Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990

2016	
Open to Public Inspection	

OMB No 1545-0047

AF	or the	2016 calendar year, or tax year beginning	and	i enaing			
Вс	heck if pplicable	C Name of organization			D Employer id	entıficatio	n number
	Address	METRO YOUTH FOOTBALL A	SSOCIATION		ļ		
	Name change	Doing business as			2:	3-7439	551
	tnitial return	Number and street (or P.O. box if mail is not de	E Telephone ni				
	Final return/	PO BOX 2171			3:	<u> 19-363</u>	<u>8-0101</u>
	termin- ated	City or town, state or province, country, and	G Gross receipts \$		414,977.		
	Amende return	CEDAR RAPIDO, IA 3240	6-2171		H(a) Is this a gre	oup return	
	Applica- tion pending	F Name and address of principal officer BK1			for subordi	nates?	Yes X No
		423 E TERRACE DR, CENTE		213	H(b) Are all subordi		
		mpt status X 501(c)(3) 501(c) ()		or527	7		see instructions)
		E ► WWW.METROYOUTHFOOTBALL		-	H(c) Group exe		
			ssociation Other \	L Year	of formation: 19	/ 5 M Stat	e of legal domicile. IA
Fa		Summary	\\	II CDOE	amc .		
e	1 B	riefly describe the organization's mission or mos	significant activities 1001	H SPOF	CTS		-
nan		book this box.	ntinued its energtions or dispo	and of more	than 25% of its	act appets	
Activities & Governance		Check this box	ntinued its operations or dispo	sea or more	5 (Hall 2576 OF ILS)	3	8
ဗွ		lumber of independent voting members of the go	•			4	8
ب ب		otal number of individuals employed in calendar				5	0
ııtıe		otal number of volunteers (estimate if necessary)				6	20
cti		otal unrelated business revenue from Part VIII, co				7a	0.
A		let unrelated business taxable income from Form		7		7b	0.
	·		HEGEIVED		Prior Year		Current Year
o	8 C	contributions and grants (Part VIII, line 1h)		ਨ। <u> </u>	17,08	37.	6,000.
nue	9 P	rogram service revenue (Part VIII, line 2g)	NOV 1 9 2018	CD-68	440,03		407,862.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4			6,73	33.	1,115.
<u></u>	11 0	other revenue (Part VIII, column (A), lines 5, 6d, 8d	; 9c. (1965and=114) IIT] _		0.	0.
	12 T	otal revenue - add lines 8 through 11 (must equa	Part VIII, column (A), line 12)	-J	463,8		414,977.
		Grants and similar amounts paid (Part IX, column		<u> </u>		0.	0.
19		senefits paid to or for members (Part IX, column (-		0.	0.
2019 ses		salaries, other compensation, employee benefits (<u> </u>		0.	0.
₩		rofessional fundraising fees (Part IX, column (A),		0.		<u> </u>	<u> </u>
21 Expens		otal fundraising expenses (Part IX, column (D), lir	<u> </u>	- • -	473,6	57	488,351.
FEB		Other expenses (Part IX, column (A), lines 11a-11c otal expenses Add lines 13-17 (must equal Part		 	473,65		488,351.
Ħ		tevenue less expenses. Subtract line 18 from line		-	-9,79		-73,374.
	15 1	evertae 1030 experises oubtract line 10 worth line	<u></u>	Be	ginning of Current		End of Year
INED Assets or Balances	20 T	otal assets (Part X, line 16)			1,015,95		958,635.
	21 T	otal liabilities (Part X, line 26)				0.	0.
		let assets or fund balances Subtract line 21 from	line 20		1,015,95	55.	958,635.
<i>-</i>	rt II	Signature Block					
		ies of perjury, I declare that I havo oxaminod this roturn					wledge and belief, it is
<u>true,</u>	correct,	and complete. Declaration of preparer (other than offic	er) is based on all information of w	hich preparer	has any knowledge		
		Signature of officer				<u> </u>	
Sigr		/ '	.		Date		
Here	e	BRIAN COLLER, TREASURE Type or print name and title	R				
		/ 	D-anararia aranatura		Date Chi	eck	PTIN
Paid		Print/Type preparer's name	Preparer's signature		if	<u> </u>	
Prep	-	Firm's name	<u> </u>		Firm's El	-employed	
Use		Firm's address		 -	7 1111 3 21	· P	
300	····, ['	5 3001055			Phone no).	
Mav	the IRS	S discuss this return with the preparer shown abo	ove? (see instructions)		1		Yes No
	01 11-11-			ons.			Form 990 (2016)

	990 (2016) METRO YOUTH FOOTBALL ASSOCIATION	23-7439551 P	age 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission YOUTH SPORTS		
			
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	☐Yes 🗓	No
_	If "Yes," describe these new services on Schedule O	Yes X	ก
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O	LlYes L∑	∟ No
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expenses, and	
	revenue, if any, for each program service reported		
4a		'S GOAL IS TO FOOTBALL AND YENVOLVEMENT WID ACTIVITIES THAN JUST BYTHE "GOOD NEWS BY INCREASING	ET
4b	(Code) (Expenses \$ including grants of \$) (Revenue		
	(Code) (Expenses \$	ie \$	
40	(Code) (Expenses \$	ie \$	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$		
<u>4e</u>	Total program service expenses ► 481, 451.	Form 990	(2016)

METRO YOUTH FOOTBALL ASSOCIATION

Pai	rt IV Checklist of Required Schedules			<u>90 -</u>
			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_	ļ	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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 temporarily restricted endowments, permanent			
	endowments, 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	110		_
U	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			
Ū	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	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		i	İ
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ ———	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	_	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			.,
	or more? 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 other assistance to or for any			7.7
	foreign organization? 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 other assistance to	46		v
	or for foreign individuals? 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,	17		Х
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
18	1c and 8a? If "Yes " complete Schedule G. Part II	18		x

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Form **990** (2016)

complete Schedule G, Part III

Form 990 (2016) METRO YOUTH FOOTBALL ASSOCIATION Part IV Checklist of Required Schedules (continued)

20a Dd the organization operate one or more hospital facilities? If Yes," <i>complete Schedule H</i> 20b If Yes' to e20b e30, did the organization activate or activation of the session of the				Yes	No
b if "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return" Dot the organization report more than \$5,000 of grants or other assistance to any diomestic organization or domestic government on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and if III and IV an	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
21 Dut the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2º (If "Pes", complete Schedule I, Part I and III and ormer officers, directors, trustees, key employees, and highest compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Is Schedule Is Very Is Very Schedule Is	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			
22 X 23 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX column (A), line 21 "I "res", complete Schedule (Parts I and II) 24 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I Schedule I "I "No", go to line 25e 1 the organization maintain an excess benefit of the schedule I "I "No", go to line 25e 1 the organization maintain an escrive account other than a refunding secrow at any time during the year 1 defease any tax exempt bonds? 25 Did the organization maintain an escrive account other than a refunding secrow at any time during the year 1 defease any tax exempt bonds? 26 Did the organization maintain an escrive account other than a refunding secrow at any time during the year 2 defease any tax exempt bonds? 26 Did the organization maintain an escrive account other than a refunding secrow at any time during the year 2 defease any tax exempt bonds? 27 Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year 2 defease any tax exempt bonds? 28 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization prior Ferms 900 or 990E27 II "Yes," complete Schedule I., Part I V 25 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule I., Part IV 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees or a farmly immembe	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), Ine 2" II "Yes," complete Schedule I, Parts I and III and III Determined in the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? II "Yes," complete Schedule I, Determined III and III		domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		X
23 Did the organization answer "Yes" to Part VII, Section A, Ine 3.4, or 5 about compensation of the organization is current and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, I was severed to sue 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 I, I"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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 I" "No", go to the 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? It is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization ware that tengaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I is 1. Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, or disqualified persons? If "Yes," complete Schedule L, Part IV instructions for applicable fining thresholds, conditions, and exceptions. Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part IV instructions for applicable fining thresholds, conditions, and exce		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule I 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Pas," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds. 25c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds. 25d Did the organization and tas an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Section 50 (c)(3), 50 (c)(4), and 50 (c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not any of the organization or postate Schedule L, Part IV 25d Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, trustee, or key employee or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 26d A annoting the persons of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27d A annoting the persons of the persons of the persons of the pe	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Dd the organization have a taxexempt 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 25a 5 Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 5 Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 5 Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 5 Dd the organization invest any proceeds of tax-exempt bonds period at the during the year to defease any tax-exempt bonds? 6 Dd the organization are at as an "on behalf of" issuer for bonds outstanding at any time during the year? 7 Dd the organization with a disqualified person during the year? If "Yes," complete Schedule L, Part I I 8 Dist the organization was 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-E2? If "Yes," complete Schedule L, Part I I 8 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, lightest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part III 8 Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 8 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 8 A Tamily member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 9 A Tamily member of a current or former officer, dir		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
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 25a b Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-evempt bonds? d Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-evempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization in prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II d Did the organization proof any amount on Part X, line 5, 6, or 22 for receivables from or payables to any outrent or former formers, fureitors, trustees, key employees, inglest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part III D Did the organization or party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV instruction, or former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV instruction, or the instruction of the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule I, Part IV instruction, and th		Schedule J	23		X
Schedule K If 'No', go to line 258 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization minest any proceeds of tax-exempt bonds outstanding at any time during the year of the degracian any tax-exempt bonds? Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I b Is the organization has not been reported on any of the organizations prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part III Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part IV Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a unrent or former officer. A part III Was the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule L, Part IV Did the organization receive contributions of art, instorical treasures, or other similar assets, or qual	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		
b Dd the organization invest any proceeds of fax exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24c 24d 25a Section 501(2)3, 501(2)4), and 501(2)29 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 organizations per forms 990 or 990-E27 If "Yes," complete Schedule L, Part II 25b Dd the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, indest complete Schedule L, Part III 27c Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 28c Was the organization or party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			ŀ
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c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? 32 If "Yes," complete Schedule N, Part I 33 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 34 Schedule N, Part II 35 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 36 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 37 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 38 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 39 Did the organization should 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 39 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 39 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 30 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 31 Note. All Form 990 filers are required to complete Schedule O	_				
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Ра	rt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Chock in Control of Contains a respense of Meta to any line in the Cart		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	Γ	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	•		1
С	(gambling) winnings to prize winners?	1	X	
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	<u>1c</u>		
Za	filed for the calendar year ending with or within the year covered by this return 2a 0			
b		2b	-	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		-	
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	<u> </u>		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		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 the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	<u>6</u> b	<u> </u>	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	l		
	to file Form 8282?	7c	 	X
d			-	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	· · · · · · · · · · · · · · · · · · ·	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	_8_		_
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		- ~
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	_	
10	Section 501(c)(7) organizations. Enter	- 55		_
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
_	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
b	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			
С	Enter the amount of reserves on hand			

14a

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
<u>Sec</u>	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 1a 8			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8			
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		X
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		Х
6	Did the organization have members or stockholders?	6		Х
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	tion D. I onoted (this decision is requests information about policies not required by the internal revenue code)		Yes	No
10-	Did the organization have local chapters, branches, or affiliates?	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	iva		
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11.	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	IIa		21
		12a		$\overline{\mathbf{x}}$
	Did the organization have a written conflict of interest policy? If "No," go to line 13			
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10-		
40	In Schedule O how this was done	12c		Х
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent	ĺ		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			~~~
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		<u>X</u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			i
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?	16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			!
	exempt status with respect to such arrangements?	16b		
<u>sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	BRIAN COLLER - 319-404-0055			
	423 E. TERRACE DR, CENTER POINT, IA 52213			

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Page 7

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

Check if Schedule O contains a response or note to any line 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

X Check this box if neither the organization (A)	(B))			(D)	(E)	(F)
Name and Title	Average			Pos		١		Reportable	Reportable	Estimated
Name and Title	hours per	(do	(do not check more than one box, unless person is both an officer and a director/trustee)			than	one	compensation	compensation	amount of
	week							from	from related	other
	(list any	흕						the	organizations	compensation
	hours for	direc				8		organization	(W-2/1099-MISC)	from the
	related	ē	ıstee			ansat		(W-2/1099-MISC)		organization
	organizations	E.	nal tr		oyee	å.	1	1		and related
	below	Individual trustee or director	Institutional trustee	늙	Key emptoyee	Highest compensated employee	Former			organizations
	line)	Ē	lust	Officer	Key	문등	호			
(1) MARK KOPPEDRYER	10.00									
VP FOOTBALL OPS		X						0.	0.	0.
(2) BRIAN BURRELL	10.00									
VP FUNDRAISING		X				ļ		0.	0.	0.
(3) GARY BRAKSIEK	10.00									
PRESIDENT		X		х			İ	0.	0.	0.
(4) JEFF HILLEMAN	10.00									
VP_VOLUNTEERS/COACHES		X		х				0.	0.	0.
(5) ROGER GRUWELL	10.00	-								
VP FINANCE		X		х				0.	0.	0.
VF FINANCE	 	 			-		 	 		
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								}	(
								<u> </u>		

<u>. a</u>	Section A. Officers, Directors, Tru	stees, Key Em	ploy	<u>ees</u>	<u>, an</u>	<u>a Hi</u>	gne	st C	ompensated Employe	es (continued)		_		
	(A)	(B)			(0	C)			(D)	(E)			(F)	
•	Name and title	Average						one	Reportable	Reportable		E	stimate	ed
		hours per	box	box, unless per officer and a di			is bot	th an	compensation	compensation	on	ar	mount	of
		week (list any	1	cer ar	o a o	recto	T	Tee)	from	from related			other	
		hours for	lirect				_		the	organization		J.	npensa	
		related	0 0 0	stee			sated		organization (W-2/1099-MISC)	(W-2/1099-MI	30)	t	rom th janizat	
		organizations	Individual trustee or director	Institutional trustee		yee	nd mc		(172) 1865 111185)				d relat	
		below	lgngu	tutton	ᡖ	Key employee	est co	ية ا					anızatı	
		line)	盲	Insti	Officer	Key	Highest compensated employee	퉏						
]											
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1b	Sub-total							>	0.		0.			0.
С	Total from continuation sheets to Part \	/II, Section A						ightharpoons	0.		0.			0.
d	Total (add lines 1b and 1c)								0.		0.			0.
2	Total number of individuals (including but	not limited to th	ose	liste	d at	oove	e) wł	no re	eceived more than \$100	,000 of reportab	le			
	compensation from the organization												,	
													Yes	No
3	Did the organization list any former office	r, director, or tru	uste	e, ke	y en	nplo	yee	, or l	highest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for	such individual										3		X
4	For any individual listed on line 1a, is the s	um of reportab	le co	omp	ensa	ation	n and	d oth	ner compensation from	the organization				
	and related organizations greater than \$15											4		X
5	Did any person listed on line 1a receive or	accrue compe	nsat	ion f	rom	any	unr/	elate	ed organization or indivi	dual for services	i			
	rendered to the organization? If "Yes," con	nplete Schedul	e <i>J f</i>	or su	ıch j	pers	son					5_		X
Sec	tion B. Independent Contractors								·					
1	Complete this table for your five highest c	ompensated in	depe	ende	nt c	ontr	racto	ors ti	hat received more than	\$100,000 of con	npens	ation '	from	
	the organization Report compensation for	the calendar y	ear	endi	ng w	/ith	or w	ithin	the organization's tax	/ear				
	(A)								(B)				C)	
	Name and busines	s address	N(INC	<u> </u>				Description of s	ervices		compe	nsatio	n
	<u> </u>							4						
								\dashv						
								_						
2	Total number of independent contractors	· –	ot lir	nite	d to		_	sted	above) who received m	ore than				
	\$100,000 of compensation from the organ	ization 🕨				(า .							

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (B) (D) Revenue excluded from tax under Related or Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 6,000 similar amounts not included above Q Noncash contributions included in lines 1a-1f \$ 6,000. h Total. Add lines 1a-1f Business Code 193,252 2 a PLAYER REGISTRATION 900099 193,252. Program Service Revenue 137,226. 137,226. 900099 **b** CONCESSIONS/CHOCOLATE 77,384. 77,384. c JERSEY / PANT SALES 900099 f All other program service revenue 407,862. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,115. 1,115. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 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 c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b d All other revenue e Total. Add lines 11a-11d 414,977. 407,862. Total revenue. See instructions. 12

Form 990 (2016) METRO YOUTH FOOTBALL ASSOCIATION Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com			mpiete column (A)	X
Do.	Check if Schedule O contains a respon		(B)	(C) Management and	
	8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Managèment and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				<u> </u>
3	Grants and other assistance to foreign				•
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include	· · · · · ·			
Ū	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	1,575.		1,575.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	4 300	4 300		
12	Advertising and promotion	4,309. 1,375.	4,309.	1,375.	
13	Office expenses	1,3/3.		1,3/3.	
14	Information technology				
15	Royalties Occupancy	-			
16 17	Travel	·			
18	Payments of travel or entertainment expenses				 ,
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	43,252.	43,252.		
23	Insurance	16,049.	16,049.		
24	Other expenses Itemize expenses not covered				!
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	455 560	155 560		
а	TACKLE FOOTBALL EQUIPME	155,562.	155,562.		
þ	COST OF CHOCOLATE SALES	81,224.	81,224.		
C	OFFICIALS AND SCOREKEEP	33,801. 32,319.	33,801. 32,319.		
d	FACILITY COSTS	118,885.	114,935.	3,950.	
-	All other expenses SEE SCH O	488,351.	481,451.	6,900.	0.
<u>25</u>	Total functional expenses Add lines 1 through 24e Joint costs. Complete this line only if the organization	400, JJT.	40T'42T'	0,300.	
26	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2016)
Part X Balance Sheet

		Check if Schedule O contains a response or not	e to ar	ny line in this Part X			
		Orioda a response or not	0 10 01	ly into in this rack	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			286,838.	2	263,336.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and fo	officers, directors,				
ļ		trustees, key employees, and highest compensation		١	1		
		Part II of Schedule L			5		
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined under			,
		section 4958(f)(1)), persons described in section					
- 1		employers and sponsoring organizations of sect			. !		
ध		employees' beneficiary organizations (see instr)	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
ĕ	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10 a	Land, buildings, and equipment cost or other					,
l		basis Complete Part VI of Schedule D	10a	1,032,513.		l_	,
	b	Less accumulated depreciation	10b	486,555.	<u>589,210.</u>	10c	545,958.
	11	Investments - publicly traded securities				11	
Ì	12	Investments - other securities See Part IV, line 1		12			
	13	Investments · program-related See Part IV, line	11		· <u></u> -	13	
	14	Intangible assets		<u></u> .	14		
ĺ	15	Other assets See Part IV, line 11			139,907.	15	149,341.
	16	Total assets. Add lines 1 through 15 (must equ	al line :	34)	1,015,955.	16	958,635.
	17	Accounts payable and accrued expenses		17			
ĺ	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete I	Part IV	of Schedule D		21	
es	22	Loans and other payables to current and former					•
ilt		key employees, highest compensated employee	es, and	disqualified persons		-	
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated		· ·		24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	17-24) Complete Part X of			
	-00	Schedule D			0.	25 26	0.
	26	Total liabilities. Add lines 17 through 25	<u> </u>	ck here		_26	
,		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 and		ck nere P and			
ě	07	Unrestricted net assets	u 34.	(27	
la l	27 28	Temporarily restricted net assets		28			
<u>B</u>	29	Permanently restricted net assets			29		
Fund Balances	25	Organizations that do not follow SFAS 117 (A	SC 95	8) check here			
ř.		and complete lines 30 through 34.	00 00	oj, oncok noro p			ļ
Net Assets or	30	Capital stock or trust principal, or current funds			0.	30	0.
SSe	31	Paid in or capital surplus, or land, building, or eq	uipme	nt fund	0.	31	0.
¥	32	Retained earnings, endowment, accumulated in			1,015,955.	32	958,635.
ž	33	Total net assets or fund balances	·		1,015,955.	33	958,635.
	34_	Total liabilities and net assets/fund balances			1,015,955.	34	958,635.

<u>⊦o</u> rm	990 (2016) METRO YOUTH FOOTBALL ASSOCIATION	<u> </u>	/43955I	Pa	ige 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
•					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			77.
2	Total expenses (must equal Part IX, column (A), line 25)	2	48	8,3	51.
3	Revenue less expenses Subtract line 2 from line 1	3	-7	3,3	74.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,01	5,9	55.
5					
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		6,6	20.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	95	8,6	35.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both				ļ
	Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,			ł
	consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Aud	lit		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	it		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>
			Form	990	(2016)

632012 11-11-16

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number METRO YOUTH FOOTBALL ASSOCIATION 23-7439551 Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(1). 1 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 L section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 \mathbf{X} An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (i) Name of supported (III) Type of organization (v) Amount of monetary (vi) Amount of other ın your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 METRO YOUTH FOOTBALL ASSOCIATION 23-74395 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	7,778.	23,356.	6,500.	17,087.	6,000.	60,721.
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	7,778.	23,356.	6,500.	17,087.	6,000.	60,721.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included			J			
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
_6	Public support. Subtract line 5 from line 4						60,721.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	7,778.	23,356.	6,500.	17,087.	6,000.	60,721.
8	Gross income from interest,						
	dividends, payments received on	}					
	securities loans, rents, royalties			1		,	
	and income from similar sources	3,509.	3,665.	3,574.	4,087.	1,115.	15,950.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain			İ			
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						76,671.
12	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
_ _	organization, check this box and stor	here					
Sec	ction C. Computation of Publ	ic Support Pei	rcentage			,, -	
14	Public support percentage for 2016 (I	ıne 6, column (f) dı	vided by line 11, c	olumn (f))		14	79.20 %
	Public support percentage from 2015					15	80.54 %
16a	33 1/3% support test - 2016. If the o				4 is 33 1/3% or m	nore, check this box	
	stop here. The organization qualifies		-				\triangleright X
b	33 1/3% support test - 2015. If the o				line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	•			40.40		
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					t VI how the organi	zation
	meets the "facts-and-circumstances"						▶∟
b	10% -facts-and-circumstances tes						0% or
	more, and if the organization meets the						, —
	organization meets the "facts-and-circ						
<u> 18</u>	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	ı, 16b, 17a, or 17b	, check this box a	nd see instructions	

	(Complete only if you checked			e organization failed	d to qualify under	Part II. If the organ	ization fails to
	qualify under the tests listed b	elow, please com	olete Part II)				/
Se	ction A. Public Support			_ 			
	endar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not			11		/	1
	include any "unusual grants ")			 	<u> </u>		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that			1 1			
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to			1 1			
	or expended on its behalf			<u> </u>			
5	The value of services or facilities						
	furnished by a governmental unit to				A'		
	the organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and			\ /	1		
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)		/	1			
	ction B. Total Support				·		
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6		/				
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		_/				
b	Unrelated business taxable income		/	1			
	(less section 511 taxes) from businesses		/	,			
	acquired after June 30, 1975			1	ļ	ļ	
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
	Total support (Add lines 9, 10c, 11, and 12)	!		<u> </u>			
14	First five years. If the Form 990 is for	the organization's	s first, second, th	ırd, fourth, or fıfth t	ax year as a secti	on 501(c)(3) organı	zation,
	check this box and stop here		 _				
	ction C. Computation of Publi						
	Public support percentage for 2016 (li			column (f))	\	15	%
	Public support percentage from 2015				<u>\</u>	16	%
	ction D. Computation of Inves					\	
	Investment income percentage for 20			ine 13, column (f))		\17	
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2016. If the more than 33 1/3%, check this box ar	nd stop here. The	organization qua	alifies as a publicly	supported organi	zation \	▶□
b	33 1/3% support tests - 2015. If the						
	line 18 is not more than 33 1/3%, che						┝┤
20	Private foundation. If the organization	n did not check a	box on line 14, 19	⊎a, or 19b, check tl	nis box and see ir	istructions	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
		_1
1		
2		
3a		1
		1
3b		
4a	_	
	-	- :
4b		-
		ı
4c	-	<u> </u>
		 1
		,
5a		1
 5b		1
5c		
		;
		,
6	-	
7		, :
8	٠ ـ]
		1
9a	·	
9b		'
9c		
		<i>-</i> .
10a	_	
		-

	edule A (Form 990 or 990-EZ) 2016 METRO YOUTH FOOTBALL ASSOCIATION 23-7 rt IV Supporting Organizations (continued)	43955	1 P	age 5
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		103	110
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	-		1
-	below, the governing body of a supported organization?	11a		ند ا
h	A family member of a person described in (a) above?		 -	\vdash
	·	11b	 -	_
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	L	L .
Sec	tion B. Type I Supporting Organizations			T
	Data described to the control of the	Г	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	-	l	ł
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			-
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1_1_		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported	i		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		}	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	l		_]
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			,
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	ļ		
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Sec	tion D. All Type III Supporting Organizations		L	<u> </u>
<u>560</u>	non b. An Type in Supporting Organizations		Yes	No
	Did the average term average to each of the average and average to the last day of the fifth month of the	<u> </u>	res	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			ļ .
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	İ		'
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		-	'
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1_		<u> </u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			'
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			-:
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		ļ	'
	significant voice in the organization's investment policies and in directing the use of the organization's			۱ ا
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		_	
	supported organizations played in this regard	3		
<u>Sec</u>	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see iii	nstructions)	_
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		'	·
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		}	1
	that these activities constituted substantially all of its activities	2a	- 1	, -
L		_20		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			} ;
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		-	-
	activities but for the organization's involvement	2b	<u> </u>	1
3	Parent of Supported Organizations Answer (a) and (b) below.			'
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		-	
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

	edule A (Form 990 or 990-EZ) 2016 METRO YOUTH FOOTBALL AS	SSOCIA	TION	23-7439551 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov 20, 1970 (explain	in Part VI) See instructions. Al
_`.	other Type III non-functionally integrated supporting organizations must c	omplete Se	ections A through E	
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
_8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	_8		
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
_	instructions for short tax year or assets held for part of year)			1
 _ a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			_
	Acquisition indebtedness applicable to non-exempt-use assets	2		
	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
_	see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		ed Type III supporting o	rganization (see
	instructions)			- ·

Schedule A (Form 990 or 990-EZ) 2016

Sche Pa i	rt V Type III Non-Functionally Integrated 509			23-7439551 Page 7
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purpos	es of supported organization	าร	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which to	he organization is responsive	9	
	(provide details in Part VI) See instructions			
9_	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iII) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6		·	
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2016			
a				
b				,
c	From 2013			
	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D,			
-	line 7 \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
<u>-</u> _	Remaining underdistributions for years prior to 2016, if		·	
	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h			
•	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2017. Add lines 3j		-	
•	and 4c			
8	Breakdown of line 7			
<u>-</u> -	DIGENOSALI OF HITE 1			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
			<u> </u>	<u> </u>

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 METRO YOUTH FOOTBALL ASSOCIATION 23-7439551 Pa Part VI Supplemental Information. Provide the explanations required by Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11p, Part IV, Section B, lines 1 and 2, Part IV, Section C, lines 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, Iine 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)	
Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information	
	—

632028 09-21-16

Schedule A (Form 990 or 990-EZ) 2016

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

Employer identification number

Pa	rt I Organizations Maintaining Donor Advised		le or Accounts Complete (the
Га			is of Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	6 (a) Donor advised funds	(h) Frieds and other control
	<u> </u>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wr	-	
	are the organization's property, subject to the organization's ex		└── Yes
6	Did the organization inform all grantees, donors, and donor adv	risors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor or o	donor advisor, or for any other purpos	
_	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the organ	nization answered "Yes" on Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or edu	ucation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the forn	
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		_2b
С	Number of conservation easements on a certified historic struc	• •	2c
d	Number of conservation easements included in (c) acquired aft	er 8/17/06, and not on a historic struc	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by th	ne organization during the tax
	year >		
4	Number of states where property subject to conservation ease	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the period		
	violations, and enforcement of the conservation easements it h		└── Yes
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	andling of violations, and enforcing coi	nservation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, and enforcing conserv	ation easements during the year
_	\$		
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 17	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	· ·	
	include, if applicable, the text of the footnote to the organization	n's financial statements that describes	s the organization's accounting for
Da	conservation easements rt III Organizations Maintaining Collections of A	Art Historical Transuras or (Other Similar Assets
- a	Complete if the organization answered "Yes" on Form 9		Julei Similai Assets.
			wast and belease sheet walks of ort
1a	If the organization elected, as permitted under SFAS 116 (ASC		
	historical treasures, or other similar assets held for public exhib		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		
b	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of pi	ublic service, provide the following amounts
	relating to these items		. .
	(i) Revenue included on 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 treasi		ai gain, provide
	the following amounts required to be reported under SFAS 116	(ASC 958) relating to these items	. .
а	Revenue included on Form 990, Part VIII, line 1		5
h-	Accete included in Form 900 Part Y		E C

		OUTH FOOTB				O4b -			39551	Page 2
Ь——										
, 3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	at are a si	gnıfıcant	use of its	collection i	tems
	(check all that apply)									
а	Public exhibition	C	, <u> </u>	Loan or exc	hange progr	ams				
b	Scholarly research	•	, []	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın how ti	hey further t	he organizat	ion's exei	npt purp	ose in Par	t XIII	
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? Yes No									
Pa	Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or									
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	sets not	ıncluded	_	_	
	on Form 990, Part X?									
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for	escrow or co	ustodial acco	ount liabil	ity?	L	Yes	L N₀
	If "Yes," explain the arrangement in Part XIII									<u></u>
Pai	rt V Endowment Funds. Complete	f the organization ar	swered	"Yes" on Fo	orm 990, <u>Pa</u> r	t IV, line 1	0			
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four ye	ars back
1a	Beginning of year balance									
b	Contributions				·					
С	Net investment earnings, gains, and losses						_			
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curi	rent year end baland	e (line 1	g, column (a	a)) held as					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	ind administe	ered for th	ne organiz	zation		
	by								Y	es No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(II)	
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requi	red on S	Schedule R?					3b	
_4	Describe in Part XIII the intended uses of the	organization's endo	wment	funds						
Par	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	d "Yes" on Form 990	0, Part I	V, line 11a S	See Form 990), Part X,	line 10			
_	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Ac	cumulate	ed	(d) Book v	alue
_		basis (investr	nent)	basis	(other)	dep	reciation			
1a	Land			25	0,000.					,000.
b	Buildings			8	3,629.		52,2	18.		,411.
С	Leasehold improvements				6,343.	3	55,1		261	,188.
d	Equipment			8	2,541.		79,1	82.	3	,359.
е	Other									
Total	al. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)									

Schedule D (Form 990) 2016

Part VII Investments - Other Securities.			3-/439551 Page
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	on Form 990, Part IV, (b) Book value	line 11b See Form 990, Part X, line 12 (c) Method of valuation Cost or er	ad-of-year market value
(1) Financial derivatives	(b) Book value	(c) Welfied of Valuation Cost of en	id-or-year market value
(2) Closely-held equity interests			
(3) Other			
(A)	-		
(B)			
(C)	,		
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or er	nd-of-year market value
(1)		<u> </u>	
(2)			
(3)			
(5)	N =	-	
(6)			
			
Total (Col (b) must equal Form 990, Part X, col. (B) line 13.)			
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11d. See Form 990. Part X. line 15	
	Description	mio i ra escretin esc, i arrx, mo re	(b) Book value
(1) THE GREATER CEDAR RAPIDS		TOUNDATION	149,341
(2)		00112122011	
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)		149,341
Part X Other Liabilities.			_
Complete if the organization answered "Yes"	on Form 990, Part IV,	(b) Book value	5
1. (a) Description of liability		(b) Book value	*
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

<u>(9)</u>

	t XI Reconciliation of Revenue per Audited Financial State		nue per Return.	Page 4
	Complete if the organization answered "Yes" on Form 990, Part IV, line		neo por metarrii	
1	Total revenue, gains, and other support per audited financial statements	7 124	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		- 1	
- а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c	1	
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pai	t XII Reconciliation of Expenses per Audited Financial Sta	itements With Expe	nses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	, 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	_2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	t XIII Supplemental Information.			
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide an		Part V, line 4, Part X, line 2, Part X	XI,
PAF	RT V, LINE 4 - INTENDED USES OF ENDOWMEN	NT_FUND_		
NE(CESSARY MAINTENANCE AND IMPROVEMENTS FOR	R FACILITIES	AND SCHOLARSHIPS	•
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Schedule D (Form 990) 2016

SCHEDULE O

Internal Revenue Service

(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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization

METER VOITH ECOMBALL ASSOCIATION

Employer identification number 23-7/30551

METRO YOUTH FOOTBALL ASSOCIATION	23-7439551
FORM 990, PART VI, SECTION B, LINE 11B:	
NO REVIEW WAS CONDUCTED.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATE	EMENTS ARE
AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES	S:
PLAYER AWARDS:	
PROGRAM SERVICE EXPENSES	31,600.
MANAGEMENT AND GENERAL EXPENSES	<u> </u>
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	31,600.
OTHER OPERATING COSTS:	
PROGRAM SERVICE EXPENSES	30,357.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	30,357.
UTILITIES:	
PROGRAM SERVICE EXPENSES	12,107.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	12,107.

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization METRO YOUTH FOOTBALL ASSOCIATION	Employer identification number 23-7439551
CREDIT CARD FEES:	23-7439331
PROGRAM SERVICE EXPENSES	11,880.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	11,880.
·	
COACHING COSTS:	
PROGRAM SERVICE EXPENSES	7,506.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	
TOTAL EXPENSES	7,506.
TRAINERS:	
PROGRAM SERVICE EXPENSES	5,264.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	5,264.
FLAG SHIRTS:	
PROGRAM SERVICE EXPENSES	4,766.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,766.
SCHOLARSHIP EXPENSE:	
PROGRAM SERVICE EXPENSES	4,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES 632212 08-25-16	0 . Schedule O (Form 990 or 990-EZ) (2016)