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-om **990**

032001 02-22-11

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)

2010

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

Open to Public Inspection

7	F	or the	2010 calendar year, or tax year beginning SEP 1, 2010 and en	nding At	JG 31, 2011								
8		neck if oplicable	C Name of organization		D Employer ide	ntifica	tion number						
ſ	-	Addres change	MISSOURI YOUTH SOCCER ASSOCIATION, INC.										
í		Name change			43-	12823	94						
i]initial return		oom/suite	E Telephone nu								
i		Terminated	1	E. E	•	.936.	3676						
į	-	Amend			G Gross receipts \$		1,078,816.						
Í		Applica			H(a) Is this a gro	un retu							
•		pendin			for affiliates	-	Yes X No						
			SAME AS C ABOVE		H(b) Are all affiliate								
_	Tz	ax-exe	mpt status: 501(c)(3) 501(c) () 4947(a)(1) or	527	• •	•	t. (see instructions)						
			E: ► WWW.MYSA.ORG		H(c) Group exem		•						
			organization: X Corporation Trust Association Other	L Year o	f formation: 1982		State of legal domicile: MO						
			Summary			1 111							
_		1 E	Briefly describe the organization's mission or most significant activities. TO PROMOT	TE, FOS	TER, AND								
	Activities & Governance		PERPETUATE THE GAME OF YOUTH SOCCER IN THE STATE OF MISSOURI.		-	· · · · · · · · · · · · · · · · · · ·							
		2 Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets.											
		3 1	lumber of voting members of the governing body (Part VI, line 1a)		_	3	13						
9	ַ כֿ		Number of independent voting members of the governing body (Part VI, line 1b)	•	,	4	13						
	2	5 1	otal number of individuals employed in calendar year 2010 (Part V, line 2a)	-		5	5						
:			otal number of volunteers (estimate if necessary)	•	•	6	0						
1	3		otal unrelated business revenue from Part VIII, column (C), line 12			7a	5,112.						
	١,		Net unrelated business taxable income from Form 990-T, line 34		, ,	7b	4,112.						
% <u> </u>	T				Prior Year		Current Year						
	.	8 (Contributions and grants (Part VIII, line 1h)		26,3	77.	69,207.						
ا را	anuasau		Program service revenue (Part VIII, line 2g)		935,8	65.	1,004,490.						
<u></u>	š		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)			1.	7.						
m '	-		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,4	11.	5,112.						
\bigcirc	-		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		973,6	54.	1,078,816.						
			Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.						
E			Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.						
	2	15 8	Salaries, other compensation, employee perients (Fart X column (A), lines 5-10)		221,0	98.	224,249.						
· 7 2012	2	16a F	Calaries, other compensation, emrioved periods (Part M. column (A), lines 5-10) Professional fundraising fees (Part X, Enimm (A), line 14-e)			0.	0.						
·	3		otal fundraising expenses (Pat IX, column (D), line 25) 57,62	27.	J- , 15,	:							
<u>ن</u>	<u> </u>		Other expenses (Part IX, column (A), jne 11 (8- fid 2 1) 241)		750,2	94.	682,657.						
			otal expenses. Add lines 1817 (must equal Part IX, column (20), ine 25)		971,3	92.	906,906.						
			Revenue less expenses. Subtract tine 18 from line 12		2,2	62.	171,910.						
ö	Balances		UGDEN. UT	Beg	inning of Current Y	ear	End of Year						
sets	틞	20 T	otal assets (Part X, line 16)	. 🗀	49,1	13.	195,511.						
t As	밁	21 T	otal liabilities (Part X, line 26)	. 🗀	306,9	90.	281,478.						
			let assets or fund balances. Subtract line 21 from line 20	-	-257,8	77.	-85,967.						
<u> </u>	aı	t II	Signature Block										
			ties of perjury, I declare that I have examined this return, including accompanying schedules an			of my kr	nowledge and belief, it is						
tr	Je, c	correct	and complete. Declaration of preparer (other than officer) is based on all information of which	preparer i	nas any knowledge.		<u> </u>						
			Signature of officer		12	<u>ء 2 ·</u>	7. 2011						
S	ign			Date									
Н	ere		KELLY ROSS, PRESIDENT Type or print name and title										
_				<u> </u>	ate Check		T PTIN						
_			Print/Type preparer's name Preparer's signature	, , ,	2 22 26 18		I FIDE						
	aid 	<u> </u>	FRANK D. MEGARGEL Analy Megarge			mployed	<u> </u>						
	-		Firm's name BROWN SMITH WALLACE, L.L.C.	CRA	Firm's EIN	<u> </u>							
U	se C	Inly	Firm's address 1551 WALL ST. #280	_	D	£3£	255 2000						
-			ST. CHARLES, MO 63303		Priorie no.	030.	255.3000 X Yes No						
N	av 1	me IR	S discuss this return with the preparer shown above? (see instructions)				Yes No						

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

GIL

Form **990** (2010)

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	rt III Statement of Program Service A	OCCER ASSOCIATION, INC.	43-12823	94 Page Z
ra	Check if Schedule O contains a response	•		
•	Bnefly describe the organization's mission.	to any question in this Part III		
1	TO PROMOTE, FOSTER, AND PERPETUATE T	THE CAME OF VOURU COCCER IN THE		
	STATE OF MISSOURI.			
		· · ·		
2	Did the organization undertake any significant pi	rogram services during the year which were not lis	ted on	
_	the prior Form 990 or 990-EZ?	ogram convices daming the year timen were nevine		Yes X No
	If "Yes," describe these new services on Schedu	de O.		
3	•	significant changes in how it conducts, any progra	am services?	Yes X No
•	If "Yes," describe these changes on Schedule O	-		
4	•	each of the organization's three largest program s	ervices by expenses	
		d section 4947(a)(1) trusts are required to report the		
		venue, if any, for each program service reported.		
4a		722,036. including grants of \$) (Revenue \$	1 004 490.)
	TO CREATE ORGANIZE AND PROVIDE OPPO			1,001,130.
	COMPETITION AND SPORTING EVENTS FOR	•	_ 	
	PROVIDE COACHING AND DEVELOPMENT TRA	•		
	TROVIDE CONCEING THE DEVELOTIES IT	inino,		
			 	
				
4b	(Codo: \(\(\(\)	including grants of \$	\ (Payanua ¢	
40	(Code) (Expenses \$	including grains or \$) (Neverlue \$,
	-			
				
		· · · · · · · · · · · · · · · · · · ·		
			- 	
				
4c	(Code:) (Expenses \$	including grants of \$) (Hevenue \$)
		<u> </u>		
				
			=	
4d	Other program services. (Describe in Schedule C	D)		
	(Expenses \$ including g	rants of \$) (Revenue \$)	
4e	Total program service expenses ▶	722,036,		
				Form 990 (2010)

Form 990 (2010) MISSOURI YOUTH SOCCER ASSOCIATION INC. Part IV Checklist of Required Schedules

			Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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_		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
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
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			
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	,	~~	
a	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
Ü	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
	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
a	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
_	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	- 110		
•	the organization's separate or consolidated limited a statements for the tax year include a restricted that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
122				
12a	Schedule D, Parts XI, XII, and XIII	12a		x
_	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZG		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		_x_
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
140	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1,14		
Ü	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	170		Α
13	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13		^
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		,
47	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		Х
17		47		
40	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	10		•
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	 	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4.0		
	complete Schedule G, Part III	19	 	X
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	00-	[
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	990 ((2010)

Form 990 (2010) MISSOURI YOUTH SOCCER ASSOCIATION, INC.

Part IV Checklist of Required Schedules (continued)

			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		х
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		х
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		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		<u>X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete			
	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	-00		
	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	27		,
20	Schedule L, Part III			<u> </u>
28	Instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
Ŭ	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		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
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		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		х
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	 	X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	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 197			
	Note. All Form 990 filers are required to complete Schedule O	_38_	X	
		Form	990 (2010)

Form 990 (2010)

MISSOURI YOUTH SOCCER ASSOCIATION, INC.

Part, V Statements Regarding Other IRS Filings and Tax Compliance

	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	38		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming		İ	l
	(gambling) winnings to prize winners?		1c	l	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	' 			
	filed for the calendar year ending with or within the year covered by this return	2a	5	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?	2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions	s)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	x	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		x
þ	If "Yes," enter the name of the foreign country			}	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	<u> </u>	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b	<u> </u>	х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e organization solicit			
	any contributions that were not tax deductible?		6a		х
þ	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor	? <u>7</u> a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	•	7b	ļ	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required			
	to file Form 8282?		7c	ļ	Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	.7 <u>d</u>		1	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?	<u>7e</u>		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f	ļ	Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		<u>7g</u>	 	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza-		7h	 	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di			ļ	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8	-	
9	Sponsoring organizations maintaining donor advised funds.		٠.		
а	Did the organization make any taxable distributions under section 4966?		9a	1	
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	1			1
-	Initiation fees and capital contributions included on Part VIII, line 12	10a			
-	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		İ	
11	Section 501(c)(12) organizations. Enter	ا مه			
a	Gross income from members or shareholders		_		
D	Gross income from other sources (Do not net amounts due or paid to other sources against	446		1	1
40-	amounts due or received from them.)	11b	٠,		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	12a	 	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		120	+	\vdash
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	 	\vdash
L	Note. See the instructions for additional information the organization must report on Schedule O.				
O	Enter the amount of reserves the organization is required to maintain by the states in which the	125			
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand	13b 13c	\dashv		
	Did the organization receive any payments for indoor tanning services during the tax year?	130	140		T.
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	20	14a 14b	1	X
U	II 100, THE KIND OF THE LESS TO TOPOS SHOOT PASSIBILITIES IS 110, PROTICE OF EXPICITED IN CONTROL	, . .	, , , , , ,		

Form	990 (2010) MISSOURI YOUTH SOCCER ASSOCIATION INC. 43-128	2394	P	age 6
Pai	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a "No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI			\mathbf{x}
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	_13		
b	Enter the number of voting members included in line 1a, above, who are independent	13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х_
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>x</u>
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			Ι.
	by the following.			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	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	9		X
Sec	tion 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		<u> </u>
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	-	X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	<u> </u>	_ <u>X</u>
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			,
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		X
40	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	امما		
	taxable entity during the year?	16a	-	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	405		
000	exempt status with respect to such arrangements?	16b	L	1
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE	ulabla far		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available assets a ladie to be a small black assets.	liable for		
	public inspection. Indicate how you make these available. Check all that apply			

Another's website Lx_ Upon request

19 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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 THE ORGANIZATION - 636.936.3676

1270 JUNGERMANN SUITE E ST. PETERS MO 63376

Form	990	(2010)	

43-1282394

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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.

Check this box if neither the organization		orga	anıza			mpe	nsa	T	director, or trustee	Γ.
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Position					Reportable	Reportable	Estimated	
	hours per	(c	(check all t		all that apply)		ly)	compensation	compensation	amount of
	week (describe	į						from the	from related organizations	other compensation
	hours for	Į				ated		organization	(W·2/1099·MISC)	from the
	related	ste	truste		يو	pens		(W-2/1099-MISC)	(,	organization
	organizations	ra t	lonal		go	t com	١.			and related
	ın Schedule	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	orme!			organizations
KELLY ROSS	O)	_	ļ-	_	_		F			
PRESIDENT	10.00			x			ĺ	0.	0.	0.
JIM OVERMANN	10.00	1	\vdash	^	\vdash	\vdash		<u> </u>	0.	<u> </u>
VICE PRESIDENT	1.00	x		x				0.	0.	0.
WARREN BROWN	1.00	<u> </u>						1	0.	٠.
TREASURER	1.00	x		x				0.	0.	0.
ROBYN GROSS	+ · · · ·	 ^	 	-				 		<u>~</u>
SECRETARY	1.00	×		x	l			0.	0.	0.
VINCE GENTILE		<u> </u>						1	<u> </u>	•
REGISTRAR	5.00	x		x				0.	0.	0.
MISTI HOLLRAH										•
CENTRAL DISTRICT COMMISSIO	1.00	x						0.	0.	0.
MIKE DEANE										
EASTERN DISTRICT COMMISSIO	1,00	x						0.	0.	0.
V.A. SAMARANAYAKE										
SOUTHERN DISTRICT COMMISSI	1.00	х						0.	0.	0.
HILARY PARMALEE										
WESTERN DISTRICT COMMISSIO	1.00	х						0.	0.	0.
JIMI BARBAROTTA										
CENTRAL DISTRICT ALT. COMM	1.00	x	<u> </u>			_	L.	0.	0.	0.
DENNIS ST. JOHN	1								1	
EASTERN DISTRICT ALT. COMM	1.00	х					L.	0.	0.	0.
CHRISTINE PHILPOT	1									
SOUTHERN DISTRICT ALT, COM	1.00	x						0.	0.	0.
DAVID HIXSON										
WESTERN DISTRICT ALT. COMM	1.00	Х	<u> </u>	_	<u> </u>	_	_	0.	0.	0.
JAKE GRIESENAUER										
EXECUTIVE DIRECTOR	40.00	ļ	ļ	Х	<u> </u>	ļ		48,718.	0.	0.
			├	-	-	+	├-	 		
						<u> </u>	T			
	_]		<u> </u>							

Form 990 (2010) MISSOURI YOUT	TH SOCCER A	SSO	CIA'	rio:	N ,	INC	•		43-1282394	Page 8
Part VII Section A. Officers, Directors, Tru (A) Name and title	(B) Average hours per week (describe hours for related	istee or director	neck	(C Pos	c) ition that	app	oly)	Compensated Employ (D) Reportable compensation from the organization (W-2/1099-MISC)	ees (continued) (E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization
	organizations in Schedule O)	individual t	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			and related organizations

1b	Sub-total					\blacktriangleright		48,	718.	0.		0
С	Total from continuation sheets to Part VII	I, Section A				\blacktriangleright			0.	0.		0
d	Total (add lines 1b and 1c)					\blacktriangleright		48,	718.	0.		0
2	Total number of individuals (including but no	ot limited to th	ose list	ed al	oove	e) wh	no re	eceived more than	\$100),000 in reportable	· · · · · · · · · · · · · · · · · · ·	

compensation from the organization

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on		
	line 1a? If "Yes," complete Schedule J for such individual	3	х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization		,
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	х
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services		
	rendered to the organization? If "Yes," complete Schedule J for such person	5	х

Section B. Independent Contractors

\$100,000 in compensation from the organization

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

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	

Yes No

Form 990 (2010)

Statement of Revenue Part VIII (D)
Revenue
excluded from
tax under (A) (B) (C) Related or Unrelated Total revenue exempt function business sections 512 revenue revenue 513, or 514 Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 69,207 5,065 g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 69,207 **Business Code** Program Service Revenue 501,812 2 a MEMBERSHIP DUES 711300 501,812 711300 236,709 236,709 **b** CUP PROGRAMS 711300 184,735 184,735 C OLYMPIC DEVELOPMENT d COACHING DEVELOPMENT 711300 62,060 62,060 e OTHER SOCCER FEES 711300 19,174 19,174 f All other program service revenue q Total. Add lines 2a-2f 1,004,490 Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross Rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold b c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a MAILING LIST SALES 5,112 5,112 511140 d All other revenue e Total. Add lines 11a-11d 5,112 Total revenue. See instructions. 1,004,490 5,112 1,078,816

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 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			ļ	
	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	48,718.	12,180.	36,538.	
6	Compensation not included above, to disqualified	1			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages .	156,285.	82,273.	21,834.	52,178.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	2,419.	2,419.		
9	Other employee benefits .				
10	Payroll taxes	16,827.	7,753.	4,791.	4,283.
11	Fees for services (non-employees):				
а	Management _				
b	Legal				
С	Accounting	11,735.	5,868.	5,867.	
d	Lobbying .				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	2,250.	1,125.		1,125.
13	Office expenses	38,292.	8.783.	29,509.	
14	Information technology				
15	Royalties .				
16	Occupancy	33,357.	16,679.	16,678.	
17	Travel	12,383.	12,383.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,921.	4,156.	2,765.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,340.	670.	670.	
23 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) amount, list line 24f expenses on Schedule 0.)	49,086.	44,177.	4,909,	
a	CUP PROGRAMS AND TOURNA	320,685.	320,685.		
	OLYMPIC AND COACHING DE	190,350.	190,350.		
C	RISK MANAGEMENT	10,154.	10,154.	***	
d	MISCELLANEOUS EXPENSES	4.588.	2,306.	2,282.	
	UBI TAXES	1,516.	75.	1,400.	41.
	All other expenses			2,200	
25	Total functional expenses. Add lines 1 through 24f	906,906.	722,036.	127,243.	57,627.
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				

Part X | Balance Sheet (A) Beginning of year End of year Cash - non-interest-bearing 1 21 239 160,040. 2 Savings and temporary cash investments 2 1,383. 1,384. 3 Pledges and grants receivable, net 3 Accounts receivable, net 12,248 4 3,982. 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 Inventories for sale or use 8 4,300. Prepaid expenses and deferred charges 9 2,160. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 44,489. b Less accumulated depreciation 10b 19,044 4.117 10c 25.445. 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 5,826 15 2,500. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 49,113 195,511. Accounts payable and accrued expenses 43,870, 17 35,717. 18 Grants payable 18 19 Deferred revenue 19 24,761. 10,120 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 253,000 221,000. 25 Other liabilities. Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 306,990, 26 281,478, Organizations that follow SFAS 117, check here > x and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets <257.877 27 <85.967.> Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here

and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund ... 32 Retained earnings, endowment, accumulated income, or other funds 32 33 33 Total net assets or fund balances <257,877 <85,967.> Total liabilities and net assets/fund balances 34 195 511.

Form 990 (2010)

Form	990 (2010) MISSOURI YOUTH SOCCER ASSOCIATION INC.	43-128239	4	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	078	816.
2	Total expenses (must equal Part IX, column (A), line 25)	2		906	906.
3	Revenue less expenses Subtract line 2 from line 1	3		171	910.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		<257	877.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
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		<85	967.
Pa	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		ŀ		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	İ		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
b	Were the organization's financial statements audited by an independent accountant?		2b		х
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			İ
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O			,
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	d on a			
	separate basis, consolidated basis, or both:				
	x Separate basis Consolidated basis Both consolidated and separate basis				-
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			1
	Act and OMB Circular A-133?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		L
			Form	990 (2010)

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 t	the organizat	ion	-					E	mployer i	dentification	on numb	er
			OUTH SOCCER ASSOCI						43-	1282394		
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	t) See inst	ructions.				
The organ	ization is not a	a private foundation	because it is (For lines 1	1 through	11, check	only one b	ox)					
1 📙	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
3	•	•	tal service organization									
4 📖		<u>-</u>	operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(i	ii). Enter th	ne hospital'	s name,	
	city, and state.											
5 📖	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		(b)(1)(A)(iv). (Comple	•			. 470//-)//-	WAW A					
•		=	ent or governmental uni					6		مراطري		
<i>'</i>	-	•	eives a substantial part	or its supp	ort from a	governme	entar unit o	r irom the	e generai p	ublic descr	ibea in	
• []	•	b)(1)(A)(vi). (Comple	•	(Complete	Dort II \							
8 L 9 X			ection 170(b)(1)(A)(vi). eives. (1) more than 33 1			om contri	hutione m	ambarsh	in fees and	d arnee rec	eints frai	m
بما ت	•	•	nctions - subject to certa						-	-	-	
		•	axable income (less sect	•	,	•				-		
		509(a)(2). (Complete	•					,			,	
10			perated exclusively to te	st for publ	ıc safetv S	See sectio	n 509(a)(4	I).				
11	_		perated exclusively for the		-			-	ry out the p	ourposes of	f one or	
			ations described in secti									
	describes the	e type of supporting	organization and compl	ete lines 1	1e through	11h.						
	a Type	ь	Type II d	: 🔲 Тур	e III - Func	tionally int	egrated		d 🔲	Type III - C	ther	
e 🗀	By checking	this box, I certify tha	it the organization is not	controlled	I directly o	r ındırectly	by one or	more dis	qualified p	ersons oth	er than	
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	itions desc	cribed in s	ection 50	9(a)(1) or s	ection 509	(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			_	
	supporting o	rganization, check th	nis box		-		-				. L	
g	_		organization accepted ar							ſ		
			rectly controls, either al	one or tog	ether with	persons o	lescribed i	n (ii) and	(III) below,		Yes N	lo
	-		upported organization?							11g(i)		
			n described in (i) above?		•					11g(ii)		
•	• •	•	person described in (i) o						-	11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(S)							
		an Fibi	(iii) Type of	(iv) Is the c	organization	(v) Did voi	notify the	(vi) l	s the			_
	of supported anization	(ii) EIN	organization	in col. (i) la	sted in your	organizat	ion in col.	(vi) la organizatı	on in col.	(vii) Am supp		
orgo	amzadon		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	support?	(i) organi U.S	5.7	Supp	,010	
			(see instructions))	Yes	No	Yes	No	Yes	No			
						-						
				ļ								
				 								
Total		1	L	1					1			

Schedule A (Form 990 or 990-EZ) 2010

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 organiza	tion 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) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						• • • • • • • • • • • • • • • • • • • •
	membership fees received. (Do not						
	ınclude any "unusual grants.")						
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						
	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						i
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						
	ction B. Total Support				•		
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 4						•
8	Gross income from interest,				_		
	dividends, payments received on		:				
	securities loans, rents, royalties		:				
	and income from similar sources						
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)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc (see instructi	ons)			12	
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here					▶ □
Sec	ction C. Computation of Publi	ic Support Pe	rcentage				
14	Public support percentage for 2010 (le	ne 6, column (f) d	livided by line 11, o	column (f))		14	%
15	Public support percentage from 2009	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2010. If the or	rganization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies		•				. ▶∟_
b	33 1/3% support test - 2009. If the or	-			line 15 is 33 1/3%	or more, check th	ıs box
	and stop here. The organization quali	fies as a publicly	supported organiz	ation			. ▶∟
17a	7a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,						
	and if the organization meets the "fac					rt IV how the orgar	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supported	d organization		▶□
b	10% -facts-and-circumstances test	t - 2009. If the orga	anızatıon dıd not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the				-		,
	organization meets the "facts-and-circ	umstances" test.	The organization of	qualifies as a publi	cly supported org	anization	▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	and see instruction	s

Schedule A (Form 990 or 990 EZ) 2010 MISSOURI YOUTH SOCCER ASSOCIATION INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support		· •				
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						
	ınclude any "unusual grants.")		8,915.	19,295.	26,377.	69,207.	123,794.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the	255 246		554 222	225 265		
_	organization's tax-exempt purpose	855,816.	712,626.	754,233.	935,865.	1,004,490.	4,263,030.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	855,816.	721,541.	773,528.	962,242,	1,073,697.	4,386,824.
7 <i>a</i>	Amounts included on lines 1, 2, and						:
t	3 received from disqualified persons 3 Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the			15,173.	15,431.	13,565.	44,169.
	amount on line 13 for the year	-		45 450	45 404	40.555	0.
	Add lines 7a and 7b			15,173.	15,431.	13,565.	44 169
	Public support (Subtract line 7c from line 6) ction B. Total Support		L				4 342 655.
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6	855,816.	721,541.	773,528.	962,242.	1,073,697,	4,386,824.
-	Gross income from interest, dividends, payments received on securities loans, rents, royalties						
	and income from similar sources Unrelated business taxable income	455.	45.	14.	1.	7.	522.
	(less section 511 taxes) from businesses acquired after June 30, 1975				_		
	Add lines 10a and 10b	455.	45.	14.	1.	7.	522.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		12,179,	12 394.	7.375.	5,112.	37.060
12	Other income Do not include gain		12,173.	12,394.	7,373.	5,112.	37,060.
	or loss from the sale of capital		915.		4.036.		4.951.
13	assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.)	856,271.	734 680.	785 936	973.654.	1,078,816.	4,429,357.
	First five years. If the Form 990 is for						
	check this box and stop here	· · · · · · · · · · · · · · · · · · ·			, ош. шо ш оооо.		▶ □
	Public support percentage for 2010 (li			olumn (f))		15	98.04 %
	Public support percentage from 2009		•	`,"	į.	16	99.04 %
	ction D. Computation of Inves						
	Investment income percentage for 20			e 13, column (f))		17	01 %
	Investment income percentage from 2		•			18	.09 %
	33 1/3% support tests - 2010. If the			n line 14, and line			
	more than 33 1/3%, check this box are 33 1/3% support tests - 2009. If the	nd stop here. The	organization qualif	ies as a publicly si	upported organiza	ition	\triangleright x
	line 18 is not more than 33 1/3%, che	•		•		•	
20	Private foundation. If the organization		• -	•		•	

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

Employer identification number

Nam	of the organization		Employer identification number
	MISSOURI YOUTH SOCCER ASSOC	CIATION INC.	43-1282394
Par			is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(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		rised funds
	are the organization's property, subject to the organization's	s exclusive legal control?	L Yes
6	Did the organization inform all grantees, donors, and donor		
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpos	
_	impermissible private benefit?		Yes No
Par			, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or	· —	nistorically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the forr	n of a conservation easement on the last
	day of the tax year.		<u> </u>
			Held at the End of the Tax Year
а	Total number of conservation easements		<u>2a</u>
þ	Total acreage restricted by conservation easements	•	2b
С	Number of conservation easements on a certified historic st		2c
d	Number of conservation easements included in (c) acquired	l after 8/17/06, and not on a historic struc	
	listed in the National Register	•	2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by t	he organization during the tax
	year >		
4	Number of states where property subject to conservation ea		-
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements		Yes No
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) about 1770 (1/07) (2)	bve satisfy the requirements of section 17	Yes No
_	and section 170(h)(4)(B)(ii)?		•
9	In Part XIV, describe how the organization reports conserva		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describe	es the organization's accounting for
Dai	conservation easements t III Organizations Maintaining Collections of	of Art Historical Treasures or	Other Similar Assets
Га	Complete if the organization answered "Yes" to Form		Other Chillian Addets.
	If the organization elected, as permitted under SFAS 116 (A		oment and halance sheet works of art
ıa	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that desc		rance of public service, provide, in Fart XIV,
_	If the organization elected, as permitted under SFAS 116 (A		ant and halance sheet works of art. historical
Đ			
	treasures, or other similar assets held for public exhibition, exploring to those stome	education, or research in future ance of p	Sabile Service, provide the relieving amounts
	relating to these items		▶ ¢
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tr		ciai gaiit, provide
	the following amounts required to be reported under SFAS	To (ASC 930) relating to these items:	▶ ¢
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		. Ψ

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3		dule D (Form 990) 2010 MISSOURI YO	OUTH SOCCER ASSO	CIATIO	ON INC.				43-12823	394	<u> P</u>	age 2
Check all that apply) a Public exhibition d Loan or exchange programs e Other	Pa	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures, o	or Othe	r Simil	ar Asse	ts (cont	ınued)
a Public exhibition d Loan or exchange programs b Scholarly research e Other christian scholarly research e Other chrowde a description of future generations exhibition of the preservation for future generations of art, historical treasures, or other amaliar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	3	Using the organization's acquisition, access	on, and other record	ds, checl	k any of the	following tha	it are a sig	gnificant	use of its	collectio	n item	IS
b Scholarly research e Other Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 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's collection?		(check all that apply)										
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization's collections of air, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes	а	Public exhibition	d	ı 🔲	Loan or exc	hange progra	ams					
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization's collections of art, historical treasures, or other similar assets to be sold to raise further 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 990, Part IV, line 9, or reported an amount on Form 990. Part XIV line 9, or reported an amount on Form 991. Part XIV and complete the following table. Is it she 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 a list 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 a list the organization included an amount on Form 990, Part XI, line 21? Is a list the organization include an amount on Form 990, Part XI, line 21? Is a list the organization include an amount on Form 990, Part XI, line 21? Yes No If Yes' Explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form \$90, Part IV, line 10 Is a Beginning of year balance D Contributions Is a Beginning of year balance D Contributions Is Administrative expenses G Other expenditures for facilities and programs Administrative expenses G Other expenditures for facilities and programs A Administrative expenses G Other expenditures for facilities and programs A verification of the view of the year end balance held as a Board designated or quasi-endowment S Other expenditures for facilities and programs A treatment endowment funds not in the possession of the organization that are held and administered for the organization of the view of the organization is an expensive for the organization of the organization is an expensive for ot	b	Scholarly research	e	, 🗀	Other							
5 During the year, dot the organization solicit or receive donations of art, instonical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV 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 the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is a list the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	С	Preservation for future generations										
To be sold to rase funds rather than to be mantamed as part of the organization? collection?	4	Provide a description of the organization's co	ollections and explai	in how th	ney further t	he organizati	on's exen	npt purpo	se in Parl	XIV.		
Part IV 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, 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. C Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance and Additions during the year g Distributions during the year f Ending balance a Distributions during the year f Ending balance a Distributions during the year f Ending balance b Contributions f Eagenning of year balance b Contributions c Net investment earrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 Part V Endowment Funds (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (5	During the year, did the organization solicit of	r receive donations	of art, hi	stoncal trea	sures, or oth	er sımılar	assets				
Teported 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? b if "Yes," explain the arrangement in Part XIV and complete the following table. c Beginning balance d Additions during the year d Distributions during the year 1 te 1 Ending balance 2 Distributions during the year 1 te 1 Ending balance 2 Distributions during the year 1 te 1 Ending balance 2 Distributions during the year 1 te 1 Ending balance 2 Distributions during the year 1 te 1 Ending balance 2 Distributions during the year 1 te 1 Ending balance 2 Distributions during the year 1 te 2 Distributions during the year 1 te 2 Distributions during the year 1 te 2 Distributions during the year 2 Distributions during the year 3 Distributions during the year 4 Distributions during the year 4 Distributions during the year 4 Distributions during the year 4 Distributions during the year 4 Distributions during the year 4 Distributions during the year 5 Distributions during the year and programs and programs and programs during the year and balance held as 6 Distributions during the year and balance held as 7 Distributions during the year and balance held as 8 Distributions during the year and balance held as 8 Distributions during the year and balance held as 8 Distributions during the year and balance held as 9 Dermanent endowment b 9 S 9 Term endowment b 9 S 1 Term endowment Londs not in the possession of the organization that are held and administered for the organization by: 9 Dermanent endowment b 9 S 1 Term endowment Londs not in the possession of the organization that are held and administered for the organization during the year and programs during the year and programs during the year and programs during the year and programs during the year and programs during the year and programs during the year and programs during the year and programs during the year and programs during the year and year and year and year and year an		to be sold to raise funds rather than to be m	aintained as part of t	the orga	nization's co	ollection?				Yes] No
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 XIV and complete the following table. c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If Yes,* explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes," to Form 990, Part IV, line 10 1a Beginning of year balance b Contributions 1b 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 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment 96 Permanent endowment 96 Permanent endowment 96 Term endowment 96 Permanent endowment 96 Term endowm	Pai	t IV Escrow and Custodial Arran	gements. Compl	ete if the	organizatio	on answered	"Yes" to F	om 990	, Part IV, I	ine 9, or		
on Form 990, Part X? b if "Yes," explain the arrangement in Part XiV and complete the following table. Amount c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Tending balance 2b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes," to Form 990, Part IV, line 10 1a Beginning of year balance 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 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ 96 b Permanent endowment ▶ 96 c Term endowment ▶ 96 a 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 (iii) related organizations (iii) related progranizations (iii) related progranizations (ive there endowment tunds and Equipment. See Form 990, Part X, line 10. 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. 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) (b) Cost or other basis (investment) (b) Cost or other basis (investment) (c) Accumulated deprecation (d) Book value deprecation (d) Book value deprecation (d) Book value deprecation (d) Book value deprecation (d) Equipment (e) Land, Buildings, 2d Land, 2d												
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d Additions during the year Distributions during the year 1 1 1 1 1 1 1 1 1	С	Beginning balance						1c				
e Distributions during the year f Ending balance	d			•		-		1d				
definition balance Total	е			•	•	•		1e				
Did the organization include an amount on Form 990, Part X, line 21? If Yes, explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 If Seginning 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 (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) Four years back (d) Three years back (e) Four years bac	f			•		-		1f				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10	2a	_	orm 990, Part X, line	21?		-	-			Yes		No
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 Contributions Contri	ь	_			•	•		•	•			
(a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (e) Fo	Pai		f the organization ar	nswered	"Yes" to Fo	rm 990, Part	IV, line 10)				
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 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment						T .			ears back	(e) Four	years	back
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 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	1a	Beginning of year balance			_							
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 \(\bigcup \) % b Permanent endowment \(\bigcup \) % c Term endowment \(\bigcup \) % a 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? 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) (b) Cost or other depreciation (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 38,779, 14,625, 24,154.	b	Contributions										
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 \(\bigcup \) % b Permanent endowment \(\bigcup \) % c Term endowment \(\bigcup \) % a 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? 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) (b) Cost or other depreciation (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 38,779, 14,625, 24,154.	С	Net investment earnings, gains, and losses										
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Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	a	•	-									
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(ii) unrelated organizations (iii) 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 (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 38(ii) 3a(ii) 3b (b) Cost or other basis (other) (c) Accumulated depreciation 4 Description of investment (d) Book value 38 Typ. 14,625, 24,154.		•	-					J		[Yes	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 (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 38,779, 14,625, 24,154.										3a(i)		
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 1a Land b Buildings c Leasehold improvements d Equipment 38		-										
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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			•			• •				L		
Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation to Buildings c Leasehold improvements d Equipment 38,779. 14,625, 24,154.	Pai											
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b Buildings c Leasehold improvements d Equipment 38,779. 14,625, 24,154.		,	1							,,		
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c Leasehold improvements 38,779. 14,625. 24,154. d Equipment 38,779. 14,625. 24,154.												
d Equipment 38,779. 14,625. 24,154.	c	•										
	ď	•				38 779		14	625.		24	154
	_											
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			gual Form 990. Part	X, colun	nn (B), line 1				>			

Schedule D (Form 990) 2010

(9)(10)

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Total revenues (Form 990, Part IX, column (A), lan 22) 2 2 3 3 3 3 3 3 3 3	Schedule D (Form 990) 2010 MISSOURI YOUTH SOCCER ASSOCIATION INC.		-1282394	Page 4
2 Total expenses (Form 990, Part IX, column (A), line 25) 3 Excess or (deficit) for the year Subtract line 2 from line 1 5 Donated services and use of facilities 6 Investment expenses 6 Investment expenses 7 Prior penod adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (red) Add lines 4 through 8 10 Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9 10	Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance	ial Statem	ents	
3 Xecess or (deficit) for the year Subtract line 2 from line 1 3 4	1 Total revenue (Form 990, Part VIII, column (A), line 12)	1		
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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

Internal Revenue Service Name of the organization **Employer identification number** 43-1282394 MISSOURI YOUTH SOCCER ASSOCIATION, INC FORM 990. PART VI. SECTION A. LINE 6: THE MEMBERSHIP OF THE ORGANIZATION IS DIVIDED INTO TWO CLASSES OF MEMBERS. PROVISIONAL MEMBERS AND FULL PROVISIONAL MEMBERS ARE COMPRISED OF THOSE MEMBERS WHOSE APPLICATION FOR MEMBERSHIP HAS BEEN APPROVED BY THE DISTRICT COUNCIL AND THE BOARD OF DIRECTORS, BUT HAS NOT BEEN APPROVED BY THE COUNCIL AT AN ANNUAL MEETING OF THE MEMBERS OF THE ORGANIZATION. FULL MEMBERS ARE COMPRISED OF THOSE MEMBERS WHOSE MEMBERSHIP APPLICATION HAS BEEN ACCEPTED BY THE COUNCIL AT AN ANNUAL MEETING OF THE MEMBERS OF THE CORPORATION FORM 990 PART VI SECTION A LINE 7A: MEMBERS OF THE GOVERNING BODY ARE ELECTED BY MAJORITY VOTE OF THE DELEGATES OF THE FULL MEMBERS OF THE ORGANIZATION AT THE ANNUAL MEETING. FORM 990, PART VI, SECTION A, LINE 7B: THE LEGISLATIVE AND JUDICIAL POWERS OF THE ORGANIZATION ARE VESTED IN A COUNCIL CONSISTING OF DULY ELECTED THE COUNCIL HAS THE POWER TO RATIFY DELEGATES FROM EACH FULL MEMBER. ALTER, OR REJECT DECISIONS AND POLICIES OF THE BOARD OF DIRECTORS THE BOARD OF DIRECTORS SHALL TRANSACT ALL BUSINESS OF THE ORGANIZATION APPROVE OR REJECT APPLICATIONS FOR PROVISIONAL MEMBERSHIP RE-EVALUATE AND RE-DEFINE DISTRICT BOUNDARIES, AND/OR THE NUMBER OF DISTRICTS. ACTIONS OF THE BOARD OF DIRECTORS SHALL BE SUBJECT TO THE FINAL APPROVAL OF THE COUNCIL FORM 990 PART VI SECTION B, LINE 11: UPON RECEIPT OF A DRAFT FORM 990. COPY IS PROVIDED TO THE ENTIRE BOARD. CHANGES IF ANY ARE INCORPORATED

Name of the organization	Employer identification number
MISSOURI YOUTH SOCCER ASSOCIATION, INC.	43-1282394
INTO THE FINAL COPY PRIOR TO ITS FILING WITH IRS.	
FORM 990 PART VI SECTION B, LINE 12C: DIRECTORS NOTIFY THE BOARD OF	
POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE. THE BOARD OF DIRECTORS	
REVIEWS AND SUBSEQUENTLY VOTES ON THE POTENTIAL CONFLICTS OF INTEREST.	
FORM 990 PART VI SECTION B. LINE 15A: THE PROCESS FOR DETERMINING	
COMPENSATION OF THE ORGANIZATION'S EXECUTIVE DIRECTOR INCLUDES A REVIEW OF	
COMPARABILITY DATA, INCLUDING COMPENSATION OF EXECUTIVE DIRECTORS OF OTHER	
STATE SOCCER ASSOCIATIONS, AND CONTEMPORANEOUS SUBSTANTIATION AND	<u> </u>
DELIBERATION OF THE DECISION. THE ORGANIZATION DOES NOT CURRENTLY HAVE KEY	
EMPLOYEES.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS	
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS	
AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART XI, LINE 2C:	
THERE HAVE NOT BEEN ANY CHANGES IN THE EXECUTIVE BOARD'S PROCESS FOR	
OVERSEEING THE COMPILATION OF THE FINANCIAL STATEMENTS OR SELECTING AN	
INDEPENDENT ACCOUNTANT.	
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