

Form 990

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

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable: C Name of organization UNITED STATES SOCCER FEDERATION FOUNDATION INC
D Employer identification number 36-3976313
E Telephone number (202) 872-6692
G Gross receipts \$ 39,633,006.
H(a) Is this a group return for affiliates?
H(b) Are all affiliates included?
H(c) Group exemption number

I Tax-exempt status: 501(c) (3)
J Website: WWW.USSOCCERFOUNDATION.ORG
K Type of organization: Corporation
L Year of formation: 1994
M State of legal domicile: DE

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission... TO ENHANCE, ASSIST, AND GROW THE SPORT OF SOCCER IN U.S.
2 Check this box if the organization discontinued its operations...
3 Number of voting members... 3
4 Number of independent voting members... 4
5 Total number of employees... 5
6 Total number of volunteers... 6
7a Total gross unrelated business revenue... 0.
7b Net unrelated business taxable income... 0.
8 Contributions and grants... 1,488,309.
9 Program service revenue... 65,000.
10 Investment income... 5,813,465.
11 Other revenue... 81,113.
12 Total revenue... 7,447,887.
13 Grants and similar amounts paid... 2,496,165.
14 Benefits paid to or for members...
15 Salaries, other compensation... 1,226,011.
16a Professional fundraising fees...
16b Total fundraising expenses... 546,326.
17 Other expenses... 3,239,840.
18 Total expenses... 6,962,016.
19 Revenue less expenses... 485,871.
20 Total assets... 74,095,316.
21 Total liabilities... 8,305,285.
22 Net assets or fund balances... 65,790,031.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.
Signature of officer: EDWARD FOSTER-SIMEON, PRESIDENT
Date: 5/14/10

Paid Preparer's Use Only
Preparer's signature: RSM MCGLADREY, INC.
Date: 5/14/10
Check if self-employed
Preparer's identifying number
Firm's name (or yours if self-employed), address, and ZIP + 4: 8000 TOWERS CRESCENT DR. STE 500 VIENNA, VA 22182-6205
EIN
Phone no.: 703-336-6400

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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FOUNDATION INC

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**Part III** Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

TO ENHANCE, ASSIST, AND GROW THE SPORT OF SOCCER IN U.S.

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.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**SEE SCHEDULE O FOR CONTINUATION(S)**

4a (Code: ) (Expenses \$ 983,331. including grants of \$ ) (Revenue \$ )

SOCCER PROGRAMS: MLS AWARENESS CAMPAIGN: GIVES THE FOUNDATION RIGHTS TO USE ITS NAME ON BOARDS IN MLS STADIUMS DURING ALL GAMES, ON TEAM UNIFORMS, TICKETS TO MLS EVENTS, ACCESS TO MLS PLAYER APPEARANCES AND MLS MAILINGS IN ORDER TO ENCOURAGE PARTICIPATION IN FOUNDATION PROGRAMS SUCH AS THE PASSBACK PROGRAM WHICH COLLECTS NEW AND GENTLY USED SOCCER EQUIPMENT FOR REDISTRIBUTION.

4b (Code: ) (Expenses \$ 2,790,431. including grants of \$ 1,988,665. ) (Revenue \$ )

THE FOUNDATION VIEWS SOCCER AS A POWERFUL VEHICLE FOR YOUTH DEVELOPMENT AND SOCIAL CHANGE AND FOCUS OUR GRANTS ON PROGRAMS AND PROJECTS THAT IMPROVE THE HEALTH AND WELL-BEING OF CHILDREN IN ECONOMICALLY DISADVANTAGED COMMUNITIES. GRANTS WERE AWARDED TO 41 SOCCER-RELATED ORGANIZATIONS FOR A VARIETY OF PURPOSES INCLUDING:  
- FIELD BUILDING: ENGAGING COMMUNITY-BASED ORGANIZATIONS AND LOCAL NON-PROFITS, THE FOUNDATION PROVIDED 20 GRANTS TO DEVELOP AND EQUIP QUALITY SOCCER FIELDS THAT PROVIDE CHILDREN WITH SAFE PLACES TO PLAY AND TO LEAD HEALTHY ACTIVE LIVES.  
- PROGRAM BUILDING: 21 GRANTS WERE ALSO PROVIDED TO SUPPORT THE DEVELOPMENT AND EXPANSION OF SOCCER PROGRAMS WITH STRONG YOUTH DEVELOPMENT COMPONENTS. AREAS OF EMPHASIS INCLUDE PROGRAMS THAT:

4c (Code: ) (Expenses \$ 334,662. including grants of \$ ) (Revenue \$ )

SOCCER PROGRAMS: PUBLIC ADVOCACY - TO ENCOURAGE GRASSROOTS SUPPORT FOR THE USE OF SOCCER AS A VEHICLE FOR YOUTH DEVELOPMENT AND SOCIAL CHANGE, WITH A SPECIAL EMPHASIS ON SOCCER AS A POWERFUL TOOL IN THE NATIONAL FIGHT AGAINST CHILDHOOD OBESITY.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 173,749. including grants of \$ 1,600. ) (Revenue \$ )

4e Total program service expenses ▶ \$ 4,282,173. (Must equal Part IX, Line 25, column (B).)

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**Part IV Checklist of Required Schedules**

|  | Yes        | No       |
|--|------------|----------|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?<br><i>If "Yes," complete Schedule A</i> .....  | <b>X</b>   |          |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors? .....   | <b>X</b>   |          |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....  |            | <b>X</b> |
| 4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> ...  |            | <b>X</b> |
| 5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i> .....  | <b>N/A</b> |          |
| 6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....   |            | <b>X</b> |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....  |            | <b>X</b> |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....   |            | <b>X</b> |
| 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....                             |            | <b>X</b> |
| 10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....  |            | <b>X</b> |
| 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?<br><i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> .....  | <b>X</b>   |          |
| 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> .....  | <b>X</b>   |          |
| 13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....   |            | <b>X</b> |
| 14a Did the organization maintain an office, employees, or agents outside of the U.S.? .....   |            | <b>X</b> |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i> .....  |            | <b>X</b> |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> .....  |            | <b>X</b> |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> .....  |            | <b>X</b> |
| 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i> .....   |            | <b>X</b> |
| 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....   |            | <b>X</b> |
| 19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....  |            | <b>X</b> |
| 20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> .....  |            | <b>X</b> |
| 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....  | <b>X</b>   |          |
| 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....   |            | <b>X</b> |
| 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> .....  | <b>X</b>   |          |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i> ..... |            | <b>X</b> |
| b Did the organization invest any proceeds of tax-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 to defease any tax-exempt bonds? .....   |            |          |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....  |            |          |
| 25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....  |            | <b>X</b> |
| b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i> .....  |            | <b>X</b> |
| 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....   |            | <b>X</b> |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> .....   |            | <b>X</b> |

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**UNITED STATES SOCCER FEDERATION  
FOUNDATION INC**

**Part IV Checklist of Required Schedules** (continued)

|    |  | Yes      | No       |
|----|--|----------|----------|
| 28 | During the tax year, did any person who is a current or former officer, director, trustee, or key employee:  |          |          |
| a  | Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> ..... |          | <b>X</b> |
| b  | Have a family member who had a direct or indirect business relationship with the organization?<br><i>If "Yes," complete Schedule L, Part IV</i> .....  |          | <b>X</b> |
| c  | Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .....   |          | <b>X</b> |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....  |          | <b>X</b> |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....  |          | <b>X</b> |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations?<br><i>If "Yes," complete Schedule N, Part I</i> .....   |          | <b>X</b> |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....  |          | <b>X</b> |
| 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? <i>If "Yes," complete Schedule R, Part I</i> .....  |          | <b>X</b> |
| 34 | Was the organization related to any tax-exempt or taxable entity?<br><i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....  | <b>X</b> |          |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)?<br><i>If "Yes," complete Schedule R, Part V, line 2</i> .....  |          | <b>X</b> |
| 36 | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization?<br><i>If "Yes," complete Schedule R, Part V, line 2</i> .....  |          | <b>X</b> |
| 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? <i>If "Yes," complete Schedule R, Part VI</i> .....   |          | <b>X</b> |

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**Part V Statements Regarding Other IRS Filings and Tax Compliance**

|     |  | Yes | No |
|-----|--|-----|----|
| 1a  | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable   |     |    |
|     | 1a   | 14  |    |
| b   | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  |     |    |
|     | 1b   | 0   |    |
| c   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?   | X   |    |
|     | 1c   |     |    |
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  |     |    |
|     | 2a   | 16  |    |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)  | X   |    |
|     | 2b   |     |    |
| 3a  | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?   |     | X  |
|     | 3a   |     |    |
| b   | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O   |     |    |
|     | 3b   |     |    |
| 4a  | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?   |     | X  |
|     | 4a   |     |    |
| b   | If "Yes," enter the name of the foreign country:<br>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  |     |    |
|     | 4b   |     |    |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  |     | X  |
|     | 5a   |     |    |
| b   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   |     | X  |
|     | 5b   |     |    |
| c   | If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?   |     |    |
|     | 5c   |     |    |
| 6a  | Did the organization solicit any contributions that were not tax deductible?   |     | X  |
|     | 6a   |     |    |
| b   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  |     |    |
|     | 6b   |     |    |
| 7   | <b>Organizations that may receive deductible contributions under section 170(c).</b>   |     |    |
| a   | Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  |     | X  |
|     | 7a   |     |    |
| b   | If "Yes," did the organization notify the donor of the value of the goods or services provided?  |     |    |
|     | 7b   |     |    |
| c   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   |     | X  |
|     | 7c   |     |    |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year  |     |    |
|     | 7d   |     |    |
| e   | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  |     | X  |
|     | 7e   |     |    |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   |     | X  |
|     | 7f   |     |    |
| g   | For all contributions of qualified intellectual property, did the organization file Form 8899 as required?   |     |    |
|     | 7g   |     |    |
| h   | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  |     |    |
|     | 7h   |     |    |
| 8   | <b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A |     |    |
|     | 8  |     |    |
| 9   | <b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>   |     |    |
| a   | Did the organization make any taxable distributions under section 4966? N/A  |     |    |
|     | 9a   |     |    |
| b   | Did the organization make a distribution to a donor, donor advisor, or related person? N/A   |     |    |
|     | 9b   |     |    |
| 10  | <b>Section 501(c)(7) organizations.</b> Enter: N/A   |     |    |
| a   | Initiation fees and capital contributions included on Part VIII, line 12   |     |    |
|     | 10a  |     |    |
| b   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  |     |    |
|     | 10b  |     |    |
| 11  | <b>Section 501(c)(12) organizations.</b> Enter: N/A  |     |    |
| a   | Gross income from members or shareholders  |     |    |
|     | 11a  |     |    |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)   |     |    |
|     | 11b  |     |    |
| 12a | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?  |     |    |
|     | 12a  |     |    |
| b   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A  |     |    |
|     | 12b  |     |    |

Form 990 (2008)

**UNITED STATES SOCCER FEDERATION  
FOUNDATION INC**

**Part VI Governance, Management, and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

|    |  | Yes | No |
|----|--|-----|----|
| 1a | Enter the number of voting members of the governing body   |     |    |
| 1b | Enter the number of voting members that are independent  |     |    |
| 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?  |     | 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?  |     | X  |
| 4  | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?  | X   |    |
| 5  | Did the organization become aware during the year of a material diversion of the organization's assets?  |     | X  |
| 6  | Does the organization have members or stockholders?  | X   |    |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  | X   |    |
| 7b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons?  |     | X  |
| 8  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  |     |    |
| 8a | a The governing body?  | X   |    |
| 8b | b Each committee with authority to act on behalf of the governing body?  | X   |    |
| 9a | Does the organization have local chapters, branches, or affiliates?  |     | X  |
| 9b | b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? |     |    |
| 10 | Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990        | X   |    |
| 11 | Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O       |     | X  |

**Section B. Policies**

|     |  | Yes | No |
|-----|--|-----|----|
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13   | X   |    |
| 12b | b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | X   |    |
| 12c | c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done   | X   |    |
| 13  | Does the organization have a written whistleblower policy?   | X   |    |
| 14  | Does the organization have a written document retention and destruction policy?  | X   |    |
| 15  | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:   |     |    |
| 15a | a The organization's CEO, Executive Director, or top management official?  | X   |    |
| 15b | b Other officers or key employees of the organization?<br>Describe the process in Schedule O. (see instructions)   | X   |    |
| 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?  |     | X  |
| 16b | b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? |     |    |

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **AL, AK, AZ, AR, CA, CT, FL, GA, IL, KS, KY, LA**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **AMY C. HORNER - (202) 872-6650**  
**1211 CONNECTICUT AVE, NW STE 500, WASHINGTON, DC 20036**

**SEE SCHEDULE O FOR FULL LIST OF STATES**

**UNITED STATES SOCCER FEDERATION  
FOUNDATION INC**

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

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's current officers, directors, trustees (whether Individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

| (A)<br>Name and Title                        | (B)<br>Average hours per week | (C)<br>Position (check all that apply) |                       |         |              |                              |          | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|-------------------------------|--|-----------------------|---------|--------------|------------------------------|----------|--|---|---|
|  |                               | Individual trustee or director         | Institutional trustee | Officer | Key employee | Highest compensated employee | Former   |  |   |   |
| GIANFRANCO BORRONI<br>BOARD MEMBER           | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| CARLOS CORDEIRO<br>CARLOS CORDEIRO           | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| DON GARBER<br>BOARD MEMBER                   | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| SUNIL GULATI<br>BOARD MEMBER                 | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| BRAD HAYS<br>CHAIRMAN EMERITUS               | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| BRIAN KLEIN<br>BOARD MEMBER                  | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| CHARLES MARSHALL<br>SECRETARY/TREASURER      | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| DAVE MESSERSMITH<br>BOARD MEMBER             | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| PHILIP MURPHY<br>BOARD MEMBER                | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| KEVIN PAYNE<br>VICE CHAIRMAN                 | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| ALAN ROTHENBERG<br>FOUNDER AND CHAIRMAN      | 5.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| JUERGEN SOMMER<br>BOARD MEMBER               | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| CHARLES STIMSON<br>BOARD MEMBER              | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| DAVID SUTPHEN<br>BOARD MEMBER                | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| JAMES WALSH<br>BOARD MEMBER                  | 1.00                          | X                                      |                       |         |              |                              | 0.       | 0.   | 0.  |   |
| EDWARD FOSTER-SIMEON<br>PRESIDENT/EX-OFFICIO | 50.00                         | X                                      |                       | X       |              |                              | 151,557. | 0.   | 26,637.   |   |
| JOHN KOSKINEN<br>FORMER PRESIDENT            | 50.00                         |  |                       | X       |              |                              | 106,667. | 0.   | 0.  |   |



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**Part VIII Statement of Revenue**

|  |   |   | (A)<br>Total revenue      | (B)<br>Related or<br>exempt function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections 512,<br>513, or 514 |               |
|--|---|---|---------------------------|---|---|--|---------------|
| <b>Contributions, gifts, grants<br/>and other similar amounts</b>                      | 1 a Federated campaigns .....   | 1a  |                           |   |   |  |               |
|  | b Membership dues .....   | 1b  |                           |   |   |  |               |
|  | c Fundraising events .....  | 1c  |                           |   |   |  |               |
|  | d Related organizations .....   | 1d  |                           |   |   |  |               |
|  | e Government grants (contributions)   | 1e  |                           |   |   |  |               |
|  | f All other contributions, gifts, grants, and<br>similar amounts not included above .....   | 1f  | 1,710,123.                |   |   |  |               |
|  | g Noncash contributions included in lines 1a-1f: \$   |   |                           |   |   |  |               |
|  | <b>h Total. Add lines 1a-1f</b> .....   |   | <b>1710123.</b>           |   |   |  |               |
| <b>Program Service<br/>Revenue</b>   | Business Code   |   |                           |   |   |  |               |
|  | 2 a   |   |                           |   |   |  |               |
|  | b   |   |                           |   |   |  |               |
|  | c   |   |                           |   |   |  |               |
|  | d   |   |                           |   |   |  |               |
|  | e   |   |                           |   |   |  |               |
|  | <b>f All other program service revenue</b> .....  |   |                           |   |   |  |               |
| <b>g Total. Add lines 2a-2f</b> .....  |   |   |                           |   |   |  |               |
| <b>Other Revenue</b>   | 3 Investment income (including dividends, interest, and<br>other similar amounts) .....   |   | 939,621.                  |   |   | 939,621.   |               |
|  | 4 Income from investment of tax-exempt bond proceeds  |   |                           |   |   |  |               |
|  | 5 Royalties .....   |   |                           |   |   |  |               |
|  | 6 a Gross Rents .....   | (i) Real  | (ii) Personal             |   |   |  |               |
|  |   | b Less: rental expenses .....                           |                           |   |   |  |               |
|  |   | c Rental income or (loss) .....                         |                           |   |   |  |               |
|  |   | <b>d Net rental income or (loss)</b> .....              |                           |   |   |  |               |
|  | 7 a Gross amount from sales of<br>assets other than inventory .....   | (i) Securities  | (ii) Other                |   |   |  |               |
|  |   | 36,910,237.   |                           |   |   |  |               |
|  |   | b Less: cost or other basis<br>and sales expenses ..... |                           |   |   |  |               |
|  |   | 48,390,313.   |                           |   |   |  |               |
|  | c Gain or (loss) .....  |   |                           |   |   |  |               |
|  | <b>d Net gain or (loss)</b> .....   |   |                           | <11,480,076.>                                   |   |  | <11,480,076.> |
|  | 8 a Gross income from fundraising events (not<br>including \$ _____ of<br>contributions reported on line 1c). See<br>Part IV, line 18 ..... | a   |                           |   |   |  |               |
|  | b Less: direct expenses .....   | b   |                           |   |   |  |               |
| <b>c Net income or (loss) from fundraising events</b> .....                            |   |   |                           |   |   |  |               |
| 9 a Gross income from gaming activities. See<br>Part IV, line 19 .....                 | a   |   |                           |   |   |  |               |
| b Less: direct expenses .....  | b   |   |                           |   |   |  |               |
| <b>c Net income or (loss) from gaming activities</b> .....                             |   |   |                           |   |   |  |               |
| 10 a Gross sales of inventory, less returns<br>and allowances .....                    | a   |   |                           |   |   |  |               |
| b Less: cost of goods sold .....   | b   |   |                           |   |   |  |               |
| <b>c Net income or (loss) from sales of inventory</b> .....                            |   |   |                           |   |   |  |               |
| <b>Miscellaneous Revenue</b>   |   | <b>Business Code</b>                                    |                           |   |   |  |               |
| 11 a <b>OTHER INCOME</b> .....   |   | 900099  | 73,025.                   |   |   | 73,025.  |               |
| b  |   |   |                           |   |   |  |               |
| c  |   |   |                           |   |   |  |               |
| d All other revenue .....  |   |   |                           |   |   |  |               |
| <b>e Total. Add lines 11a-11d</b> .....  |   |   | <b>73,025.</b>            |   |   |  |               |
| <b>12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e</b> ..... |   |   | <b>&lt;8,757,307.&gt;</b> | <b>0.</b>                                       | <b>0.</b>                               | <b>&lt;10,467,430.&gt;</b>   |               |

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**Part IX Statement of Functional Expenses**

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

**All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....   | 1,990,265.            | 1,990,265.                      |  |                             |
| 2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....   |                       |                                 |  |                             |
| 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....  |                       |                                 |  |                             |
| 4 Benefits paid to or for members .....   |                       |                                 |  |                             |
| 5 Compensation of current officers, directors, trustees, and key employees .....  | 611,115.              | 256,726.                        | 225,306.                               | 129,083.                    |
| 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 .....  | 478,581.              | 201,049.                        | 176,444.                               | 101,088.                    |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....   | 9,013.                | 3,786.                          | 3,323.                                 | 1,904.                      |
| 9 Other employee benefits .....   | 77,307.               | 32,477.                         | 28,501.                                | 16,329.                     |
| 10 Payroll taxes .....  | 70,513.               | 29,622.                         | 25,997.                                | 14,894.                     |
| 11 Fees for services (non-employees):   |                       |                                 |  |                             |
| a Management .....  |                       |                                 |  |                             |
| b Legal .....   | 24,681.               |                                 | 24,681.                                |                             |
| c Accounting .....  | 129,184.              |                                 | 129,184.                               |                             |
| d Lobbying .....  |                       |                                 |  |                             |
| e Professional fundraising services. See Part IV, line 17   |                       |                                 |  |                             |
| f Investment management fees .....  |                       |                                 |  |                             |
| g Other .....   | 225,182.              | 58,085.                         | 70,626.                                | 96,471.                     |
| 12 Advertising and promotion .....  | 237,410.              | 237,060.                        |  | 350.                        |
| 13 Office expenses .....  | 106,516.              | 39,605.                         | 53,321.                                | 13,590.                     |
| 14 Information technology .....   | 41,776.               |                                 | 41,776.                                |                             |
| 15 Royalties .....  |                       |                                 |  |                             |
| 16 Occupancy .....  | 251,911.              |                                 | 251,911.                               |                             |
| 17 Travel .....   | 227,248.              | 28,397.                         | 187,835.                               | 11,016.                     |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials   |                       |                                 |  |                             |
| 19 Conferences, conventions, and meetings .....   | 44,523.               | 17,077.                         | 26,147.                                | 1,299.                      |
| 20 Interest .....   | 56,682.               |                                 | 56,682.                                |                             |
| 21 Payments to affiliates .....   |                       |                                 |  |                             |
| 22 Depreciation, depletion, and amortization .....  | 14,950.               |                                 | 14,950.                                |                             |
| 23 Insurance .....  | 28,878.               |                                 | 28,878.                                |                             |
| 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)  |                       |                                 |  |                             |
| a <b>MLS AWARENESS EXPENSE</b> .....  | 983,331.              | 983,331.                        |  |                             |
| b <b>INVESTMENT EXPENSE</b> .....   | 286,819.              |                                 | 286,819.                               |                             |
| c <b>FOREIGN TAXES</b> .....  | 21,676.               |                                 | 21,676.                                |                             |
| d <b>ALLOCATION OVERHEAD</b> .....  | 0.                    | 393,055.                        | <537,278.>                             | 144,223.                    |
| e <b>DONATED FACILITY/SERVIC</b> .....  | <432,177.>            |                                 | <432,177.>                             |                             |
| f All other expenses .....  | 71,124.               | 11,638.                         | 43,407.                                | 16,079.                     |
| 25 Total functional expenses. Add lines 1 through 24f   | 5,556,508.            | 4,282,173.                      | 728,009.                               | 546,326.                    |
| 26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ... |                       |                                 |  |                             |

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**Part X Balance Sheet**

|   |   | (A)<br>Beginning of year |             | (B)<br>End of year |
|---|---|--------------------------|-------------|--------------------|
| <b>Assets</b>   | 1 Cash - non-interest-bearing .....   |                          | 1           |                    |
|   | 2 Savings and temporary cash investments .....  | 1,014,044.               | 2           | 2,874,477.         |
|   | 3 Pledges and grants receivable, net .....  |                          | 3           |                    |
|   | 4 Accounts receivable, net .....  | 40,497.                  | 4           | 1,419,326.         |
|   | 5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L .....                            |                          | 5           |                    |
|   | 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....      |                          | 6           |                    |
|   | 7 Notes and loans receivable, net .....   | 2,010,414.               | 7           | 903,273.           |
|   | 8 Inventories for sale or use .....   |                          | 8           |                    |
|   | 9 Prepaid expenses and deferred charges .....   | 48,070.                  | 9           | 60,522.            |
|   | 10a Land, buildings, and equipment: cost basis ...  | 10a 255,399.             |             |                    |
|   | b Less: accumulated depreciation. Complete Part VI of Schedule D .....  | 10b 157,848.             | 10c         | 97,551.            |
|   | 11 Investments - publicly traded securities .....   | 70,891,662.              | 11          | 49,265,995.        |
|   | 12 Investments - other securities. See Part IV, line 11 .....   |                          | 12          |                    |
|   | 13 Investments - program-related. See Part IV, line 11 .....  |                          | 13          |                    |
|   | 14 Intangible assets .....  |                          | 14          |                    |
|   | 15 Other assets. See Part IV, line 11 .....   | 19,266.                  | 15          | 19,266.            |
| 16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) ..... | 74,095,316.   | 16                       | 54,640,410. |                    |
| <b>Liabilities</b>  | 17 Accounts payable and accrued expenses .....  | 45,558.                  | 17          | 981,547.           |
|   | 18 Grants payable .....   | 7,850,472.               | 18          | 3,409,451.         |
|   | 19 Deferred revenue .....   | 15,035.                  | 19          | 42,260.            |
|   | 20 Tax-exempt bond liabilities .....  |                          | 20          |                    |
|   | 21 Escrow account liability. Complete Part IV of Schedule D .....   |                          | 21          |                    |
|   | 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L ..... |                          | 22          |                    |
|   | 23 Secured mortgages and notes payable to unrelated third parties .....   | 394,220.                 | 23          | 2,893,272.         |
|   | 24 Unsecured notes and loans payable .....  |                          | 24          |                    |
|   | 25 Other liabilities. Complete Part X of Schedule D .....   |                          | 25          |                    |
|   | 26 <b>Total liabilities.</b> Add lines 17 through 25 .....  | 8,305,285.               | 26          | 7,326,530.         |
| <b>Net Assets or Fund Balances</b>  | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.                                     |                          |             |                    |
|   | 27 Unrestricted net assets .....  | 64,541,803.              | 27          | 46,995,282.        |
|   | 28 Temporarily restricted net assets .....  | 1,248,228.               | 28          | 318,598.           |
|   | 29 Permanently restricted net assets .....  |                          | 29          |                    |
|   | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.  |                          |             |                    |
|   | 30 Capital stock or trust principal, or current funds .....   |                          | 30          |                    |
|   | 31 Paid-in or capital surplus, or land, building, or equipment fund .....   |                          | 31          |                    |
|   | 32 Retained earnings, endowment, accumulated income, or other funds .....   |                          | 32          |                    |
| 33 <b>Total net assets or fund balances</b> .....                         | 65,790,031.   | 33                       | 47,313,880. |                    |
| 34 <b>Total liabilities and net assets/fund balances</b> .....            | 74,095,316.   | 34                       | 54,640,410. |                    |

**Part XI Financial Statements and Reporting**

|    |   | Yes | No |
|----|---|-----|----|
| 1  | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other  |     |    |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? .....   |     | X  |
| b  | Were the organization's financial statements audited by an independent accountant? .....  | X   |    |
| c  | If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? ..... | X   |    |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....  |     | X  |
| b  | If "Yes," did the organization undergo the required audit or audits? .....  |     |    |



**UNITED STATES SOCCER FEDERATION**

**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.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in)   | (a) 2004   | (b) 2005   | (c) 2006   | (d) 2007   | (e) 2008   | (f) Total  |
|---|------------|------------|------------|------------|------------|------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  | 1,656,376. | 1,929,147. | 1,349,367. | 1,488,309. | 1,710,123. | 8,133,322. |
| 2 Tax revenues levied for the organization'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 - 3  | 1,656,376. | 1,929,147. | 1,349,367. | 1,488,309. | 1,710,123. | 8,133,322. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) |            |            |            |            |            | 1,229,970. |
| 6 Public support. Subtract line 5 from line 4.  |            |            |            |            |            | 6,903,352. |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in)  | (a) 2004   | (b) 2005   | (c) 2006   | (d) 2007   | (e) 2008   | (f) Total                |
|--|------------|------------|------------|------------|------------|--------------------------|
| 7 Amounts from line 4  | 1,656,376. | 1,929,147. | 1,349,367. | 1,488,309. | 1,710,123. | 8,133,322.               |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   | 2,170,207. | 3,139,571. | 2,605,155. | 2,064,036. | 939,621.   | 10,918,590.              |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on   |            |            |            |            |            |                          |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)   |            |            | 74,277.    | 81,113.    | 73,025.    | 228,415.                 |
| 11 Total support. Add lines 7 through 10   |            |            |            |            |            | 19,280,327.              |
| 12 Gross receipts from related activities, etc. (see instructions)   |            |            |            |            | 12         | 216,379.                 |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here |            |            |            |            |            | <input type="checkbox"/> |

**Section C. Computation of Public Support Percentage**

|   |    |                                     |
|---|----|-------------------------------------|
| 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))   | 14 | 35.81 %                             |
| 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f  | 15 | 27.53 %                             |
| 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  |    | <input checked="" type="checkbox"/> |
| b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization   |    | <input type="checkbox"/>            |
| 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization    |    | <input type="checkbox"/>            |
| b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization |    | <input type="checkbox"/>            |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions   |    | <input type="checkbox"/>            |

**Part III Support Schedule for Organizations Described in Section 509(a)(2)** (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in)  | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")   |          |          |          |          |          |           |
| 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 are not an unrelated trade or business under section 513   |          |          |          |          |          |           |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |          |          |          |          |          |           |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge  |          |          |          |          |          |           |
| 6 Total. Add lines 1 - 5   |          |          |          |          |          |           |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons  |          |          |          |          |          |           |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 |          |          |          |          |          |           |
| c Add lines 7a and 7b  |          |          |          |          |          |           |
| 8 Public support (Subtract line 7c from line 6.)   |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in)  | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 9 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 (less section 511 taxes) from businesses acquired after June 30, 1975                          |          |          |          |          |          |           |
| c Add lines 10a and 10b  |          |          |          |          |          |           |
| 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 IV.)                                 |          |          |          |          |          |           |
| 13 Total support (Add lines 9, 10c, 11, and 12.)   |          |          |          |          |          |           |

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**Section C. Computation of Public Support Percentage**

|   |    |   |
|---|----|---|
| 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g                    | 16 | % |

**Section D. Computation of Investment Income Percentage**

|  |    |   |
|--|----|---|
| 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h                      | 18 | % |

19a **33 1/3% support tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b **33 1/3% support tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions



Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization

UNITED STATES SOCCER FEDERATION FOUNDATION INC

Employer identification number

36-3976313

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)( 3 ) (enter number) organization

[ ] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[ ] 527 political organization

Form 990-PF

[ ] 501(c)(3) exempt private foundation

[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See Instructions.)

General Rule

[ ] For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

[X] For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ... \$

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization  
**UNITED STATES SOCCER FEDERATION  
 FOUNDATION INC**

Employer identification number

36-3976313

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4 | (c)<br>Aggregate contributions | (d)<br>Type of contribution  |
|------------|-----------------------------------|--------------------------------|--|
| <u>1</u>   | _____                             | \$ <u>36,500.</u>              | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| <u>2</u>   | _____                             | \$ <u>45,873.</u>              | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| <u>4</u>   | _____                             | \$ <u>60,000.</u>              | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| <u>3</u>   | _____                             | \$ <u>75,000.</u>              | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
|            | _____                             | \$ _____                       | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |
|            | _____                             | \$ _____                       | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |

**Schedule D**  
**(Form 990)**

**Supplemental Financial Statements**

OMB No. 1545-0047

**2008**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization **UNITED STATES SOCCER FEDERATION FOUNDATION INC** Employer identification number **36-3976313**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

|  | (a) Donor advised funds | (b) Funds and other accounts |
|--|-------------------------|------------------------------|
| 1 Total number at end of year .....  |                         |                              |
| 2 Aggregate contributions to (during year) .....   |                         |                              |
| 3 Aggregate grants from (during year) .....  |                         |                              |
| 4 Aggregate value at end of year .....   |                         |                              |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No                                |                         |                              |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No |                         |                              |

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- Purpose(s) of conservation easements held by the organization (check all that apply).
 

|   |  |
|---|--|
| <input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat                                      | <input type="checkbox"/> Preservation of certified historic structure        |
| <input type="checkbox"/> Preservation of open space   |  |
- Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
 

|  | Held at the End of the Year |
|--|-----------------------------|
| a Total number of conservation easements .....   | 2a                          |
| b Total acreage restricted by conservation easements .....                                 | 2b                          |
| c Number of conservation easements on a certified historic structure Included in (a) ..... | 2c                          |
| d Number of conservation easements included in (c) acquired after 8/17/06 .....            | 2d                          |
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_
- Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_
- Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?  Yes  No
- Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ \_\_\_\_\_
- Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ \_\_\_\_\_
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 

|  |            |
|--|------------|
| (i) Revenues included in Form 990, Part VIII, line 1 ..... | ▶ \$ _____ |
| (ii) Assets included in Form 990, Part X .....             | ▶ \$ _____ |
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
 

|  |            |
|--|------------|
| a Revenues included in Form 990, Part VIII, line 1 ..... | ▶ \$ _____ |
| b Assets included in Form 990, Part X .....              | ▶ \$ _____ |

**UNITED STATES SOCCER FEDERATION  
FOUNDATION INC**

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

- 3** Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other \_\_\_\_\_

- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Trust, Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIV and complete the following table:

|  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance             | <b>1c</b> |
| <b>d</b> Additions during the year     | <b>1d</b> |
| <b>e</b> Distributions during the year | <b>1e</b> |
| <b>f</b> Ending balance                | <b>1f</b> |

- 2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if organization answered "Yes" to Form 990, Part IV, line 10.

|   | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|------------------|----------------|--------------------|----------------------|---------------------|
| <b>1a</b> Beginning of year balance                     |                  |                |                    |                      |                     |
| <b>b</b> Contributions                                  |                  |                |                    |                      |                     |
| <b>c</b> Investment earnings or losses                  |                  |                |                    |                      |                     |
| <b>d</b> Grants or scholarships                         |                  |                |                    |                      |                     |
| <b>e</b> Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| <b>f</b> Administrative expenses                        |                  |                |                    |                      |                     |
| <b>g</b> End of year balance                            |                  |                |                    |                      |                     |

**2** Provide the estimated percentage of the year end balance held as:

- a** Board designated or quasi-endowment  \_\_\_\_\_ %
- b** Permanent endowment  \_\_\_\_\_ %
- c** Term endowment  \_\_\_\_\_ %

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

|  | Yes           | No |
|--|---------------|----|
| <b>(i)</b> unrelated organizations   | <b>3a(i)</b>  |    |
| <b>(ii)</b> related organizations  | <b>3a(ii)</b> |    |
| <b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | <b>3b</b>     |    |

**4** Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

| Description of investment  | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------|----------------|
| <b>1a</b> Land   |                                      |                                 |                  |                |
| <b>b</b> Buildings   |                                      |                                 |                  |                |
| <b>c</b> Leasehold improvements  |                                      | 82,702.                         | 34,383.          | 48,319.        |
| <b>d</b> Equipment   |                                      | 172,697.                        | 123,465.         | 49,232.        |
| <b>e</b> Other   |                                      |                                 |                  |                |
| <b>Total.</b> Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) |                                      |                                 |                  | 97,551.        |



**UNITED STATES SOCCER FEDERATION  
FOUNDATION INC**

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

|    |  |    |               |
|----|--|----|---------------|
| 1  | Total revenue (Form 990, Part VIII, column (A), line 12)                         | 1  | <8,757,307.>  |
| 2  | Total expenses (Form 990, Part IX, column (A), line 25)                          | 2  | 5,556,508.    |
| 3  | Excess or (deficit) for the year. Subtract line 2 from line 1                    | 3  | <14,313,815.> |
| 4  | Net unrealized gains (losses) on investments                                     | 4  | <5,169,088.>  |
| 5  | Donated services and use of facilities   | 5  |               |
| 6  | Investment expenses  | 6  |               |
| 7  | Prior period adjustments   | 7  |               |
| 8  | Other (Describe in Part XIV)   | 8  | 1,006,752.    |
| 9  | Total adjustments (net). Add lines 4-8   | 9  | <4,162,336.>  |
| 10 | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 | 10 | <18,476,151.> |

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

|   |   |    |              |
|---|---|----|--------------|
| 1 | Total revenue, gains, and other support per audited financial statements          | 1  | <12795961.>  |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12:               |    |              |
| a | Net unrealized gains on investments   | 2a | <5,169,088.> |
| b | Donated services and use of facilities  | 2b | 432,177.     |
| c | Recoveries of prior year grants   | 2c | 1,006,752.   |
| d | Other (Describe in Part XIV)  | 2d |              |
| e | Add lines 2a through 2d   | 2e | <3,730,159.> |
| 3 | Subtract line 2e from line 1  | 3  | <9,065,802.> |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1:              |    |              |
| a | Investment expenses not included on Form 990, Part VIII, line 7b                  | 4a | 286,819.     |
| b | Other (Describe in Part XIV)  | 4b | 21,676.      |
| c | Add lines 4a and 4b   | 4c | 308,495.     |
| 5 | Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.) | 5  | <8,757,307.> |

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

|   |  |    |            |
|---|--|----|------------|
| 1 | Total expenses and losses per audited financial statements                         | 1  | 5,680,190. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25:                  |    |            |
| a | Donated services and use of facilities   | 2a | 432,177.   |
| b | Prior year adjustments   | 2b |            |
| c | Losses reported on Form 990, Part IX, line 25                                      | 2c |            |
| d | Other (Describe in Part XIV)   | 2d |            |
| e | Add lines 2a through 2d  | 2e | 432,177.   |
| 3 | Subtract line 2e from line 1   | 3  | 5,248,013. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1:                 |    |            |
| a | Investment expenses not included on Form 990, Part VIII, line 7b                   | 4a | 286,819.   |
| b | Other (Describe in Part XIV)   | 4b | 21,676.    |
| c | Add lines 4a and 4b  | 4c | 308,495.   |
| 5 | Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.) | 5  | 5,556,508. |

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

**RESCINDED GRANTS: 1006752.**

**PART XII, LINE 4B - OTHER ADJUSTMENTS:**

**FOREIGN INCOME TAX: 21676.**

**PART XIII, LINE 4B - OTHER ADJUSTMENTS:**



**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the U.S.**

OMB No. 1545-0047  
2008

▶ Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.  
▶ Attach to Form 990.

Open to Public  
Inspection

Name of the organization **UNITED STATES SOCCER FEDERATION** Employer identification number **36-3976313**  
**FOUNDATION INC**

**Part I** General Information on Grants and Assistance

**1** 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 criteria used to award the grants or assistance?  Yes  No

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

| <b>Part II</b> Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed | <b>(a)</b> Name and address of organization or government                                | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
|  | ALLENTOWN YOUTH SOCCER CLUB<br>5764 NINA CIRCLE<br>COOPERSBURG, PA 18036-9418            | 42-1538352     |                                      | 6,000.                          | 0.                                       |  |   | PROGRAM SUPPORT.                          |
|  | AMERICA SCORES CHICAGO<br>222 S. MORGAN<br>CHICAGO, IL 60607-3072                        | 36-4388992     |                                      | 6,550.                          | 0.                                       |  |   | PROGRAM SUPPORT.                          |
|  | CAPITOL COMMUNITY SOCCER CLUB<br>713 MASSACHUSETTS AVE.<br>WASHINGTON, DC 20002-6007     | 52-2183841     |                                      | 6,880.                          | 0.                                       |  |   | PROGRAM SUPPORT.                          |
|  | JUST ONE NEIGHBORHOOD PROGRAM<br>P.O. BOX 9959<br>NEWARK, NJ 07104-095                   | 20-5538988     |                                      | 7,050.                          | 0.                                       |  |   | PROGRAM SUPPORT.                          |
|  | SAN FRANCISCO RECREATION AND PARKS<br>30 VAN NESS AVENUE<br>SAN FRANCISCO, CA 94102-6020 | 94-6000417     |                                      | 8,000.                          | 0.                                       |  |   | PROGRAM SUPPORT.                          |
|  | CHALLENGED ATHLETES DREAM COMPLEX,<br>INC. - 78 PENN AVENUE - VICTORIA,<br>TX 77904-4737 | 26-4037402     |                                      | 8,000.                          | 0.                                       |  |   | PROGRAM SUPPORT.                          |

**2** Enter total number of section 501(c)(3) and government organizations **21.**

**3** Enter total number of other organizations

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**UNITED STATES SOCCER FEDERATION**

**Part III** FOUNDATION INC

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

| (a) Type 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 non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
|                                 |                          |                          |                                   |   |  |
|                                 |                          |                          |                                   |   |  |
|                                 |                          |                          |                                   |   |  |
|                                 |                          |                          |                                   |   |  |
|                                 |                          |                          |                                   |   |  |

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

**SCHEDULE I, PART I, LINE 2: APPLICANTS COMPLETE AN APPLICATION WHICH IS REVIEWED INTERNALLY TO SEE IF IT MEETS THE FOUNDATION'S CRITERIA.**

**APPLICATIONS THAT MEET THE CRITERIA ARE IDENTIFIED AND SENT TO THE GRANTS COMMITTEE. THE GRANTS COMMITTEE REVIEWS THESE AND RECOMMENDS TO THE BOARD WHICH ONES TO APPROVE. ONCE THE GRANT HAS BEEN AWARDED, THE GRANTEE IS REQUIRED TO SUBMIT REGULAR REPORTING UPDATES TO THE FOUNDATION AND SITE VISITS ARE DONE BY FOUNDATION STAFF.**

**SCHEDULE I-1**  
**(Form 990)**  
Department of the Treasury  
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)  
▲ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047  
2008  
Open to Public  
Inspection

Name of the organization

**UNITED STATES SOCCER FEDERATION  
FOUNDATION INC**

Employer identification number  
**36-3976313**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government  | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CREW SOCCER FOUNDATION<br>ONE BLACK & GOLD BLVD.<br>COLUMBUS, OH 43211  | 71-0913027 |                                    | 8,000.                   | 0.                                |   |  | PROGRAM SUPPORT.                   |
| NEW CREATION FELLOWSHIP<br>3325 GENESEE STREET<br>CHEEKTOWAGA, NY 14225-5025  | 16-1159386 |                                    | 8,000.                   | 0.                                |   |  | PROGRAM SUPPORT.                   |
| THE SALVATION ARMY KROC CENTER<br>8 WOODLAND WAY<br>GREENVILLE, SC 29601-3821   | 58-0660607 |                                    | 8,000.                   | 0.                                |   |  | PROGRAM SUPPORT.                   |
| DISTRICT OF COLUMBIA DEPARTMENT OF<br>PARKS AND RECREATION - 3149 16TH<br>STREET, NW - WASHINGTON, DC<br>20010-3302             |            |                                    | 10,000.                  | 0.                                |   |  | PROGRAM SUPPORT.                   |
| HENLOPEN SOCCER CLUB INC<br>PO BOX 384<br>NASSAU DE 19969-0384  | 51-0374981 |                                    | 10,000.                  | 0.                                |   |  | PROGRAM SUPPORT.                   |
| SOUTHWEST YOUTH SERVICES<br>10705 CIELO VISTA DEL NORTE<br>CORRALES, NM 87048-8905  | 86-1106587 |                                    | 12,500.                  | 0.                                |   |  | PROGRAM SUPPORT.                   |
| ANDERSON MONARCHS GIRLS SOCCER<br>CLUB, PHILADELPHIA YOUTH<br>ORGANIZATION - 6232 RIDGE AVENUE -<br>PHILADELPHIA, PA 19128-2631 | 23-2593423 |                                    | 18,000.                  | 0.                                |   |  | PROGRAM SUPPORT.                   |
| NORTH OF THE RIVER RECREATION &<br>PARK DISTRICT - 405 GALAXY AVENUE<br>- BAKERSFIELD, CA 93308-1723                            |            |                                    | 20,000.                  | 0.                                |   |  | PROGRAM SUPPORT.                   |

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I-1 (Form 990) 2008

**SCHEDULE I-1**  
**(Form 990)**  
Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)**  
**▲ Attach to Form 990 to list additional information for**  
**Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047  
2008

**Open to Public**  
**Inspection**

Name of the organization

**UNITED STATES SOCCER FEDERATION  
FOUNDATION INC**

Employer identification number  
**36-3976313**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government  | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| TWIN CITY YOUTH SOCCER ASSOCIATION<br>P.O. BOX 362<br>CLEMMONS, NC 27012-0362             | 56-1310435 |                                    | 50,000.                  | 0.                                |   |  | PROGRAM SUPPORT.                   |
| CITY OF FRESNO, PARCS DEPARTMENT<br>2326 FRESNO STREET, ROOM 101<br>FRESNO, CA 93721-1824 |            |                                    | 55,000.                  | 0.                                |   |  | PROGRAM SUPPORT.                   |
| HOUSTON PARKS AND RECREATION<br>DEPARTMENT - 601 SAWYER - HOUSTON,<br>TX 77007-7523       |            |                                    | 60,000.                  | 0.                                |   |  | PROGRAM SUPPORT.                   |
| FC MILWAUKEE<br>5557 N 124TH ST<br>BUTLER, WI 53007-1000                                  | 39-1941374 |                                    | 200,000.                 | 0.                                |   |  | PROGRAM SUPPORT.                   |
| SEATTLE PARKS AND RECREATION<br>MAGNUSON PARK & BUSINESS RESOURCES<br>SEATTLE, WA 98115   |            |                                    | 200,000.                 | 0.                                |   |  | PROGRAM SUPPORT.                   |
| VANCOUVER-CLARK PARKS AND<br>RECREATION - 610 ESTHER STREET -<br>VANCOUVER, WA 98660-3022 |            |                                    | 200,000.                 | 0.                                |   |  | PROGRAM SUPPORT.                   |
|   |            |                                    |                          |                                   |   |  |                                    |
|   |            |                                    |                          |                                   |   |  |                                    |

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2008**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Name of the organization **UNITED STATES SOCCER FEDERATION FOUNDATION INC** Employer identification number **36-3976313**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- First-class or charter travel
- Travel for companions
- Tax indemnification and gross-up payments
- Discretionary spending account
- Housing allowance or residence for personal use
- Payments for business use of personal residence
- Health or social club dues or initiation fees
- Personal services (e.g., maid, chauffeur, chef)

**b** If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a** Receive a severance payment or change of control payment?
  - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
  - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
  - b** Any related organization?
- If "Yes," to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
  - b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

|    | Yes | No |
|----|-----|----|
| 1b | X   |    |
| 2  |     | X  |
| 4a |     | X  |
| 4b |     | X  |
| 4c |     | X  |
| 5a |     | X  |
| 5b |     | X  |
| 6a |     | X  |
| 6b |     | X  |
| 7  |     | X  |
| 8  |     | X  |

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

Schedule J (Form 990) 2008

**UNITED STATES SOCCER FEDERATION  
FOUNDATION INC**

Schedule J (Form 990) 2008

36-3976313

Page 2

**Part II** Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

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

| (A) Name             | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                          | (C) Deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|----------------------|--|-------------------------------------|--------------------------|---------------------------|-------------------------|---------------------------------|--|
|                      | (i) Base compensation                              | (ii) Bonus & incentive compensation | (iii) Other compensation |                           |                         |                                 |  |
| EDWARD FOSTER-SIMEON | (i)  | 151,557.                            | 0.                       | 6,900.                    | 26,065.                 | 184,522.                        | 0.   |
|                      | (ii)   | 0.                                  | 0.                       | 0.                        | 0.                      | 0.                              | 0.   |
| ROB KALER            | (i)  | 170,811.                            | 0.                       | 5,552.                    | 21,840.                 | 198,203.                        | 0.   |
|                      | (ii)   | 0.                                  | 0.                       | 0.                        | 0.                      | 0.                              | 0.   |
| (i)                  |  |                                     |                          |                           |                         |                                 |  |
| (ii)                 |  |                                     |                          |                           |                         |                                 |  |
| (i)                  |  |                                     |                          |                           |                         |                                 |  |
| (ii)                 |  |                                     |                          |                           |                         |                                 |  |
| (i)                  |  |                                     |                          |                           |                         |                                 |  |
| (ii)                 |  |                                     |                          |                           |                         |                                 |  |
| (i)                  |  |                                     |                          |                           |                         |                                 |  |
| (ii)                 |  |                                     |                          |                           |                         |                                 |  |
| (i)                  |  |                                     |                          |                           |                         |                                 |  |
| (ii)                 |  |                                     |                          |                           |                         |                                 |  |
| (i)                  |  |                                     |                          |                           |                         |                                 |  |
| (ii)                 |  |                                     |                          |                           |                         |                                 |  |
| (i)                  |  |                                     |                          |                           |                         |                                 |  |
| (ii)                 |  |                                     |                          |                           |                         |                                 |  |
| (i)                  |  |                                     |                          |                           |                         |                                 |  |
| (ii)                 |  |                                     |                          |                           |                         |                                 |  |



SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public  
Inspection

Name of the organization

UNITED STATES SOCCER FEDERATION  
FOUNDATION INC

Employer identification number

36-3976313

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS

-PROVIDE CHILDREN WITH GUIDANCE ON NUTRITION AND WAYS TO STAY  
ACTIVE AND HEALTHY TO HELP COMBAT RISING CHILDHOOD OBESITY RATES;

-ENGAGE CHILDREN IN ACADEMIC ACTIVITIES WITH THE GOAL OF INCREASING  
EDUCATIONAL ATTAINMENT;

-WORK TO GUIDE CHILDREN AWAY FROM NEGATIVE INFLUENCES SUCH AS GANGS  
AND VIOLENCE.

FINALLY, THE FOUNDATION'S PASSBACK PROGRAM COLLECTED OVER 171,000 PIECE  
OF NEW AND GENTLY USED SOCCER EQUIPMENT THAT WAS REDISTRIBUTED TO  
VARIOUS SOCCER PROGRAMS IN ECONOMICALLY DISADVANTAGED COMMUNITIES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

SOCCER PROGRAMS: PUBLIC AWARENESS - TO FOSTER PUBLIC INTEREST AND  
ENTHUSIASM IN THE SPORT OF SOCCER.

EXPENSES \$ 173749. INCLUDING GRANTS OF \$ 1600. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 4: SIGNIFICANT REDUCTION OF BOARD  
MEMBERS.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS ONE CLASS OF  
MEMBER.

FORM 990, PART VI, SECTION A, LINE 7A: THERE IS ONE VOTE PER MEMBER.

FORM 990, PART VI, SECTION A, LINE 10: THE INTERIM DIRECTOR OF FINANCE AND

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

Schedule O (Form 990) 2008

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public Inspection

|                          |   |                                |            |
|--------------------------|---|--------------------------------|------------|
| Name of the organization | UNITED STATES SOCCER FEDERATION<br>FOUNDATION INC | Employer identification number | 36-3976313 |
|--------------------------|---|--------------------------------|------------|

THE PRESIDENT/CEO OF USSFF WILL REVIEW THE 990 DRAFT. FOLLOWING THEIR REVIEW, THE 990 DRAFT WILL BE SENT TO THE AUDIT COMMITTEE FOR FINAL REVIEW PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION ASKS BOTH THE BOARD OF DIRECTORS - AS WELL AS STAFFS - TO REVIEW THE CONFLICT OF INTEREST POLICY AND COMPLETE THE ASSOCIATED CONFLICT OF INTEREST FORM ON AN ANNUAL BASIS.

FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION ENGAGES AN OUTSIDE FIRM TO CONDUCT SALARY SURVEYS FOR ALL OF THE POSITIONS. LAST YEAR THE ORGANIZATION USED HR SOLUTIONS. CHANGES TO THE CEO AND OTHER KEY EMPLOYEE'S ARE APPROVED BY THE BOD.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AL, AK, AZ, AR, CA, CT, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND  
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI

FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST.

FORM 990, PART XI, LINE 2C  
THE PROCESS HAS BEEN CONSISTENT WITH PRIOR YEARS.





**Part V Transactions With Related Organizations**

Note. Complete line 1 if any entity is listed in Parts II, III, or IV.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

|  | Yes | No |
|--|-----|----|
| a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity    |     | X  |
| b Gift, grant, or capital contribution to other organization(s)                                |     | X  |
| c Gift, grant, or capital contribution from other organization(s)                              |     | X  |
| d Loans or loan guarantees to or for other organization(s)                                     |     | X  |
| e Loans or loan guarantees by other organization(s)  |     | X  |
| f Sale of assets to other organization(s)  |     | X  |
| g Purchase of assets from other organization(s)  |     | X  |
| h Exchange of assets   |     | X  |
| i Lease of facilities, equipment, or other assets to other organization(s)                     |     | X  |
| j Lease of facilities, equipment, or other assets from other organization(s)                   |     | X  |
| k Performance of services or membership or fundraising solicitations for other organization(s) |     | X  |
| l Performance of services or membership or fundraising solicitations by other organization(s)  |     | X  |
| m Sharing of facilities, equipment, mailing lists, or other assets                             |     | X  |
| n Sharing of paid employees  |     | X  |
| o Reimbursement paid to other organization for expenses  |     | X  |
| p Reimbursement paid by other organization for expenses  |     | X  |
| q Other transfer of cash or property to other organization(s)                                  |     | X  |
| r Other transfer of cash or property from other organization(s)                                |     | X  |

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

| (1) | (A)<br>Name of other organization(s) | (B)<br>Transaction type (a-r) | (C)<br>Amount involved |
|-----|--------------------------------------|-------------------------------|------------------------|
| (1) |                                      |                               |                        |
| (2) |                                      |                               |                        |
| (3) |                                      |                               |                        |
| (4) |                                      |                               |                        |
| (5) |                                      |                               |                        |
| (6) |                                      |                               |                        |



# Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box  X
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

|  |   |   |
|--|---|---|
| Type or print  | Name of Exempt Organization<br><b>UNITED STATES SOCCER FEDERATION<br/>FOUNDATION INC</b>                                | Employer identification number<br><b>36-3976313</b> |
|  | Number, street, and room or suite no. If a P.O. box, see instructions.<br><b>1211 CONNECTICUT AVENUE, NW, NO. 500</b>   |   |
| File by the due date for filing your return. See instructions. | City, town or post office, state, and ZIP code. For a foreign address, see instructions.<br><b>WASHINGTON, DC 20036</b> |   |

Check type of return to be filed (file a separate application for each return):

- Form 990
- Form 990-BL
- Form 990-EZ
- Form 990-PF
- Form 990-T (corporation)
- Form 990-T (sec. 401(a) or 408(a) trust)
- Form 990-T (trust other than above)
- Form 1041-A
- Form 4720
- Form 5227
- Form 6069
- Form 8870

**WILLIAM SCOTT**

• The books are in the care of ▶ **1211 CONNECTICUT AVE, NW STE 500 - WASHINGTON, DC 20036**  
Telephone No. ▶ **(202) 872-6650** FAX No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2010**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

- ▶  calendar year \_\_\_\_\_ or
- ▶  tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**.

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

|    |  |    |    |     |
|----|--|----|----|-----|
| 3a | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.   | 3a | \$ |     |
| b  | If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.   | 3b | \$ |     |
| c  | Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | N/A |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box  **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

|   |   |   |
|---|---|---|
| Type or print<br><br>File by the extended due date for filing the return. See instructions. | Name of Exempt Organization<br><b>UNITED STATES SOCCER FEDERATION FOUNDATION INC</b>                                    | Employer Identification number<br><b>36-3976313</b> |
|   | Number, street, and room or suite no. If a P.O. box, see Instructions.<br><b>1211 CONNECTICUT AVENUE, NW, NO. 500</b>   | For IRS use only                                    |
|   | City, town or post office, state, and ZIP code. For a foreign address, see Instructions.<br><b>WASHINGTON, DC 20036</b> |   |

**Check type of return to be filed (File a separate application for each return):**

Form 990   
  Form 990-EZ   
  Form 990-T (sec. 401(a) or 408(a) trust)   
  Form 1041-A   
  Form 5227   
  Form 8870  
 Form 990-BL   
  Form 990-PF   
  Form 990-T (trust other than above)   
  Form 4720   
  Form 6069

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**WILLIAM SCOTT**

- The books are in the care of ► **1211 CONNECTICUT AVE, NW STE 500 - WASHINGTON, DC 20036**  
Telephone No. ► **(202) 872-6650** FAX No. ► \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.
- 4 I request an additional 3-month extension of time until **MAY 15, 2010**.
- 5 For calendar year \_\_\_\_\_, or other tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**.
- 6 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- 7 State in detail why you need the extension  
**ADDITIONAL TIME IS NEEDED TO PREPARE AN ACCURATE AND COMPLETE RETURN**

|    |   |    |               |
|----|---|----|---------------|
| 8a | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See Instructions.  | 8a | \$            |
| b  | If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. | 8b | \$            |
| c  | <b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.       | 8c | \$ <b>N/A</b> |

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ► *[Handwritten Signature]* Title ► *Accountant* Date ► *2/11/10*