Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2019

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

	<u> </u>	Or trie	2018 Calendar year, or tax year beginning	and ending			
	В	heck if	C Name of organization		D Employer identific	cation number	
	<u></u>	Addre					
		Name chang			20-86	611780	
		Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/sui	•		
		Final return/	100 ANDOVER PARK WEST	206-2	<u> 267-8850 </u>		
		termin ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$ 4,042,553.			
		Ameno	TURWILLA, WA 98188	H(a) Is this a group re			
		Applic	F Name and address of principal officer. JOHN WILSON		for subordinates	? Yes X No	
		pendir	SAME AS C ABOVE	2	H(b) Are all subordinates in	cluded? Yes No	
2			empt status X 501(c)(3) 501(c)() (insert no.) 4947(a))(1) or 5	27 If "No," attach a	list (see instructions)	
W	<u>J W</u>	Vebsit	e: > WWW.PACIFICNORTHWESTSOCCERCLUB.COM		H(c) Group exemption		
1.1			organization: X Corporation Trust Association Other ▶	L Ye	ar of formation: 2007 M	State of legal domicile: WA	
15	P a		Summary	<u> </u>			
•	.	1	Briefly describe the organization's mission or most significant activities. $\underline{ extbf{TO}}$	PROVII	<u>E AN ORGANIZI</u>	ED SOCCER	
	Activities & Governance		PROGRAM.				
	Ĕ.	2	Check this box 🕨 🔲 if the organization discontinued its operations or di	sposed of mo	ore than 25% of its net as	sets	
	o Ve	3	Number of voting members of the governing body (Part VI, line 1a)		3	9	
	9	4	Number of independent voting members of the governing body (Part VI, line 1	1b)	4	9	
	sa S	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	58	
	ĬŢ.		Total number of volunteers (estimate if necessary)		6	240	
	Ç	7 a	Total unrelated business revenue from Part VIII, column (C) line 120 IN CO.	_	7a	<u> </u>	
		b	Net unrelated business taxable income from Form 990 T, line 38	RES	7b	<u>0.</u>	
			110 000 1	3	Prior Year	Current Year	
	a	8	Contributions and grants (Part VIII, line 1h) NOV 1 2 2019	L	21,984.	76,318.	
	Revenue	9	Program service revenue (Part VIII, line 2g)	' <u></u>	2,775,199.	3,860,862.	
	ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	L	351.	548.	
	Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10分配任他 UTAH	[60,982.	48,963.	
			Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1		2,858,516.	3,986,691.	
2019			Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	22,040.	
2		14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
-	S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-	10)	430,632.	1,603,860.	
٠ <u>٠</u> ٠,	Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.	
Ź	Ç		Total fundraising expenses (Part IX, column (D), line 25)	0.			
볼.	Û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,221,656.	2,158,979.	
<u> </u>	,		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	Ī	2,652,288.	3,784,879.	
古文		19	Revenue less expenses Subtract line 18 from line 12		206,228.	201,812.	
ENVELUPE NOV (0 7	Assets or Balances				Beginning of Current Year	End of Year	
N. P. P.	šets alan	20	Total assets (Part X, line 16)		1,454,523.	2,314,547.	
出記	ASS d B	21	Total liabilities (Part X, line 26)	Ī	0.	609,495.	
15	Net's Fund	22	Net assets or fund balances Subtract line 21 from line 20	ſ	1,454,523.	1,705,052.	
(3		irt II	Signature Block				
·	Undi	er pena	alties of perjury, I declare that I have examined this return, including accompanying sche	edules and stat	ements, and to the best of m	y knowledge and belief, it is	
(-(true:	corre	ct, and complete. Declaration of pieparer (other than officer) is based on all information	of which prepa	rer has any knowledge.	•	
1 1	ي ر	,			NoV. 7	2019	
1 (] [•] Sigr	1	Signature of officer		Date		
. (]) Ḥer	e	JOHN WILSON, PRESIDENT				
0	: (0.	•	Type or print name and title	<u> </u>			
	· ~		Print/Type preparer's name Preparer's signature		Date Check	PTIN	
Q	دي رPaid		HOWARD DONKIN, CPA HOWARD DONKIN	CPA	10/09/19 it self-employe		
0	Frep		Firm's name JACOBSON JARVIS & CO, PLLC	, 0111	Firm's EIN	91-2011386	
		Only	Firm's address 200 FIRST AVE WEST, SUITE 200		THINSCH	<u> </u>	
5	-50	Jy	SEATTLE, WA 98119-4219		Phone no (2	06)-628-8990_	
7	Mar	the !			Filone IIO. \ Z	X Yes No	
4.			RS discuss this return with the preparer shown above? (see instructions)			Form 990 (2018)	
X (/	8320	01 12-3	31-18 LHA For Paperwork Reduction Act Notice, see the separate instr	uctions.		rorm 330 (2018)	

	n 990 (2018) PACIFIC NORTHWEST SOCCER CLUB 20-8611780	Page 2
Par	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	
	TO PROVIDE AN ORGANIZED SOCCER PROGRAM FOR THE CHARACTER DEVELOPMENT	<u>r </u>
	OF YOUTH, TO PROMOTE PHYSICAL FITNESS, TO EDUCATE PLAYERS, COACHES,	
	AND THE PUBLIC IN THE SKILLS, TECHNIQUES, AND TACTICS OF SOCCER, AND)
	TO STIMULATE AND EXPAND PUBLIC INTEREST AND UNDERSTANDING OF SOCCER.	·
2	Did the organization undertake any significant program services during the year which were not listed on the	
		X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No
-	If "Yes," describe these changes on Schedule O.	
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 others, the total expenses, a	nd
	revenue, if any, for each program service reported.	
4a	2 650 144	362.)
74	TO PROVIDE AN ORGANIZED SOCCER PROGRAM THAT PROMOTES PHYSICAL FITNES	
	AND EDUCATES PLAYERS, COACHES, AND THE PUBLIC IN THE SKILLS,	
	TECHNIQUES, AND TACTICS OF SOCCER, AND TO STIMULATE AND EXPAND PUBLI	IC O
	INTEREST AND UNDERSTANDING OF SOCCER. TO ENCOURAGE ALL INDIVIDUALS	
		DR .
	ECONOMIC STATUS TO PARTICIPATE IN THE PROGRAMS, FUNCTIONS, AND	
	ACTIVITIES OF THE CLUB. TO DO SO BY FIELDING AND DEVELOPING PREMIER	
	SOCCER TEAMS FOR BOYS AND GIRLS AGED US THROUGH U19 IN THE PARTNERIN	JG
	SOCCER ASSOCIATIONS. TO PROVIDE FINANCIAL ASSISTANCE TO YOUTH WHO	
	DEMONSTRATE FINANCIAL NEED AND OTHERWISE NOT BE ABLE TO PARTICIPATE.	
	DEMONSTRATE FINANCIAL NEED AND OTHERWISE NOT BE ADDE TO TAKTICITATE	·
		
46	(Code) (Expenses \$ including grants of \$) (Revenue \$	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$	
		· · · · · · · · · · · · · · · · · · ·
		
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$,
		
		
	·	
4d	Other program services (Describe in Schedule O)	
-	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program service expenses 3 679 144.	

Form **990** (2018)

Form 990 (2018) PACIFIC NORTHWEST SOCCER CLUB
Part IV Checklist of Required Schedules

			V	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
•	If "Yes," complete Schedule A	1	х	
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		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		<u> X</u>
0	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		<u> X</u>
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	-	X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44-		v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11d		X
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116	<u> </u>	
•	the organization's separate of consolidated inhancial statements for the tax year include a roothold that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
19a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
ь	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		X
14a	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	<u> </u>	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			
	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			
	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,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	X	
20a		20a	ļ. —	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	ļ	ļ
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	1

Form **990** (2018)

Pai	TIV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			1
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J .	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			1
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		v
	Schedule K If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	\vdash
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		1
	any tax-exempt bonds? Did the exemptation get on an "on behalf of" recover for bonds outstanding at any time during the year?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		X
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		-
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			ĺ
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I	25b		х
00	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		42
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
21	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	27		х
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
28	instructions for applicable filing thresholds, conditions, and exceptions)			
-	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
Ŭ	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	1 :	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			- 55-
00	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	1		
•	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	[
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
Pa				_
	Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 15	<u> </u>		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 1	.]		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming]		
	(gambling) winnings to prize winners?	1c	X	

\sim	Λ	- 1	n.	_	1	1	7	0	\sim	
4	u	- 1	יכ	О.	1	1	1	О.	u	

Page 5

			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 58							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		-					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<u>3b</u>						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	_		٠,,				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>	- ,	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)			v				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u> 5b		X				
	Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?							
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		X				
L	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua .						
b	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
	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	15 15 15 15 15 15 15 15 15 15 15 15 15 1	7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
Ŭ	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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		<u>. </u>				
9	Sponsoring organizations maintaining donor advised funds.			~.				
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter			١.				
а	Initiation fees and capital contributions included on Part VIII, line 12		ļ ·					
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)							
	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.	12-	·	 				
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		 				
h	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the		j					
U	organization is licensed to issue qualified health plans			_				
_	Enter the amount of reserves on hand	}						
C 14a		142		X				
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b	 	1				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-40	 					
.5	excess parachute payment(s) during the year?	15		X				
	If "Yes," see instructions and file Form 4720, Schedule N	13	 	 ^				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O	10	 	-4				
	1 163, Complete i Offit 4720, Scriedule O	<u> </u>	. 000	(0040				

Form 990 (2018) PACIFIC NORTHWEST SOCCER CLUB 20-8611780 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response Page 6 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					<u> </u>		
Sec	tion A. Governing Body and Management							
			1		Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		9				
	If there are material differences in voting rights among members of the governing body, or if the governing					٠.		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O							
b	Enter the number of voting members included in line 1a, above, who are independent	1b		9				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	iip 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 t	he dire	ct 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 wa	as filed?	4_		X		
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		5		X		
6	Did the organization have members or stockholders?			6		X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or					
	more members of the governing body?			7a	Х	<u> </u>		
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?							
8	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	<u> </u>		
b	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 re	ached	at the		ļ			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u> </u>		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Revenu	e Code)			,		
					Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			10a		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such	chapte	s, affiliates,		İ			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy befo	ore filing the form?	11a	X			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X			
b	Wore officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	ce to cor	iflicts?	12b	X	<u> </u>		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	Yes," a	escribe			1		
	ın Schedule O how this was done			12c	X	<u> </u>		
13	Did the organization have a written whistleblower policy?			13		X		
14	Did the organization have a written document retention and destruction policy?			14		<u> </u>		
15	Did the process for determining compensation of the following persons include a review and appro	val by I	ndependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?						
а	The organization's CEO, Executive Director, or top management official			15a	X	ļ		
b	Other officers or key employees of the organization			15b	X	 		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	with a					
	taxable entity during the year?			16a	ļ	X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anızatı	on's					
	exempt status with respect to such arrangements?			16b				
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ►WA							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, a	and 990	0-T (Section 501(c)(3)s only) avaıl	able		
	for public inspection indicate how you made these available. Check all that apply							
	Own website Another's website X Upon request Other (expla	ın ın Sc	hedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or	onflict	of interest policy, a	nd finar	icial			
	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 b	ooks a	nd records 🕨					
	MICHELLE PATTON - 206-399-2597							
	100 ANDOVED DARK WEST NO 150 TIKWILA WA 9818	Ω						

Form	aan	(201	B١

PACIFIC NORTHWEST SOCCER CLUB

20-8611780

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

n 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

List persons in the following order individual trustees or directors, institutional trustees, officers; key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per	(do box	not c	(C Posi heck i	ition		one h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JOHN WILSON	10.00	x		x				0.	0.	0.
PRESIDENT (2) MICHELLE PATTON	25.00	 ^		22						
TREASURER		X		Х				0.	0.	0.
(3) KIMBERLY ORNDORFF	10.00	1						_		
SECRETARY	00.00	X	-	X		┡	<u> </u>	0.	0.	0.
(4) ROBIN HAUTAMAKI	20.00	١,,		,,				1	0.	0.
REGISTRAR	10.00	X		X	<u> </u>	 		0.	<u> </u>	<u> </u>
(5) BRADEN PENHOET	10.00	X						0.	0.	0.
VP OPERATIONS (6) MICHELLE TAYLOR	10.00	^	1		\vdash	╁┈			<u>.</u>	
(6) MICHELLE TAYLOR VP DEVELOPMENT	10.00	\mathbf{x}						0.	0.	0.
(7) MATT CANNARD	10.00	1	<u> </u>			\vdash				
VP COMMUNICATIONS		\mathbf{x}	1					0.	0.	0.
(8) BRIAN RECKLING	10.00									
COMMUNITY RELATIONS		x	L					0.	0.	0.
(9) JEFF HEMMEN	10.00				,					
MEMBER AT LARGE		X	_	<u> </u>			匚	0.	0.	0.
(10) TODD JOHNSON	10.00					1				
EXECUTIVE DIRECTOR		ļ	Ь.	X	ļ		<u> </u>	53,047.	0.	0.
(11) LEIGHTON O'BRIEN	40.00	┨						106 043	,	2 000
TECHNICAL DIRECTOR	F0 00	╁	 	<u> </u>	├	X	-	126,243.	0.	3,000.
(12) MALIA ARRANT	50.00	-				x		119,000.	0.	3,000.
DIRECTOR OF COACHING		╁	╁			┿	┢╌	119,000.	0.	3,000.
		┨								
	 	\vdash	 	 		\vdash	\vdash			
		1				ł				
		\top	1							
						<u>L'</u>				
] _								
			_	$oxed{igspace}$	<u> </u>	_				
		_								
		<u>L</u>		<u>L</u> .			上			<u> </u>

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per	Position (do not check more than or box, unless person is both officer and a director/truste					one h an	(D) Reportable compensation	(E) Reportable compensation		on amou		_
		week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated Employee	Ė	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS	ns com		other compensat from the organizatio and relate organizatio	
	,													

											-		·	
													· ,-	
-,-														
	Sub-total			1	L	<u> </u>	<u> </u>	>	298,290.		0.		6,0	
	Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A						>	298,290.		0.		6,0	00.
2	Total number of individuals (including but recompensation from the organization	not limited to th	ose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 of reportable	•			2
3	Did the organization list any former officer	director or tr	ıcto	0 14		mole	21/00	or	highest compensate'd e	imployee on			Yes	No
3	line 1a? If "Yes," complete Schedule J for s	such individual										3		X
4	For any individual listed on line 1a, is the si and related organizations greater than \$15	•							·	the organization		4		х
5	Did any person listed on line 1a receive or							relat	ted organization or indiv	idual for services		5		х
Sec	rendered to the organization? If "Yes," cometion B. Independent Contractors	ipiete Schedul	e J	ior s	ucn	pen	son					<u> </u>		
1	Complete this table for your five highest compensation. Report compensation for	•									oens	ation f	rom	
	(A)		eai	eriu	ing v	WILLI	OI W	714111	(B)			(0		
	Name and business	address	N	ON:	E				Description of s	services	C	ompe	nsatio	<u>n</u>
									<u> </u>					
														·
		·												
							-						-	
2	Total number of independent contractors	-	not I	ımıte	d to		_	stec	d above) who received r	nore than				
	\$100,000 of compensation from the organ	ization >					0					-	000	

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (C) Unrelated (B) Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b 52,768. c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 23,550 similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 76,318 Total. Add lines 1a-1f Business Code 3,354,739.3,354,739 711210 2 a PLAYER FEES Program Service Revenue 506,123. TOURNAMENTS AND CAMPS 711210 506,123. All other program service revenue 860,862. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 548. 548. other similar amounts) 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) (II) Other (i) Securities 7 a Gross amount from sales of 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 \$ _____ 52,768. of contributions reported on line 1c) See 17,790 Part IV, line 18 b Less direct expenses 3,066 3,066. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See 87,035 Part IV, line 19 41,138. b Less direct expenses ,897 45,897. c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances а b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 986,691.3,860,862 0. 49,511 Total revenue. See instructions

Form 990 (2018) PACIFIC NORTHWEST SOCCER CLUB Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(1) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a respon	see or note to any line in	thic Part IY		
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		•		
	and domestic governments. See Part IV, line 21	20,000.	20,000.		
2	Grants and other assistance to domestic				•
	individuals See Part IV, line 22	2,040.	2,040.		
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	304,290.	304,290.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 005 010	1 005 010		
7	Other salaries and wages	1,095,812.	1,095,812.		
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	02 025	02 02 17		
9	Other employee benefits	83,037.	83,037.	,	
10	Payroll taxes	120,721.	120,721.		
11_	Fees for services (non-employees).				
1	Management				
b	Legal	11,887.		11,887.	
C	Accounting	11,007.		11,007.	***
d	Lobbying Professional fundraising services. See Part IV, line 17				
e f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
y	column (A) amount, list line 11g expenses on Sch 0.)	192,143.	192,143.		
12	Advertising and promotion	11,073.	172/113.	11,073.	
13	Office expenses	24,513.		24,513.	
14	Information technology	9,965.	6,340.	3,625.	
15	Royalties			7.5-5-1	
16	Occupancy	498,687.	482,697.	15,990.	
17	Travel	42,729.	42,729.		
18	Payments of travel or entertainment expenses	· · · · · ·			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,394.	3,394.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,479.		2,479.	
23	Insurance	6,681.		6,681.	
24	Other expenses. Itemize expenses not covered	,	1		
	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.)			-	
а	TEAM EXPENSES	934,974.	934,974.		
b	LEAGUE AND TOURNAMENT F	213,902.	213,902.		
C	TOURNAMENTS AND CAMPS	90,207.	90,207.		
d	EQUIPMENT	52,133.	52,133.		
е	All other expenses	64,212.	34,725.	29,487.	<u> </u>
25	Total functional expenses. Add lines 1 through 24e	3,784,879.	3,679,144.	105,735.	0.
26	Joint costs. Complete this line only if the organization				
	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 (2018)

Form	990 (2018) PACIFIC NORTHWEST SOCCER CLUB	20-	<u>-86117</u>	80	Page 12
	t 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			<u>,691.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,	<u> 784</u>	<u>,879.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>,812.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,	<u>454</u>	<u>,523.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7	,		
8	Prior period adjustments -	8		48	<u>,717.</u>
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,	1	,		
	column (B))	10	1,	<u>705</u>	<u>,052.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Y	es No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u> </u>	2a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	a no t			
	separate basis, consolidated basis, or both.				'
	Separate basis Consolidated basis Both consolidated and separate basis				
þ	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 basis	,		
	consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit			
	review, or compilation of its financial statements and selection of an independent accountant?		<u> </u>	2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		I '		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au			
	Act and OMB Circular A-133?		<u> </u>	3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	00 (004.5)
			F	orm 9	90 (2018)

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public

Employer identification number Name of the organization PACIFIC NORTHWEST SOCCER CLUB 20-8611780 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) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(t). 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, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) 8 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 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 1. 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 II, 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 (III) Type of organization (v) Amount of monetary (vi) Amount of other (I) Name of supported your governing document? (described on lines 1 10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

_	edule A (Form 990 or 990 EZ) 2018 P	ACIFIC NO	RTHWEST S	OCCER CLU	JB VbV(1)(A)(iv) an	20-861	1780 Page 2
F	(Complete only if you checke						
	fails to qualify under the tests				on lailed to quality	under Part III II III	o organization
80	ction A. Public Support	, notou 501011, piou		··· <i>,</i>			
	- · · · · · · · · · · · · · · · · · · ·	(-) 2014	(L) 001E	(a) 0016	(4) 2017	(=) 2018	1) Total
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	Ai) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						X
_	, ,				 	 	
2	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf				-		
•	The value of services or facilities				+	/	
3	furnished by a governmental unit to		,			/	
	the organization without charge					/	
	Total. Add lines 1 through 3					/	
5	The portion of total contributions	·				// . 	
3	by each person (other than a				,	/ /	
	governmental unit or publicly			!	/		
	supported organization) included			1			
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)		•		/		
6	Public support. Subtract line 5 from line 4				 		
	ction B. Total Support			L	' / 	1	, l'e
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	<u></u>	12/2010	(4) = 5.74			
8	Gross income from interest,						
Ŭ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
`9	Net income from unrelated business						
·	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital		/				
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	, etc (see instructi	ons)			12	
13	First five years. If the Form 990 is fo		. /	d, fourth, or fifth	tax year as a section	on 501(c)(3)	
	organization, check this box and sto	p here		,			▶□
Se	ction C. Computation of Pub		rcentage				
14	Public support percentage for 2018 (line 6, column (f) d	yided by line 11, o	column (f))		14	%
15	Public support percentage from 201	7 Schedule A, Part	II, line 14			15	%
16	33 1/3% support test - 2018. If the	organization dig no	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, check this b	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization)	•		▶□
ı	33 1/3% support test - 2017. If the	organization did no	ot check a box on	line 13 or 16a, an	d line 15 is 33 1/39	6 or more, check	this box
	and stop here. The organization qua	lifies as a publicly	supported organiz	ation			ightharpoons
17:	10% -facts-and-circumstances tes	/			ne 13, 16a, or 16b,	and line 14 is 10%	6 or more,
	and if the organization meets the "fac	cts-and-circumstar	ices" test, check t	his box and stop	here. Explain in Pa	art VI how the orga	ınızatıon
	meets the "facts-and-circumstances"	/		· ·		J	ightharpoons
1	10% -facts-and-circumstances tes	/ -		· ·	•	17a, and line 15 is	10% or
	more, and if the organization meets/t	,					
	organization meets the "facts-and/cir				=		▶□
_18	Private foundation. If the organization		-				ns 🕨
	Schedule A (Form 990 or 990-EZ) 2018						
	/					•	•

Schedule A (Form 990 or 990-EZ) 2018 PACIFIC NORTHWEST SOCCER CLUB Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to

<u> </u>	qualify under the tests listed b	elow, please comp	olete Part II)				
	tion A. Public Support				4 11 2047	4 1 0040	(O Tatal
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not				04 004	00 550	100 000
	include any "unusual grants ")	58,809.	16,208.	8,322.	21,984.	23,550.	128,873.
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	2242509.	2416365.	3015326.	3056515.	3965687.	14696402.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities				1		
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	2301318.	2432573.	3023648.	3078499.	3989237.	14825275.
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year					20000.	0.
ç	Add lines 7a and 7b						0.
8	Public support. (Subtract line 7c from line 6)			1			14825275.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	2301318.	2432573.	3023648.	3078499.	3989237.	14825275.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	413.	356.	210.	351.	548.	1,878.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	413.	356.	210.	351.	548.	1,878.
11	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)						
13	Total support. (Add lines 9, 10c, 11, and 12)	2301731.	2432929.	3023858.	3078850.	3989785.	14827153.
	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	zation,
	check this box and stop here						▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2018 (line 8, column (f), c	divided by line 13,	column (f))		15	99.99 %
16	Public support percentage from 2017	Schedule A, Part	III, line 15			16	99.97 %
	ction D. Computation of Inve						
17	Investment income percentage for 20	18 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	.01 %
18	Investment income percentage from	•	•			18	.03 %
	33 1/3% support tests - 2018. If the			on line 14, and line	15 is more than 3	33 1/3%, and line	
	more than 33 1/3%, check this box a	-					▶ X
b	33 1/3% support tests - 2017. If the	•	•	•	• •		and
	line 18 is not more than 33 1/3%, che	-					
	Private foundation If the organization		•	•		•	

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	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?
- 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 (as 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)
- 8 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	,	
2		
3a	,	
		,
3b		
3c		
4a	•	
		,
4b		
4c	- :	
		,
		٠.
5a		-
5b	-	_
5c		
6		
		<u> </u>
		,
7	_	
8		
		i
9a		_
		-
9b	-	
9c		
10a		-
10b		Ļ

	dule A (Form 990 or 990-EZ) 2018 PACIFIC NORTHWEST SOCCE			<u> </u>
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust or	Nov 20, 1970 (explain in P	art VI.) See instructions. Al
	• other Type III non-functionally integrated supporting organizations must c	omplete \$	ections A through E	
Sect	ion 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		
	ion 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):		- 	• ,
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		· · · · · · · · · · · · · · · · · · ·
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other	1	* ***	1
_	factors (explain in detail in Part VI)		• •	, (
2	Acquisition indebtedness applicable to non-exempt-use assets	2	-	
3	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		
5	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	ion 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	Ť	
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	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	ally integra	ited Type III supporting orga	nization (see

instructions)

Par	t V Type III Non-Functionally Integrated 509			U-8611/8U Page 7
	on D - Distributions	(a)(3) Supporting Orga	anizations (continued)	Current Year
1	Amounts paid to supported organizations to accomplish exe	mnt nurnoses		Ourrent real
_ <u>-</u>	Amounts paid to supported organizations to accomplish oxe			
~	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns.	
4	Amounts paid to acquire exempt use assets	es or supported organization		
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 the	he organization is responsive		
•	(provide details in Part VI) See instructions.	no organization to respond		
9	Distributable amount for 2018 from Section C, line 6			· · · · · · · · · · · · · · · · · · ·
10	Line 8 amount divided by line 9 amount	· · · · · · · · · · · · · · · · · · ·		
•	on E - Distribution Allocations (see instructions)	(ı) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6	***		
2	Underdistributions, if any, for years prior to 2018 (reason-		•	
	able cause required explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014	1		<u> </u>
С	From 2015	!		
d	From 2016			
е	From 2017	;		
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i_	Carryover from 2013 not applied (see instructions)			
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from Section D,	1	,	
	line 7. \$, , , , , ,		
a	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2018 distributable amount			
<u> </u>	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if	,		
	any. Subtract lines 3g and 4a from line 2 For result greater	}		
	than zero, explain in Part VI. See instructions	1		
6	Remaining underdistributions for 2018 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7	1		
a	Excess from 2014			
b	Excess from 2015	;		~•
c	Excess from 2016			
d	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2018

e Excess from 2018

Part V. Supplemental Information. Provide the explanations required by Part II, line 10; Part III, Sector III, Iline 11; Part IV, Sector III, Iline 12; Part IV, Sector III, S	Schedule A	(Form 990 or 990-EZ) 2	018 PACIFIC	NORTHWEST	SOCCER	CLUB	20-8611780 Page 8
		Supplemental Int Part IV, Section A, line line 1; Part IV, Section Section D, lines 5, 6, a	formation. Proves 1, 2, 3b, 3c, 4b, D. lines 2 and 3. F	vide the explanations 4c, 5a, 6, 9a, 9b, 9c, Part IV. Section E. line	required by Pai 11a, 11b, and 1 is 1c, 2a, 2b, 3a	rt II, line 10; Part II, line 17a o 11c, Part IV, Section B, lines a, and 3b, Part V, line 1, Part	r 17b, Part III, line 12, 1 and 2, Part IV, Section C, V. Section B, line 1e, Part V,
							
		· · · · · · · · · · · · · · · · · · ·					
	-,					· · · · · · · · · · · · · · · · · · ·	,
							
					-		
			. ,				
							<u> </u>
					· · · · · · · · · · · · · · · · · · ·		
							
					,		
· · · · · · · · · · · · · · · · · · ·			,				
`	-						
	 						
		 -			· 		
				`			
							
				_			
			<u>.</u>		<u>,</u>	 	
			·				,,,,,,

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Employer identification number

Inspection

PACIFIC NORTHWEST SOCCER CLUB 20-8611780

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
,	organization answered "Yes" on Form 990, Part IV, Iir	ne 6	
		(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	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pai	t II Conservation Easéments. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space	Pro-	
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution เค่ the form	of-a conservation easement on the last
	day of the tax year	IRS - OSC - 13	Held at the End of the Tax Year
а	Total number of conservation easements	MOV	2a
b	Total acreage restricted by conservation easements	NOV 1 2 2019	2b
C	Number of conservation easements on a certified historic sta		2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struct	ture
	listed in the National Register	•	
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cor	servation easements during the year
	———		
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conserve	ation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) abo	ive satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		└ Yes └ No
9	In Part XIII, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	s the organization's accounting for
Da	conservation easements. † III Organizations Maintaining Collections of	of Art Historical Treasures or (Other Similar Assets
Га	Complete if the organization answered "Yes" on Form	•	other Sittilial Assets.
			mont and halance sheet works of art
12	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex		ance or public service, provide, in Part XIII,
	the text of the footnote to its financial statements that described and the statements that described and th		
þ	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of po	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 tre		al 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		> \$
b	Assets included in Form 990, Part X		▶ \$

		NORTHWEST				OH-			11/80	
Par		,								
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following tha	t are a s	ignificant	use of its	collection	tems
	(check all that apply)									
а	Public exhibition	d			hange progra	ams				
b	Scholarly research	е	٠ لـــا (Other						
С	Preservation for future generations									
4	Provide a description of the organization's co							ose in Par	XIII.	
5	During the year, did the organization solicit o					er sımılaı	r assets	_	٦.,	<u></u>
-	to be sold to raise funds rather than to be ma								Yes	<u></u> No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Par	-	ete if the	organizatio	on answered	"Yes" on	Form 99		line 9, or	
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for o	contribution	ns or other as	sets not	ıncluded	' _	7	
	on Form 990, Part X?							<u> </u>	J Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able.				, -		
									Amount	
C	Beginning balance						1c			
d	Additions during the year						<u>1d</u>	ļ		
е	Distributions during the year						<u>1e</u>	ļ		
f	Ending balance						1f	<u> </u>		
	Did the organization include an amount on F							L	Yes	⊢ No
	If "Yes," explain the arrangement in Part XIII									
Par	t V Endowment Funds. Complete								/) Carrer	
		(a) Current year	(b) P	rior year	(c) Two year	rs dack	(d) Inree	years back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses			· · · · ·	 					
	Grants or scholarships				 					
e	Other expenditures for facilities									
	and programs				<u> </u>					
f	Administrative expenses					_				
g	End of year balance	<u> </u>								
2	Provide the estimated percentage of the cur	rent year end baland		g, column (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			الملمما حسساف						
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	it are rieio a	and administe	erea ioi i	ne organ	iization	L.	es No
	by								3a(i)	65 110
	(i) unrelated organizations (ii) related organizations								3a(ii)	
h	If "Yes" on line 3a(ii), are the related organizations	ations listed as requi	red on S	chedule Ri	,				3b	
4	Describe in Part XIII the intended uses of the	•			•				<u> </u>	. <u>'</u>
	t VI Land, Buildings, and Equipm		OWINGING	idilds						
	Complete if the organization answere		0. Part IV	/. line 11a	See Form 990	D. Part X	. line 10.			
	Description of property	(a) Cost or o	other	(b) Cos	t or other (other)	(c) A	ccumula	I	(d) Book	value
	Lond	2200 (1110311		20313	(311.01)					
	Land	<u> </u>				-				· · · · ·
	Buildings					-				
	Leasehold improvements							.		
	Equipment				17,356.	-	2 /	179.	1 /	,877.
	Other (d) and the state of the		· V ~ -1:			L	4,4	13.		, <u>877.</u>
<u>I ota</u>	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	t X, colun	nn (B), line	IUC)				<u> </u>	,011.

Schedule D (Form 990) 2018

PACIFIC NORTHWEST SOCCER CLUB

20-8611780 Page 3

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

chedule D (Form 990) 2018 PACIFIC NORTHWEST SOCCER		<u>20-8611780</u>	Page (
art XI Reconciliation of Revenue per Audited Financial State		ie per Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line	12a		
Total revenue, gains, and other support per audited financial statements		1	
Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1		
a Net unrealized gains (losses) on investments	_2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d		2e	
Subtract line 2e from line 1		3	
Amounts included on Form 990, Part VIII, line 12, but not on line 1.	4-		
a 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	
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) art XII Reconciliation of Expenses per Audited Financial States	tements With Exnen		
		ses per neturn.	
Complete if the organization answered "Yes" on Form 990, Part IV, line	128		
Total expenses and losses per audited financial statements		1	
Amounts included on line 1 but not on Form 990, Part IX, line 25	0=		
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII)	2d	 0	
e Add lines 2a through 2d		2e 3	
Subtract line 2e from line 1	,	-3	
Amounts included on Form 990, Part IX, line 25, but not on line 1	أما		
a 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	1	4c	
Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information.	······································		
es 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	additional information.		
* * * * * * * * * * * * * * * * * * * 			
	,		
			-

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Schedule G (Form 990 or 990-EZ) 2018

lame of the organization					- 1		ntification number
PACIFIC	NORTHWEST SOCCER	CLU	В			20-8611	780
	Complete if the organization answer			n Form 990, Part IV, li	ine 17	' Form 990-EZ	filers are not
1 Indicate whether the organization rais		ng activ	vities	Check all that apply.			
a Mail solicitations				overnment grants			
b Internet and email solicitations	f Solicita	tion of	gover	nment grants			
c Phone solicitations	g Special	fundra	using	events			
d In-person solicitations							
2 a Did the organization have a written of	r oral agreement with any individua	l (ınclud	ding o	fficers, directors, trus	tees,	or	
key employees listed in Form 990, P						Yes	
b If "Yes," list the 10 highest paid indiv	ıduals or entities (fundraisers) pursi	uant to	agree	ments under which t	he fu	ndraiser is to b	е
compensated at least \$5,000 by the	organization						
		/iii\	Did		(v) A	Amount paid	
(i) Name and address of individual	(ii) Activity	(iii) fundr have c	aiser	(IV) Gross receipts	to (o	r retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	(,	or con	trol of	from activity		undraiser ed in col (i)	organization
		Yes	No				·
,		163	140				
							, ,
	,						
		Ì					
							-
					-		
	<u> </u>	ļ					
		-					
		}	}				
<u> [otal</u>				<u> </u>			
3 List all states in which the organization	in is registered or licensed to solicit	contrib	oution	s or has been notified	i it is	exempt from re	egistration
or licensing							
					-		
							
							
			-		-		
							······································
						-	

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

20-8611780 Page 2

Schedule G (Form 990 or 990-EZ) 2018

Schedule G (Form 990 or 990-EZ) 2018 PACIFIC NORTHWEST SOCCER CLUB

832082 10-03-18

Sch	edule G (Form 990 or 990-EZ) 2018 PACIFIC NORTHWEST SOCCER CLUB \ 20-	-8611780	Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes	X No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	X No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility	13a	<u>.00 %</u>
b	An outside facility	13b 100	<u>.00 %</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.		
	Name ► CHARLES COLLINS		
	Address ► 7102 127TH PL SE - NEWCASTLE, WA 98056		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	X No
b	olf "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party ▶\$		
c	: If "Yes," enter name and address of the third party		
	Name		
	Address ▶	•	
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
			 -
	☐ Director/officer ☐ Employee ☐ Independent contractor		
	Mandatory distributions.		
а	a is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	77 N.
	retain the state gaming license?		LX_I NO
C	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$		
Pa	irt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
			
	· · · · · · · · · · · · · · · · · · ·		
	•		
			_
			
_			
8320	83 10-03-18 Schedule G (Fo	rm 990 or 990	-EZ) 2018

Schedule G	G (Form 990 or 990-EZ)	PACIFIC	NORTHWEST	SOCCER	CLUB	20-861178	30 Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Infor	mation (continu	ied)				
		,					······································
		,		· · · · · · · · · · · · · · · · · · ·	 ,		
	· · · · · · · · · · · · · · · · · · ·						
				1			
_				·			
							
							.,,
							4
							
						•	
			·				
			-				
						•	
		-					
				 			
						-	
							
	· · · · · · · · · · · · · · · · · · ·						•
				<u></u>			
				,			
					•		
							• • •
	· - ··					.=	
					,		

SCHEDULE ! (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

nation.
est infor
or the lat
rm990 fc
s.gov/Fo
www.ir
Go to

2018	Open to Public	Inspection	Employer identification number
<u> </u>	•		Employer io

OMB No 1545-0047

% 20-8611780 X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection CLUB SOCCER PACIFIC NORTHWEST General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Part I

recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.	\$5,000 Part II can	be duplicated if additi	onal space is need	Jed.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
STARFIRE SPORTS 14800 STARFIRE WAY TUKWILA, WA 98188	47-0887811	501(C)(3)	20,000.	0			SUPPORT STARFIRE SOCCER STEM PROGRAM - CHARACTER AND DEVELOPMENT OF YOUTH
		1		1			1
-							·
S Enter total number of section 501(a)(3) and novernment organizations listed in the line 1 table	nd government of	 	le line 1 table				

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2018)

PACIFIC NORTHWEST SOCCER CLUB Schedule I (Form 990) (2018)

Page 2

20-8611780

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Part III

(a) iype of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	,				
				`	
					i
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information PART I, LINE 2:	ured in Part I, line	2, Part III, column	(b), and any other ac	dditional information	
REMENTS]	ALL FORMS	AID (ALL FORMS ARE REQUIRED AT THE	RED AT THE	
TIME OF APPLICATION): COPY OF THE COMPETED IRS 1040 FORM (FRONT AND BACK)	COMPETED	IRS 1040	FORM (FRON	T AND BACK)	
FROM THE MOST RECENT TAX YEAR; PROOF OF CHILD'S QUALIFICATION FOR SCHOOL	OF OF CHI	ILD'S QUAL	IFICATION	FOR SCHOOL	
FREE OR REDUCED LUNCH OR GOVERNMENT	FOOD	AŚSISTANCE PROGRAM	PROGRAM IF	IF APPLICABLE;	
PLAYER OF PACNW U10-U18 PROGRAM (FINANCIAL	INANCIAL	AID IS	NOT AVAILABLE	E FOR JUNIOR	
PROGRAM PLAYERS); QUALIFY BASED ON	USDA HOU	JSEHOLD IN	USDA HOUSEHOLD INCOME GUIDELINES	LINES FOR THE	
CURRENT YEAR - LINK TO CHART					

)

Schedule I (Form 990) (2018)

Pactric Northwest Soccer Club Pactric Northwest Soccer Club	
BASED AWARDS ARE THROUGH IDENTIFICATION BY THE P	PACNW TECHNICAL DIRECTOR.
DADED AWARDS ARE INCOME IDENTIFICATION BI THE I	ACIW IDEINICAD DINDETON.
·	·
ı	
1	1
·	
•	
1	
	<u> </u>
	·
	•
<u> </u>	
•	•
	

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

► Go to www.irs.gov/Form990 for the latest information.

2018
Open to Public Inspection

Name of the organization

Employer identification number

20-8611780 PACIFIC NORTHWEST SOCCER CLUB FORM 990, PART VI, SECTION A, LINE 7A: THE VOTING MEMBERSHIP OF THE CLUB SHALL CONSIST OF THE FOLLOWING: AN ELECTED PARENT REPRESENTATIVE FROM EACH REGISTERED TEAM; THE OFFICERS WHO COMPRISE THE BOARD OF DIRECTORS OF THE CLUB; ADDITIONAL VOLUNTEERS AS DEFINED IN THE BYLAWS OR SERVING THROUGH APPOINTMENT BY THE EXECUTIVE BOARD OF THE CLUB AND SPECIFICALLY GRANTED VOTING MEMBERSHIP. FORM 990, PART VI, SECTION A, LINE 7B: VOTING MEMBERS AS DESCRIBED IN LINE 7A: ELECT MEMBERS FOR OPEN POSITIONS ON THE EXECUTIVE BOARD OF THE CLUB; VOTE ON THE AMENDMENTS TO THE ARTICLES OF INCORPORATION OR BYLAWS, IF RECOMMENDED BY THE BOARD OF DIRECTORS OR SET FORTH IN A WRITTEN REQUEST SIGNED BY AT LEAST TWENTY PERCENT (20%) OF THE MEMBERS AND DELIVERED TO THE PRESIDENT OR SECRETARY OF THE CLUB NO LATER THAN SEVEN (7) DAYS BEFORE THE ANNUAL MEETING; VOTE ON ANY OTHER BUSINESS THAT IS RECOMMENDED BY THE BOARD OF DIRECTORS OR SET FORTH IN A WRITTEN REOUEST SIGNED BY TWENTY PERCENT (20%) OF THE MEMBERS AND DELIVERED TO THE PRESIDENT OR SECRETARY OF THE CLUB NO LATER THAN SEVEN (7) DAYS BEFORE THE ANNUAL MEETING. FORM 990, PART VI, SECTION A, LINE 8B: THERE ARE NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. FORM 990, PART VI, SECTION B, LINE 11B:

THE PRESIDENT AND BOARD OF DIRECTORS REVIEW THE FORM 990 BEFORE FILING.