .		
b	Prior year adjustments		744		
c	Other losses 2c		1994		
d	Other (Describe in Part XIV.)				
е	Add lines 2a through 2d			2,373	571.
3	Subtract line 2e from line 1			9,262	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		· · ·   [	<u> </u>	1336
·	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV.)				
					0.
	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	• • • •	4c	9,262,	
Pai	TXIV Supplemental Information		5	9,202	133.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	+ I\ / 12.	ana th and a	b Dort V line	4. Do-4
					4; Part
A, 1011	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to pro	vide ar	іу аоопіопаі	information.	
					<del></del>
		-			

### SCHEDULE J (Form 990)

# **Compensation Information**

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23. 2010

OMB No 1545-0047

Open to Public -

Internal Revenue Service

Name of the organization

Department of the Treasury

➤ Attach to Form 990. ➤ See separate instructions.

USA FOOTBALL, INC. Employer identification number 11-3667205

P	art.l: Questions Regarding Compensation				
			1	/es	No
<b>t</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990	, E			, : [24]
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			. [ ]	
	First-class or charter travel Housing allowance or residence for personal	use 🖫			 
	Travel for companions Payments for business use of personal reside	123			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		75	4.5	
	X Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	, <u>[</u>	(1)	Ā. <u>"</u>	
	rotorial sorrison (e.g., maio, oridantes), estal	'	<del>-</del>		8-1
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	:			
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	[]			X
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors		lb	-	
_		ors,	_	<b>.</b> ,	
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		2	X	
2	Indicate which if any of the falls (S. 1).				
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's				
	CEO/Executive Director. Check all that apply.	7.7			
	Compensation committee X Written employment contract	- Fig			<u> Pi</u>
	Independent compensation consultant Compensation survey or study	[a		4	, , , , , ,
	Form 990 of other organizations  X Approval by the board or compensation comments and the second compensation comments are second compensation.	nittee 🔼	<b>33.</b>		ii.
		14	3,51,5		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing		-4.		
	organization or a related organization:	1.5			2-1
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	<u></u>	la		_X_
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		lb		X
¢	Participate in, or receive payment from, an equity-based compensation arrangement?	4	lc		_X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			¥24	
		1925. 1935.	37		``سيتئي ^ي '' ناية ت
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			2 (2 )	47.3
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	a _z -			
	contingent on the revenues of:	Ę	٠. ا		
а	The organization?	5	5a	- 1	X
þ	Any related organization?	E	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.		7 31 3	_ux_=	<b>E.</b>
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				影響
	contingent on the net earnings of:	E			4°E
a	The organization?	Ē	Sa l	^ ^ ~	X
b	Any related organization?		Sib l		X
	If "Yes" to line 6a or 6b, describe in Part III.	=		£ ; 1	5 mm ];
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments				·
	not described in lines 5 and 6? If "Yes," describe in Part III		7	x	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	· ··· ·	+		
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	į.	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	· ··· ··· · · <del>  ·</del>	<del>-</del>  -	$\dashv$	
•	B 4 11			Ì	
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (F	9	100)	
,	· · · · · · · · · · · · · · · · · · ·	ochequie J (F/	OLU F	75017	2U 1U

032111 12-21-10 Partilis Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

	-	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(Q)	(E)	(F)
(A) Name	<u></u>	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	8	249,784.	60,000.	6,000.	23,578.	10,341.	349,703.	0
1 SCOTT HALLENBECK	: 6	0	0	0	0	0	0	0
	Ξ							
2	(ii)							
	(5)							
3	(II)							
	(3)							
4	(ii)							
	(E)							
5	(iii)							
	(5)							
6	(E)							
	(i)							
7	(E)							
	(1)							
8	(II)							
	] (b)							
6	(ii)							
	] (i)							
10	(ii)							
	(6)							
11	<b>(E)</b>							
	ε							
12	Θ							
	Ξ							
13	(ii)							
	Θ							
14	(1)							
	ε							
15	(1)							
	Ξ							
16								
				!			Schedul	Schedule J (Form 990) 2010

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

Department of the Treasury

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010 Open to Public Inspection

Name of the organization

USA FOOTBALL, INC.

Employer identification number 11-3667205

NET UNREALIZED GAINS ON INVESTMENTS: 57,579
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:
IIVIIIIIIIIIII IODDIC.
AVAILABLE TO THE PUBLIC.
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS
THE GOVERNING BODY.
EXECUTIVE DIRECTOR. EVERY YEAR, THE CONTRACT IS REVIEWED AND APPROVED BY
EMPLOYMENT CONTRACT TO ESTABLISH THE COMPENSATION OF THE ORGANIZATION'S
FORM 990, PART VI, SECTION B, LINE 15A: THE ORGANIZATION USES A WRITTEN
THE TIME DEPOSIT TODAY OF ACCOUNTINGS.
THE FIRM'S INDEPENDENT PUBLIC ACCOUNTANTS.
EXECUTIVE DIRECTOR AND CONTROLLER OF USA FOOTBALL, INC. IN CONJUCTION WITH
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY THE
COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION A, LINE 8B: THE ORGANIZATION DOES NOT HAVE A
OPPORTUNITIES FOR YOUTH IN AMATEUR FOOTBALL ON A NATIONAL LEVEL.
TO INCREASE THE KNOWLEDGE AND PARTICIPATION IN FOOTBALL AND EXCHANGE
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: