

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)

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: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization		D Employer identification number	
		AMERICAN YOUTH SOCCER ORGANIZATION		95-6205398	
		Doing Business As			
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite		E Telephone number	
12501 SOUTH ISIS AVENUE		(310) 643-6455			
City or town, state or country, and ZIP + 4		G Gross receipts \$			
HAWTHORNE, CA 90250		72,419,297.			
F Name and address of principal officer: STEVE MEISBERGER		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
SAME AS C ABOVE		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No			
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		If "No," attach a list. (see instructions)			
J Website: WWW.AYSO.ORG		H(c) Group exemption number ▶			
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1964 M State of legal domicile: CA			

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO TEACH, PROMOTE AND DEVELOP YOUTH SOCCER IN THE UNITED STATES, TO DEVELOP AMERICAN YOUNGSTERS IN		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	897
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	897
	5 Total number of employees (Part V, line 2a)	5	56
	6 Total number of volunteers (estimate if necessary)	6	250000
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	35,500.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	66,840,575.	67,742,509.
	9 Program service revenue (Part VIII, line 2g)	3,995,870.	4,395,314.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	185,838.	243,662.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	32,463.	37,812.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	71,054,746.	72,419,297.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,000.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,493,901.	3,904,939.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	51,195,926.	67,006,409.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	54,699,827.	70,911,348.	
19 Revenue less expenses. Subtract line 18 from line 12	16,354,919.	1,507,949.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year 68,538,013.	End of Year 69,480,173.
	21 Total liabilities (Part X, line 26)	8,651,770.	8,085,981.
	22 Net assets or fund balances. Subtract line 21 from line 20	59,886,243.	61,394,192.

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.			
Sign Here	▶ Signature of officer	Date	
	▶ STEVE MEISBERGER, CFO		
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN ▶	Preparer's identifying number (see instructions)
GREEN HASSON & JANKS, LLP			
10990 WILSHIRE BLVD., 16TH FLOOR			
LOS ANGELES, CALIFORNIA 90024		Phone no. ▶ (310) 873-1600	

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
AYSO'S VISION IS TO PROVIDE WORLD CLASS YOUTH SOCCER PROGRAMS THAT ENRICH CHILDREN'S LIVES.
AYSO'S MISSION IS TO DEVELOP AND DELIVER QUALITY YOUTH SOCCER PROGRAMS WHICH PROMOTE A FUN, FAMILY ENVIRONMENT BASED ON AYSO'S SIX

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 [X] No
If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] 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.

4a (Code:) (Expenses \$ 53,455,839. including grants of \$) (Revenue \$ 1,786,416.)
MAIN SOCCER PROGRAM: INCLUDES PLAYER REGISTRATION REVENUE AND EXPENSES CONSISTING OF PLAYER UNIFORMS, FIELD EXPENSES, REPAIRS AND MAINTENANCE, PLAYER FEES TO THE UNITED STATES SOCCER FEDERATION AND DIRECT INSURANCE COSTS.

4b (Code:) (Expenses \$ 9,119,926. including grants of \$) (Revenue \$ 2,608,898.)
TOURNAMENTS & CULTURAL EXCHANGE PROGRAMS:

TOURNAMENT PROGRAMS ARE GAMES OR A SERIES OF GAMES PLAYED WITH OTHER AYSO TEAMS OR NON-AYSO TEAMS. THE AYSO TEAMS CAN INCLUDE TEAMS FROM ANY REGIONS. AREA OR SECTION.

CULTURAL EXCHANGE PROGRAMS ARE GAMES, SERIES OF GAMES OR TOURNAMENTS IN WHICH AYSO PLAYERS TRAVEL TO ANOTHER COUNTRY, OR WHERE AN AYSO REGION, AREA OR SECTION HOSTS A TEAM FROM ANOTHER COUNTRY, FOR THE DUAL PURPOSE OF PLAYING SOCCER AND LEARNING ABOUT DIFFERENT CULTURES AND GEOGRAPHIC AREAS AND MAKING FRIENDS THROUGH THE UNIVERSAL LANGUAGE OF SOCCER.

4c (Code:) (Expenses \$ 3,322,356. including grants of \$) (Revenue \$)
TRAINING PROGRAMS:

COACHING PROGRAM - PROVIDES WIDE RANGE OF COURSES TO CONTINUE INSTRUCTING ITS VOLUNTEER COACHES.

OFFICIATING PROGRAM - PROVIDES WIDE RANGE OF COURSES TO CONTINUE INSTRUCTING IT VOLUNTEER REFEREES.

MANAGEMENT PROGRAM - PROVIDES EXTENSIVE MANAGEMENT TRAINING TO ITS VOLUNTEERS ON HOW TO MANAGE THEIR LOCAL PROGRAMS. THE ORGANIZATION ALSO PROVIDES IN-DEPTH OPERATIONAL MANUALS TO ASSIST ADMINISTRATORS AT EVERY LEVEL FOR THOROUGH UNDERSTANDING OF THEIR DUTIES.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 65,898,121. (Must equal Part IX, Line 25, column (B).)

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)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. 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>	<input type="checkbox"/>	<input type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the U.S.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<input type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input type="checkbox"/>
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<input type="checkbox"/>	<input type="checkbox"/>
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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>		X
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
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>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
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>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
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>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X

Form 990 (2008)

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 36		
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	
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 56		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
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
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
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?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
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
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. 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	Section 501(c)(12) organizations. 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	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		
	12b		

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		897
b	Enter the number of voting members that are independent		897
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
b	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:		
a	The governing body?	X	
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	
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?	X	
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	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
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:		
a	The organization's CEO, Executive Director, or top management official?	X	
b	Other officers or key employees of the organization?	X	
	Describe the process in Schedule O. (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's 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 **CA, SC, OR**
- 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: **STEVEN MEISBERGER - 800-872-2976**
12501 SOUTH ISIS AVE., HAWTHORNE, CA 90250

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) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
FRANCES STRONKS SECTION DIRECTOR	10.00	X						0.	0.	0.
KENNETH MANGELSDORF AREA DIRECTOR	10.00	X						0.	0.	0.
EDWARD TOMKINS R-COMMISSIONER	10.00	X						0.	0.	0.
LISA MAY R-COMMISSIONER	10.00	X						0.	0.	0.
JUAN CASTANEDA R-COMMISSIONER	10.00	X						0.	0.	0.
CHRIS MANGELSDORF R-COMMISSIONER	10.00	X						0.	0.	0.
ANGELICA HORNE R-COMMISSIONER	10.00	X						0.	0.	0.
MICHAEL MACHADO R-COMMISSIONER	10.00	X						0.	0.	0.
CALVIN HOUSE AREA DIRECTOR	10.00	X						0.	0.	0.
CUNG NGUYEN R-COMMISSIONER	10.00	X						0.	0.	0.
MARCO QUEZADA R-COMMISSIONER	10.00	X						0.	0.	0.
HUGO CORREA R-COMMISSIONER	10.00	X						0.	0.	0.
ANTHONY BACLIG R-COMMISSIONER	10.00	X						0.	0.	0.
ALDO MASCHERONI R-COMMISSIONER	10.00	X						0.	0.	0.
LISA ORTEGA R-COMMISSIONER	10.00	X						0.	0.	0.
ROBERT MACTAVISH R-COMMISSIONER	10.00	X						0.	0.	0.
CINDY VASQUEZ R-COMMISSIONER	10.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOSE ESTRADA R-COMMISSIONER	10.00	X						0.	0.	0.
BRUCE DAVY AREA DIRECTOR	10.00	X						0.	0.	0.
CHERYL SAVITT R-COMMISSIONER	10.00	X						0.	0.	0.
MICHAEL HOYER R-COMMISSIONER	10.00	X						0.	0.	0.
LISA POPOVICH R-COMMISSIONER	10.00	X						0.	0.	0.
RAMON PULIDO R-COMMISSIONER	10.00	X						0.	0.	0.
MICHAEL RILEY R-COMMISSIONER	10.00	X						0.	0.	0.
RICHARD LABAYEN R-COMMISSIONER	10.00	X						0.	0.	0.
MARCO PRADO R-COMMISSIONER	10.00	X						0.	0.	0.
NICK LINCIR AREA DIRECTOR	10.00	X						0.	0.	0.
1b Total								663,160.	0.	157,566.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶ 4

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶ 0

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII Statement of Revenue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns						
	b	Membership dues	63159000.					
	c	Fundraising events						
	d	Related organizations						
	e	Government grants (contributions)						
	f	All other contributions, gifts, grants, and similar amounts not included above	4583509.					
	g	Noncash contributions included in lines 1a-1f: \$	62,802.					
	h	Total. Add lines 1a-1f		67742509.				
	Program Service Revenue	2 a	<u>TOURNAMENT</u>	Business Code				
		b	<u>CONFERENCES</u>		2,608,898.	2,608,898.		
c		<u>ADULT LEAGUES</u>		1,708,448.	1,708,448.			
d				77,968.	77,968.			
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f		4,395,314.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		243,662.		243,662.		
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties		958.		958.		
	6 a	Gross Rents	(i) Real					
			(ii) Personal					
			b	Less: rental expenses				
			c	Rental income or (loss)				
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities					
			(ii) Other					
			b	Less: cost or other basis and sales expenses				
			c	Gain or (loss)				
	d	Net gain or (loss)						
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
			b	Less: direct expenses				
			c	Net income or (loss) from fundraising events				
	9 a	Gross income from gaming activities. See Part IV, line 19	a					
b			Less: direct expenses					
c			Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a						
		b	Less: cost of goods sold					
		c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Business Code					
11 a	<u>ADVERTISING</u>	541800	35,500.		35,500.			
b	<u>OTHER INCOME</u>	900099	1,354.			1,354.		
c								
d	All other revenue							
e	Total. Add lines 11a-11d		36,854.					
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		72419297.	4,395,314.	35,500.	245,974.		

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) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	412,284.	150,770.	261,514.	
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	2,572,355.	940,693.	1,631,662.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	112,342.	41,083.	71,259.	
9 Other employee benefits	576,759.	210,917.	365,842.	
10 Payroll taxes	231,199.	84,548.	146,651.	
11 Fees for services (non-employees):				
a Management				
b Legal	299,473.		299,473.	
c Accounting	77,981.		77,981.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	62,155.	62,155.		
12 Advertising and promotion	26,896.	540.	26,356.	
13 Office expenses	2,335,239.	2,196,541.	138,698.	
14 Information technology	256,883.	32,189.	224,694.	
15 Royalties				
16 Occupancy	158,324.	38,935.	119,389.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	21,648,919.	21,313,759.	335,160.	
20 Interest	93,579.	1,691.	91,888.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	360,057.		360,057.	
23 Insurance	939,830.	836,051.	103,779.	
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 UNIFORMS	12,044,955.	12,044,955.		
b FIELD EXPENSES	7,759,298.	7,759,298.		
c AWARDS & TROPHIES	5,475,676.	5,475,676.		
d EQUIPMENT REPAIR & MAIN	2,875,066.	2,875,066.		
e CLINICS	2,639,659.	2,639,659.		
f All other expenses	9,952,419.	9,193,595.	758,824.	
25 Total functional expenses. Add lines 1 through 24f	70,911,348.	65,898,121.	5,013,227.	0.
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 ...				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	66,797,753.	1	67,937,831.
	2 Savings and temporary cash investments	96,756.	2	71,419.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	368,509.	4	169,537.
	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		7	
	8 Inventories for sale or use		8	105,387.
	9 Prepaid expenses and deferred charges	100,587.	9	101,669.
	10a Land, buildings, and equipment: cost basis ...	10a 4,204,314.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 3,496,157.	769,743.	10c 708,157.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	404,665.	15	386,173.
16 Total assets. Add lines 1 through 15 (must equal line 34)	68,538,013.	16	69,480,173.	
Liabilities	17 Accounts payable and accrued expenses	1,090,932.	17	961,277.
	18 Grants payable		18	
	19 Deferred revenue	6,171,586.	19	5,893,371.
	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	1,045,352.	23	903,345.
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	343,900.	25	327,988.
	26 Total liabilities. Add lines 17 through 25	8,651,770.	26	8,085,981.
Net Assets or Fund Balances	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	59,886,243.	27	61,394,192.
	28 Temporarily restricted net assets		28	
	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 Total net assets or fund balances	59,886,243.	33	61,394,192.	
34 Total liabilities and net assets/fund balances	68,538,013.	34	69,480,173.	

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?		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization **AMERICAN YOUTH SOCCER ORGANIZATION** Employer identification number **95-6205398**

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

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.")						
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						
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)						
6 Public Support. Subtract line 5 from line 4.						

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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
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		%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15		%
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 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"/>	

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

Employer identification number

AMERICAN YOUTH SOCCER ORGANIZATION

95-6205398

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

Employer identification number

AMERICAN YOUTH SOCCER ORGANIZATION

95-6205398

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	_____ _____ _____	\$ <u>900,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>2</u>	_____ _____ _____	\$ <u>406,327.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>3</u>	_____ _____ _____	\$ <u>123,254.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>4</u>	_____ _____ _____	\$ <u>84,875.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>5</u>	_____ _____ _____	\$ <u>60,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>6</u>	_____ _____ _____	\$ <u>36,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization AMERICAN YOUTH SOCCER ORGANIZATION	Employer identification number 95-6205398
------------------------------------------------------------------------------	----------------------------------------------------------------

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ <u>35,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8		\$ <u>25,000.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9		\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10		\$ <u>15,216.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11		\$ <u>15,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12		\$ <u>8,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization AMERICAN YOUTH SOCCER ORGANIZATION	Employer identification number 95-6205398
-----------------------------------------------------------------------	---------------------------------------------------------

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	CASH CONTRIBUTION = \$370,000. IN-KIND CONTRIBUTION CONSISTS OF SOCCER RELATED GEAR & EQUIPMENT.	\$ 36,327.	06/01/09
8	CASH CONTRIBUTION = \$15,000. IN-KIND CONTRIBUTION CONSISTS OF SOCCER RELATED GEAR & EQUIPMENT.	\$ 10,000.	VARIOUS
10	IN-KIND CONTRIBUTION CONSISTS OF BANNERS & FLAGS	\$ 15,216.	VARIOUS
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **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.**

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer identification number

95-6205398

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.

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

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of certified historic structure

Preservation of open space

2 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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____

8 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

9 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.

- 1a 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.
- b 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 ▶ \$ _____
- 2 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 ▶ \$ _____

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 |
|----------------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 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
1a Beginning of year balance	181,474.				
b Contributions	21,755.				
c Investment earnings or losses	5,638.				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	483.				
g End of year balance	208,384.				

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment 100.00 %
 - 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 |
|------------------------------------|--------------------------|-------------------------------------|
| (i) unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Yes No

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
1a Land				
b Buildings				
c Leasehold improvements		726,999.	45,961.	681,038.
d Equipment		3,477,315.	3,450,196.	27,119.
e Other				
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				708,157.

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	72,419,297.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	70,911,348.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	1,507,949.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	1,507,949.

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	72,419,297.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	72,419,297.
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	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	72,419,297.

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

1	Total expenses and losses per audited financial statements	1	70,911,348.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
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	0.
3	Subtract line 2e from line 1	3	70,911,348.
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	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	70,911,348.

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 V, LINE 4: TO PROVIDE ASSISTANCE TO ECONOMICALLY OR

GEOGRAPHICALLY DISADVANTAGED REGIONS FOR THE PURCHASE OF EQUIPMENT; FIELD DEVELOPMENT OR MAINTENANCE; MARKETING AND TRAINING; TRAINING MATERIALS AND PROGRAM EXPANSION.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2008

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer identification number

95-6205398

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.

- | | |
|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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.

- | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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

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				
RICK DAVIS	(i)	221,984.	0.	5,437.	13,000.	43,947.	284,368.	109,231.
	(ii)	0.	0.	0.	0.	0.	0.	0.
STEVE MEISBERGER	(i)	180,057.	0.	6,525.	0.	50,127.	236,709.	90,342.
	(ii)	0.	0.	0.	0.	0.	0.	0.
LYNN BERLING-MANUEL	(i)	129,472.	0.	3,960.	0.	35,872.	169,304.	36,298.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

PART I, LINE 1A: THE CHIEF MARKETING OFFICER IS PROVIDED WITH A HOUSING ALLOWANCE, WHICH IS DOCUMENTED AND APPROVED BY THE BOARD.

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID BEHENNA R-COMMISSIONER	10.00	X					0.	0.	0.	
ANDREE MANNES R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVE MORGAN R-COMMISSIONER	10.00	X					0.	0.	0.	
DICK MONOD DEFROIDEVILLE R-COMMISSIONER	10.00	X					0.	0.	0.	
JOSE SERRANO R-COMMISSIONER	10.00	X					0.	0.	0.	
SANDRA OERLY AREA DIRECTOR	10.00	X					0.	0.	0.	
JACQUELINE LEWIS R-COMMISSIONER	10.00	X					0.	0.	0.	
TROY SAFLEY R-COMMISSIONER	10.00	X					0.	0.	0.	
WILLIAM GOMEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
ROB FERJO R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES ENGEL AREA DIRECTOR	10.00	X					0.	0.	0.	
ULRICH MCNULTY R-COMMISSIONER	10.00	X					0.	0.	0.	
SHARON SCHUMAIER R-COMMISSIONER	10.00	X					0.	0.	0.	
CYRUS ROBBINS R-COMMISSIONER	10.00	X					0.	0.	0.	
CYNTHIA LANGLEY R-COMMISSIONER	10.00	X					0.	0.	0.	
DENNIS KEAT R-COMMISSIONER	10.00	X					0.	0.	0.	
RUSSELL FREAR AREA DIRECTOR	10.00	X					0.	0.	0.	
KYLE LARICK R-COMMISSIONER	10.00	X					0.	0.	0.	
THOMAS HERRIN R-COMMISSIONER	10.00	X					0.	0.	0.	
TIMOTHY MAURER R-COMMISSIONER	10.00	X					0.	0.	0.	

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

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SANDY CAPLINGER R-COMMISSIONER	10.00	X					0.	0.	0.	
DARCY TONTO-ZEMP R-COMMISSIONER	10.00	X					0.	0.	0.	
LES BERKEY R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID MARTIN AREA DIRECTOR	10.00	X					0.	0.	0.	
VONDA STONE R-COMMISSIONER	10.00	X					0.	0.	0.	
VINCENT LANDAY R-COMMISSIONER	10.00	X					0.	0.	0.	
DEBORAH HELD R-COMMISSIONER	10.00	X					0.	0.	0.	
KENNETH KOTARSKI R-COMMISSIONER	10.00	X					0.	0.	0.	
JEFFREY POP R-COMMISSIONER	10.00	X					0.	0.	0.	
JOSHUA ARMSTRONG R-COMMISSIONER	10.00	X					0.	0.	0.	
LEONEL RODRIGUEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
BRUCE WILSON R-COMMISSIONER	10.00	X					0.	0.	0.	
CHUCK NEVE AREA DIRECTOR	10.00	X					0.	0.	0.	
LUIS CABRAL R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD GARCIA R-COMMISSIONER	10.00	X					0.	0.	0.	
ANNESLEY IGNATIUS R-COMMISSIONER	10.00	X					0.	0.	0.	
TERRY MORENO R-COMMISSIONER	10.00	X					0.	0.	0.	
TOMMY LATHER R-COMMISSIONER	10.00	X					0.	0.	0.	
JOSE SALGADO R-COMMISSIONER	10.00	X					0.	0.	0.	
PATRICK LAVELY R-COMMISSIONER	10.00	X					0.	0.	0.	

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

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ERICK SIMS R-COMMISSIONER	10.00	X					0.	0.	0.	
LARRY BERQUIST AREA DIRECTOR	10.00	X					0.	0.	0.	
RANDAL KING R-COMMISSIONER	10.00	X					0.	0.	0.	
TAMBI ARAGON R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD FOSTER R-COMMISSIONER	10.00	X					0.	0.	0.	
REGINA JACKOWIAK R-COMMISSIONER	10.00	X					0.	0.	0.	
LOUIS RAGG R-COMMISSIONER	10.00	X					0.	0.	0.	
MARTINE MARTINEZ AREA DIRECTOR	10.00	X					0.	0.	0.	
DAVID SKALSKY R-COMMISSIONER	10.00	X					0.	0.	0.	
STEPHEN KENNEDY R-COMMISSIONER	10.00	X					0.	0.	0.	
ESTELA GONZALES R-COMMISSIONER	10.00	X					0.	0.	0.	
KATHLEEN GONZALEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
KELLY ASADA R-COMMISSIONER	10.00	X					0.	0.	0.	
KEN RHOADS SECTION DIRECTOR	10.00	X					0.	0.	0.	
RANDOLPH HARR AREA DIRECTOR	10.00	X					0.	0.	0.	
MICHAEL STERNS R-COMMISSIONER	10.00	X					0.	0.	0.	
SAUL ROTBLATT R-COMMISSIONER	10.00	X					0.	0.	0.	
ALAN BLACK R-COMMISSIONER	10.00	X					0.	0.	0.	
DARIN ROLAND R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES VAN HORNE R-COMMISSIONER	10.00	X					0.	0.	0.	

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

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL MOLANO R-COMMISSIONER	10.00	X					0.	0.	0.	
HEIDI PIERCE AREA DIRECTOR	10.00	X					0.	0.	0.	
MICHAEL PALU R-COMMISSIONER	10.00	X					0.	0.	0.	
PATRICIA REYES-HERNANDEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
MARIE NAHASS R-COMMISSIONER	10.00	X					0.	0.	0.	
MANUEL COTLA R-COMMISSIONER	10.00	X					0.	0.	0.	
ALLEN NIXON R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL MORRISSEY AREA DIRECTOR	10.00	X					0.	0.	0.	
JUAN ARAUJO R-COMMISSIONER	10.00	X					0.	0.	0.	
JEFFREY MCCLURE R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVE FORBES R-COMMISSIONER	10.00	X					0.	0.	0.	
THOMAS DUMAS R-COMMISSIONER	10.00	X					0.	0.	0.	
GABRIEL ZEPEDA R-COMMISSIONER	10.00	X					0.	0.	0.	
ALAN MATRE AREA DIRECTOR	10.00	X					0.	0.	0.	
MICHAEL DEDOSHKA R-COMMISSIONER	10.00	X					0.	0.	0.	
ALFREDO RODRIGUEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
JOSEPH HOPELIAN R-COMMISSIONER	10.00	X					0.	0.	0.	
EDWARD DOMINGUEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
BRIAN PADDOCK R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK LAKE AREA DIRECTOR	10.00	X					0.	0.	0.	

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

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BERNARD "TONY" TREXLER R-COMMISSIONER	10.00	X						0.	0.	0.
DARCI THOMAS R-COMMISSIONER	10.00	X						0.	0.	0.
KRISTIN VOLLENE R-COMMISSIONER	10.00	X						0.	0.	0.
TIFFANY PANFILI R-COMMISSIONER	10.00	X						0.	0.	0.
WALTER BRINKERHOFF R-COMMISSIONER	10.00	X						0.	0.	0.
MONICA SANDERSON R-COMMISSIONER	10.00	X						0.	0.	0.
TAMMY FERNANDEZ R-COMMISSIONER	10.00	X						0.	0.	0.
MARK LAKE R-COMMISSIONER	10.00	X						0.	0.	0.
SHANE MOORE R-COMMISSIONER	10.00	X						0.	0.	0.
LONNIE ABBOTT R-COMMISSIONER	10.00	X						0.	0.	0.
YVETTE KVASNICKA AREA DIRECTOR	10.00	X						0.	0.	0.
JENNIFER VENEZIANO R-COMMISSIONER	10.00	X						0.	0.	0.
GREG ALEXANDER R-COMMISSIONER	10.00	X						0.	0.	0.
STEPHANIE HANNAH R-COMMISSIONER	10.00	X						0.	0.	0.
GREG BISSONETTE R-COMMISSIONER	10.00	X						0.	0.	0.
CINDY TALIA R-COMMISSIONER	10.00	X						0.	0.	0.
CHRIS ANDERSON R-COMMISSIONER	10.00	X						0.	0.	0.
RACHAEL POSADA R-COMMISSIONER	10.00	X						0.	0.	0.
WILLIAM DEBUSK R-COMMISSIONER	10.00	X						0.	0.	0.
MICHAEL GOLDBERG R-COMMISSIONER	10.00	X						0.	0.	0.

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Schedule J-2 (Form 990) 2008

Continuation Sheet for Form 990

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KAREN SLOAN AREA DIRECTOR	10.00	X					0.	0.	0.	
MARK CHAPMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
CONNIE LAITINEN R-COMMISSIONER	10.00	X					0.	0.	0.	
ART ZIMMERMANN R-COMMISSIONER	10.00	X					0.	0.	0.	
TONI BONFANTINI R-COMMISSIONER	10.00	X					0.	0.	0.	
MARIA GONZALEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
RONALD SELIGMAN AREA DIRECTOR	10.00	X					0.	0.	0.	
ROBERT MANCHIA R-COMMISSIONER	10.00	X					0.	0.	0.	
BRIAN KERSTEN R-COMMISSIONER	10.00	X					0.	0.	0.	
EMIL PICCHI R-COMMISSIONER	10.00	X					0.	0.	0.	
LORETTA RAKSTINS R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN SPOTTISWOOD R-COMMISSIONER	10.00	X					0.	0.	0.	
DAREN STEWART R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID BRESSIE R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL SHIMELD R-COMMISSIONER	10.00	X					0.	0.	0.	
SHELLY EHRMANTRAUT AREA DIRECTOR	10.00	X					0.	0.	0.	
JOEL ANDERSEN R-COMMISSIONER	10.00	X					0.	0.	0.	
MARIAN FRENCH R-COMMISSIONER	10.00	X					0.	0.	0.	
GEORGE LOONEY R-COMMISSIONER	10.00	X					0.	0.	0.	
ANNETTE BYERS R-COMMISSIONER	10.00	X					0.	0.	0.	

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Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JULIA WHITE R-COMMISSIONER	10.00	X					0.	0.	0.	
JAN BONY R-COMMISSIONER	10.00	X					0.	0.	0.	
KEITH UNDERDAHL R-COMMISSIONER	10.00	X					0.	0.	0.	
CRAIG DIRCKSEN R-COMMISSIONER	10.00	X					0.	0.	0.	
PETER VAN DER HEIJDEN SECTION DIRECTOR	10.00	X					0.	0.	0.	
DENNIS TROTT AREA DIRECTOR	10.00	X					0.	0.	0.	
ANNETTE WALKER R-COMMISSIONER	10.00	X					0.	0.	0.	
BRUCE SHEAROUSE R-COMMISSIONER	10.00	X					0.	0.	0.	
DANA DIPRIMA R-COMMISSIONER	10.00	X					0.	0.	0.	
DEWEY THOMPSON R-COMMISSIONER	10.00	X					0.	0.	0.	
JOYCE PURNELL AREA DIRECTOR	10.00	X					0.	0.	0.	
SCOTT WEISS R-COMMISSIONER	10.00	X					0.	0.	0.	
GEORGE BUSHNELL R-COMMISSIONER	10.00	X					0.	0.	0.	
KAREN DOUCETTE R-COMMISSIONER	10.00	X					0.	0.	0.	
THOMAS AURAY R-COMMISSIONER	10.00	X					0.	0.	0.	
MARILYN BENITEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
WILLIAM LANDIS R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT JEWELL R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK SCHMALZ AREA DIRECTOR	10.00	X					0.	0.	0.	
TODD SAUNDERS R-COMMISSIONER	10.00	X					0.	0.	0.	

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OMB No. 1545-0047

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Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RAYMOND BURYNSKI R-COMMISSIONER	10.00	X					0.	0.	0.	
SHANNON BRONK R-COMMISSIONER	10.00	X					0.	0.	0.	
SCOTT GORGAS R-COMMISSIONER	10.00	X					0.	0.	0.	
RICH MUELLER R-COMMISSIONER	10.00	X					0.	0.	0.	
TODD HUMISTON R-COMMISSIONER	10.00	X					0.	0.	0.	
KEITH BOND R-COMMISSIONER	10.00	X					0.	0.	0.	
SCOTT TRUETT R-COMMISSIONER	10.00	X					0.	0.	0.	
JOAN STEDMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
JODI GAINES R-COMMISSIONER	10.00	X					0.	0.	0.	
BRUCE BROAT R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES ENOS R-COMMISSIONER	10.00	X					0.	0.	0.	
PATRICK PURCELL R-COMMISSIONER	10.00	X					0.	0.	0.	
MAURA HATTON R-COMMISSIONER	10.00	X					0.	0.	0.	
LINDA DITTMAR R-COMMISSIONER	10.00	X					0.	0.	0.	
AMY KLOS R-COMMISSIONER	10.00	X					0.	0.	0.	
ALLISON LAFEVER R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN BROD R-COMMISSIONER	10.00	X					0.	0.	0.	
SARAH PUSKARENKO AREA DIRECTOR	10.00	X					0.	0.	0.	
KEVIN HOLMES R-COMMISSIONER	10.00	X					0.	0.	0.	
KIMBERLY TRAUT R-COMMISSIONER	10.00	X					0.	0.	0.	

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Continuation Sheet for Form 990

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2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

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AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARK WEIR R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT DAVENPORT R-COMMISSIONER	10.00	X					0.	0.	0.	
MELISSA ALLEN R-COMMISSIONER	10.00	X					0.	0.	0.	
ALAN HERBERT R-COMMISSIONER	10.00	X					0.	0.	0.	
DIANE HAUSERMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
CHRISTOPHER PATTERSON R-COMMISSIONER	10.00	X					0.	0.	0.	
CAROLE HIRSCHHEY R-COMMISSIONER	10.00	X					0.	0.	0.	
LIANE CHLUS R-COMMISSIONER	10.00	X					0.	0.	0.	
MELISSA HOSKEY R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID MOSHER R-COMMISSIONER	10.00	X					0.	0.	0.	
AMY MANNING R-COMMISSIONER	10.00	X					0.	0.	0.	
LISA DUNKELBERG R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL BROADY R-COMMISSIONER	10.00	X					0.	0.	0.	
ALEXANDER ROHAC R-COMMISSIONER	10.00	X					0.	0.	0.	
DAWN LENCI R-COMMISSIONER	10.00	X					0.	0.	0.	
DANE TAYLOR R-COMMISSIONER	10.00	X					0.	0.	0.	
WALTER BEAN R-COMMISSIONER	10.00	X					0.	0.	0.	
DONALD DODSON R-COMMISSIONER	10.00	X					0.	0.	0.	
PATTI FOLEY AREA DIRECTOR	10.00	X					0.	0.	0.	
STEVEN MISA R-COMMISSIONER	10.00	X					0.	0.	0.	

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▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

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Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SCOTT DEPHILLIPS R-COMMISSIONER	10.00	X					0.	0.	0.	
JON ABOUAF R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID BUNCE AREA DIRECTOR	10.00	X					0.	0.	0.	
LORRIE MAHER R-COMMISSIONER	10.00	X					0.	0.	0.	
MEREDITH ESSELMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
JIMI GRASSI R-COMMISSIONER	10.00	X					0.	0.	0.	
FRANK CONKLIN R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN MOUL R-COMMISSIONER	10.00	X					0.	0.	0.	
JENNY DEMBERGH R-COMMISSIONER	10.00	X					0.	0.	0.	
DANIEL HOWALD AREA DIRECTOR	10.00	X					0.	0.	0.	
EDWARD HELLER R-COMMISSIONER	10.00	X					0.	0.	0.	
LAURENCE GROB R-COMMISSIONER	10.00	X					0.	0.	0.	
LEONARD VALLARIO R-COMMISSIONER	10.00	X					0.	0.	0.	
COLLEEN WAGNER R-COMMISSIONER	10.00	X					0.	0.	0.	
CHRISTINE WERLAU R-COMMISSIONER	10.00	X					0.	0.	0.	
PHILIP ISHMAEL R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT MINKOFF R-COMMISSIONER	10.00	X					0.	0.	0.	
ROSSANO POLVARA R-COMMISSIONER	10.00	X					0.	0.	0.	
HOSSEIN FASSA R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES DORE R-COMMISSIONER	10.00	X					0.	0.	0.	

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Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID ROSE R-COMMISSIONER	10.00	X					0.	0.	0.	
ROY SARTORIUS R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID KILPATRICK R-COMMISSIONER	10.00	X					0.	0.	0.	
MARC ROTH R-COMMISSIONER	10.00	X					0.	0.	0.	
WILLIAM CAVANAGH R-COMMISSIONER	10.00	X					0.	0.	0.	
IRA SILFIN R-COMMISSIONER	10.00	X					0.	0.	0.	
KEVIN MUELLER SECTION DIRECTOR	10.00	X					0.	0.	0.	
BRAD EDGAR AREA DIRECTOR	10.00	X					0.	0.	0.	
PETER SHERWIN R-COMMISSIONER	10.00	X					0.	0.	0.	
JEANINE MARLAR R-COMMISSIONER	10.00	X					0.	0.	0.	
MELANIE THOMPSON AREA DIRECTOR	10.00	X					0.	0.	0.	
JOEL BIRKS R-COMMISSIONER	10.00	X					0.	0.	0.	
KELLI STEINKUEHLER R-COMMISSIONER	10.00	X					0.	0.	0.	
JEAN NELSON R-COMMISSIONER	10.00	X					0.	0.	0.	
MELISSA HARDY R-COMMISSIONER	10.00	X					0.	0.	0.	
BRENDA HERIAN AREA DIRECTOR	10.00	X					0.	0.	0.	
JEFFREY MOORE R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID SHIELDS R-COMMISSIONER	10.00	X					0.	0.	0.	
TINA HARRIS R-COMMISSIONER	10.00	X					0.	0.	0.	
DARREL WILLIS R-COMMISSIONER	10.00	X					0.	0.	0.	

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Department of the Treasury
Internal Revenue Service

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95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JULIE BAUGHMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
CHERI WILLIAMS AREA DIRECTOR	10.00	X					0.	0.	0.	
ABBY AUFFERT R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD PEARSON R-COMMISSIONER	10.00	X					0.	0.	0.	
SCOTT WILLIAMS R-COMMISSIONER	10.00	X					0.	0.	0.	
PETER SLOAN R-COMMISSIONER	10.00	X					0.	0.	0.	
WENDY JINDRA AREA DIRECTOR	10.00	X					0.	0.	0.	
KEVIN AINSWORTH R-COMMISSIONER	10.00	X					0.	0.	0.	
LATICIA SUMNER R-COMMISSIONER	10.00	X					0.	0.	0.	
PAM HOUDEK R-COMMISSIONER	10.00	X					0.	0.	0.	
HEATHER PARDUN R-COMMISSIONER	10.00	X					0.	0.	0.	
JOYCE LAUER R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT WINTERS AREA DIRECTOR	10.00	X					0.	0.	0.	
RUSSELL HORNER R-COMMISSIONER	10.00	X					0.	0.	0.	
KATHERINE LEADING FOX R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK JOHNSON R-COMMISSIONER	10.00	X					0.	0.	0.	
BARRY WILSON R-COMMISSIONER	10.00	X					0.	0.	0.	
JEFF RANKIN R-COMMISSIONER	10.00	X					0.	0.	0.	
KARI MCCLOUD R-COMMISSIONER	10.00	X					0.	0.	0.	
MARVIN (LEE) STEWART SECTION DIRECTOR	10.00	X					0.	0.	0.	

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AMERICAN YOUTH SOCCER ORGANIZATION

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Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL MAYS AREA DIRECTOR	10.00	X					0.	0.	0.	
GEOFF KLEIN R-COMMISSIONER	10.00	X					0.	0.	0.	
CHRISTOPHER STAFFORD R-COMMISSIONER	10.00	X					0.	0.	0.	
LYNDA MORSE R-COMMISSIONER	10.00	X					0.	0.	0.	
BERDINA BRAZZANOVICH R-COMMISSIONER	10.00	X					0.	0.	0.	
ERIC DIXON R-COMMISSIONER	10.00	X					0.	0.	0.	
DARREN ROGERS R-COMMISSIONER	10.00	X					0.	0.	0.	
GEORGE BURGESS R-COMMISSIONER	10.00	X					0.	0.	0.	
JUNE DOUGLASS R-COMMISSIONER	10.00	X					0.	0.	0.	
LORRI KIMBROUGH R-COMMISSIONER	10.00	X					0.	0.	0.	
AMANDA BAILEY R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID KEMP R-COMMISSIONER	10.00	X					0.	0.	0.	
EDDIE SHULTZ R-COMMISSIONER	10.00	X					0.	0.	0.	
WILLIAM KEE R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL HERRELL R-COMMISSIONER	10.00	X					0.	0.	0.	
ALLAN HANCOCK R-COMMISSIONER	10.00	X					0.	0.	0.	
CURTIS WALKER AREA DIRECTOR	10.00	X					0.	0.	0.	
DEBORAH FARMER R-COMMISSIONER	10.00	X					0.	0.	0.	
LISA SHEFFIELD R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVEN WILLIAMS R-COMMISSIONER	10.00	X					0.	0.	0.	

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▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GREGORY OLIVER R-COMMISSIONER	10.00	X					0.	0.	0.	
BASSEM MAHAFAZ R-COMMISSIONER	10.00	X					0.	0.	0.	
JENNIFER BACHMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
BOB ELLINGTON R-COMMISSIONER	10.00	X					0.	0.	0.	
TRACIE MULLINS AREA DIRECTOR	10.00	X					0.	0.	0.	
SHANNON GENTRY R-COMMISSIONER	10.00	X					0.	0.	0.	
DANIEL JOHNSTON R-COMMISSIONER	10.00	X					0.	0.	0.	
RITA GURLEY R-COMMISSIONER	10.00	X					0.	0.	0.	
SHANNON CLEVELAND R-COMMISSIONER	10.00	X					0.	0.	0.	
DONALD WILSON AREA DIRECTOR	10.00	X					0.	0.	0.	
RAYLENE STEPHENSON R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVIS SWAIM R-COMMISSIONER	10.00	X					0.	0.	0.	
KATHY RILEY R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN WYATT R-COMMISSIONER	10.00	X					0.	0.	0.	
HARRY MAMROTH R-COMMISSIONER	10.00	X					0.	0.	0.	
HELMUT ZIEGLER R-COMMISSIONER	10.00	X					0.	0.	0.	
SHERI GREEN R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID WOOD AREA DIRECTOR	10.00	X					0.	0.	0.	
WENDI HENDERSON R-COMMISSIONER	10.00	X					0.	0.	0.	
KEVIN MARAZZI R-COMMISSIONER	10.00	X					0.	0.	0.	

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Schedule J-2 (Form 990) 2008

SCHEDULE J-2
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Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DARRELL HARRIS R-COMMISSIONER	10.00	X					0.	0.	0.	
SHERYL RIZK R-COMMISSIONER	10.00	X					0.	0.	0.	
KELLY KELSOE R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD RESLER R-COMMISSIONER	10.00	X					0.	0.	0.	
KAREN MOORE R-COMMISSIONER	10.00	X					0.	0.	0.	
STACY FRANKS R-COMMISSIONER	10.00	X					0.	0.	0.	
SUSAN REED AREA DIRECTOR	10.00	X					0.	0.	0.	
ERICA AMMONS R-COMMISSIONER	10.00	X					0.	0.	0.	
MARY FIELDS R-COMMISSIONER	10.00	X					0.	0.	0.	
PETER XIQUES R-COMMISSIONER	10.00	X					0.	0.	0.	
GERARD ARSENAULT R-COMMISSIONER	10.00	X					0.	0.	0.	
CHARLES HETHCOAT R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD PHILLIPS R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID ROBBINS R-COMMISSIONER	10.00	X					0.	0.	0.	
BEVERLY WHITTAKER R-COMMISSIONER	10.00	X					0.	0.	0.	
BRYAN MARCHAND AREA DIRECTOR	10.00	X					0.	0.	0.	
JOHN BAILEY R-COMMISSIONER	10.00	X					0.	0.	0.	
DEBORAH HYMEL R-COMMISSIONER	10.00	X					0.	0.	0.	
LASONIA WHITEHEAD R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK DUFFY R-COMMISSIONER	10.00	X					0.	0.	0.	

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Schedule J-2 (Form 990) 2008

SCHEDULE J-2
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OMB No. 1545-0047

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Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
WELLS FRICE SECTION DIRECTOR	10.00	X						0.	0.	0.
THERESA FRICE AREA DIRECTOR	10.00	X						0.	0.	0.
DEBORAH GALLAGHER R-COMMISSIONER	10.00	X						0.	0.	0.
MARK WILL R-COMMISSIONER	10.00	X						0.	0.	0.
MARK DELAMAR R-COMMISSIONER	10.00	X						0.	0.	0.
JOSE VELARDE R-COMMISSIONER	10.00	X						0.	0.	0.
LAM CALDERON R-COMMISSIONER	10.00	X						0.	0.	0.
JONI GOODMAN R-COMMISSIONER	10.00	X						0.	0.	0.
DONALD FINCH AREA DIRECTOR	10.00	X						0.	0.	0.
EDWARD GOBLER R-COMMISSIONER	10.00	X						0.	0.	0.
JEFFREY WAITE R-COMMISSIONER	10.00	X						0.	0.	0.
PAUL JOHNSON R-COMMISSIONER	10.00	X						0.	0.	0.
MARY AHNEN R-COMMISSIONER	10.00	X						0.	0.	0.
ANDREW BANGSBERG R-COMMISSIONER	10.00	X						0.	0.	0.
CHERIE FISCHER R-COMMISSIONER	10.00	X						0.	0.	0.
BRENDA BUCK R-COMMISSIONER	10.00	X						0.	0.	0.
TIMOTHY O'CONNOR R-COMMISSIONER	10.00	X						0.	0.	0.
RUBEN VARELA AREA DIRECTOR	10.00	X						0.	0.	0.
THOMAS SOLON R-COMMISSIONER	10.00	X						0.	0.	0.
SUE GOULD R-COMMISSIONER	10.00	X						0.	0.	0.

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Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

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AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SHAWN GUNST R-COMMISSIONER	10.00	X					0.	0.	0.	
ANTHONY HAMILTON R-COMMISSIONER	10.00	X					0.	0.	0.	
MARTIN OSTER R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES STORTZ R-COMMISSIONER	10.00	X					0.	0.	0.	
LAWRENCE MISH R-COMMISSIONER	10.00	X					0.	0.	0.	
JEREMY CAIRNEY R-COMMISSIONER	10.00	X					0.	0.	0.	
RONALD SCHREIBER AREA DIRECTOR	10.00	X					0.	0.	0.	
PATRICIA CIESLA R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT TEMPLE R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN GALLIGAN R-COMMISSIONER	10.00	X					0.	0.	0.	
RAYMOND GROBLE R-COMMISSIONER	10.00	X					0.	0.	0.	
ELENA SACLARIDES R-COMMISSIONER	10.00	X					0.	0.	0.	
NIVES BERNARDI R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVEN LEVINE R-COMMISSIONER	10.00	X					0.	0.	0.	
LEE KARLIN R-COMMISSIONER	10.00	X					0.	0.	0.	
CYNTHIA PLOUCHE R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN FORLOW R-COMMISSIONER	10.00	X					0.	0.	0.	
TIMOTHY DAUGHERTY R-COMMISSIONER	10.00	X					0.	0.	0.	
JEFF RANSOM AREA DIRECTOR	10.00	X					0.	0.	0.	
MARY DUNNE R-COMMISSIONER	10.00	X					0.	0.	0.	

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Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHERYL BIRKBECK R-COMMISSIONER	10.00	X					0.	0.	0.	
LEON HEGEWALD R-COMMISSIONER	10.00	X					0.	0.	0.	
HENK ROOK R-COMMISSIONER	10.00	X					0.	0.	0.	
LOUISE MCCURRY AREA DIRECTOR	10.00	X					0.	0.	0.	
PAUL RAFAC R-COMMISSIONER	10.00	X					0.	0.	0.	
STUART BAUM R-COMMISSIONER	10.00	X					0.	0.	0.	
REGINALD COLE R-COMMISSIONER	10.00	X					0.	0.	0.	
DANIEL JORDAN R-COMMISSIONER	10.00	X					0.	0.	0.	
SREERAM NAIR R-COMMISSIONER	10.00	X					0.	0.	0.	
ANDREW MEYER R-COMMISSIONER	10.00	X					0.	0.	0.	
FRANCINE SCHWARTZ-ARROYO R-COMMISSIONER	10.00	X					0.	0.	0.	
LAURIE MURRAY R-COMMISSIONER	10.00	X					0.	0.	0.	
DANIEL SAUER AREA DIRECTOR	10.00	X					0.	0.	0.	
MATT KOTTMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES HANSON R-COMMISSIONER	10.00	X					0.	0.	0.	
RICH LEGGE R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVE GAHM R-COMMISSIONER	10.00	X					0.	0.	0.	
SCOTT HOFFMANN R-COMMISSIONER	10.00	X					0.	0.	0.	
TIMOTHY HOPKINS R-COMMISSIONER	10.00	X					0.	0.	0.	
DANIEL HILL R-COMMISSIONER	10.00	X					0.	0.	0.	

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Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
NATHAN SCHWARTZ AREA DIRECTOR	10.00	X					0.	0.	0.	
NORDEN GILBERT R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID LUND R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID HILL R-COMMISSIONER	10.00	X					0.	0.	0.	
JAY BRATKO R-COMMISSIONER	10.00	X					0.	0.	0.	
TOM NIELSEN R-COMMISSIONER	10.00	X					0.	0.	0.	
JEFFREY TAYLOR R-COMMISSIONER	10.00	X					0.	0.	0.	
BRENDAN CRAVALHO SECTION DIRECTOR	10.00	X					0.	0.	0.	
GERALD SOLOMON AREA DIRECTOR	10.00	X					0.	0.	0.	
DAVID BROWN R-COMMISSIONER	10.00	X					0.	0.	0.	
JERILYN CANNIFF R-COMMISSIONER	10.00	X					0.	0.	0.	
CATHY SAWADA R-COMMISSIONER	10.00	X					0.	0.	0.	
SHELDENE HOZAKI R-COMMISSIONER	10.00	X					0.	0.	0.	
KEITH DUBOIS R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID MAKUA R-COMMISSIONER	10.00	X					0.	0.	0.	
OWEN UENO R-COMMISSIONER	10.00	X					0.	0.	0.	
BRIAN CREMER R-COMMISSIONER	10.00	X					0.	0.	0.	
WILLIAM TRUGILLO R-COMMISSIONER	10.00	X					0.	0.	0.	
YUKIKO SASSONE R-COMMISSIONER	10.00	X					0.	0.	0.	
ELIZABETH "LEI" LEONG AREA DIRECTOR	10.00	X					0.	0.	0.	

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2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CLYDE ASATO R-COMMISSIONER	10.00	X					0.	0.	0.	
DUNSTAN CANNE R-COMMISSIONER	10.00	X					0.	0.	0.	
KENNETH HONEKER R-COMMISSIONER	10.00	X					0.	0.	0.	
OBED DONLIN R-COMMISSIONER	10.00	X					0.	0.	0.	
TIM KAWAHAKUI R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD OEI R-COMMISSIONER	10.00	X					0.	0.	0.	
GARY TASHIRO R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES FERNANDEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
ALAN HEU AREA DIRECTOR	10.00	X					0.	0.	0.	
GUY ANAMA R-COMMISSIONER	10.00	X					0.	0.	0.	
ROY TAKEKAWA R-COMMISSIONER	10.00	X					0.	0.	0.	
NELLA SWORD R-COMMISSIONER	10.00	X					0.	0.	0.	
GINGER MATAYOSHI R-COMMISSIONER	10.00	X					0.	0.	0.	
ERIC YOTT SECTION DIRECTOR	10.00	X					0.	0.	0.	
BARBARA JOHNSON AREA DIRECTOR	10.00	X					0.	0.	0.	
JULLIE TAUBITZ R-COMMISSIONER	10.00	X					0.	0.	0.	
CHERYL FINNILA R-COMMISSIONER	10.00	X					0.	0.	0.	
TAMMY MORROW R-COMMISSIONER	10.00	X					0.	0.	0.	
TRENT REYNOLDS R-COMMISSIONER	10.00	X					0.	0.	0.	
TIMOTHY REED R-COMMISSIONER	10.00	X					0.	0.	0.	

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2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BRETT KARHOFF R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES YARBROUGH R-COMMISSIONER	10.00	X					0.	0.	0.	
NICOLE TOWNSEND R-COMMISSIONER	10.00	X					0.	0.	0.	
NICOLE NEVE R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL GESLER R-COMMISSIONER	10.00	X					0.	0.	0.	
JACKIE KUKAL R-COMMISSIONER	10.00	X					0.	0.	0.	
CHARLES ANDY NICKS AREA DIRECTOR	10.00	X					0.	0.	0.	
ERIC DILLER R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVEN HILDABRAND R-COMMISSIONER	10.00	X					0.	0.	0.	
TIMOTHY MORAN R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVE DELPIERE R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES HOWERZYL R-COMMISSIONER	10.00	X					0.	0.	0.	
TODD SOLLMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
KELLI VAUGHAN R-COMMISSIONER	10.00	X					0.	0.	0.	
ARLYN COFFEY R-COMMISSIONER	10.00	X					0.	0.	0.	
JESUSA HERNANDEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL RICCI AREA DIRECTOR	10.00	X					0.	0.	0.	
ALEXANDER TRUESDALE R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT SCHATOW R-COMMISSIONER	10.00	X					0.	0.	0.	
DOUGLAS DAMM R-COMMISSIONER	10.00	X					0.	0.	0.	

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Department of the Treasury
Internal Revenue Service

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Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SUZANNE SAUNDERS R-COMMISSIONER	10.00	X					0.	0.	0.	
THOMAS KORTH R-COMMISSIONER	10.00	X					0.	0.	0.	
OLIVER BOSNJAKOVSKI R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL RUTKOWSKI R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT SAELENS R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD HIGGERSON R-COMMISSIONER	10.00	X					0.	0.	0.	
DENNIS MANTER R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD BUI TEWEG R-COMMISSIONER	10.00	X					0.	0.	0.	
KARIN KAMINSKI R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL FISCUS R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK POPA R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVEN KRAUSE R-COMMISSIONER	10.00	X					0.	0.	0.	
LOUIS TISCH R-COMMISSIONER	10.00	X					0.	0.	0.	
PAULA PARISOT R-COMMISSIONER	10.00	X					0.	0.	0.	
KENDALL SMITH AREA DIRECTOR	10.00	X					0.	0.	0.	
DENNIS CARROLL R-COMMISSIONER	10.00	X					0.	0.	0.	
SUSAN WEST R-COMMISSIONER	10.00	X					0.	0.	0.	
BRANDON PERKINS R-COMMISSIONER	10.00	X					0.	0.	0.	
SCOTT BRAY R-COMMISSIONER	10.00	X					0.	0.	0.	
PHIL NOAKES R-COMMISSIONER	10.00	X					0.	0.	0.	

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Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

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95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ANDREA SMITH R-COMMISSIONER	10.00	X					0.	0.	0.	
THERESA SHELDON R-COMMISSIONER	10.00	X					0.	0.	0.	
NICOLA DEBRABANDER R-COMMISSIONER	10.00	X					0.	0.	0.	
TIM HART HABERL R-COMMISSIONER	10.00	X					0.	0.	0.	
JOE RIOS R-COMMISSIONER	10.00	X					0.	0.	0.	
ELIZABETH BAKER AREA DIRECTOR	10.00	X					0.	0.	0.	
MATTHEW GALER R-COMMISSIONER	10.00	X					0.	0.	0.	
PATRICK HANCOX R-COMMISSIONER	10.00	X					0.	0.	0.	
JON HORNBURG R-COMMISSIONER	10.00	X					0.	0.	0.	
KEVIN RUSSELL R-COMMISSIONER	10.00	X					0.	0.	0.	
NICHOLAS GUNTZ R-COMMISSIONER	10.00	X					0.	0.	0.	
GEORGE ISAAC R-COMMISSIONER	10.00	X					0.	0.	0.	
MARCI MAULDIN R-COMMISSIONER	10.00	X					0.	0.	0.	
JANE HARRISON R-COMMISSIONER	10.00	X					0.	0.	0.	
SUSAN HEASLIP R-COMMISSIONER	10.00	X					0.	0.	0.	
CAROLYN TAYLOR AREA DIRECTOR	10.00	X					0.	0.	0.	
MICHAEL MILLS R-COMMISSIONER	10.00	X					0.	0.	0.	
CYNTHIA MONTNEY R-COMMISSIONER	10.00	X					0.	0.	0.	
TRACY STEINMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
CHRISTOPHER RITTMUELLER R-COMMISSIONER	10.00	X					0.	0.	0.	

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

Schedule J-2 (Form 990) 2008

Continuation Sheet for Form 990

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
PAUL KERR R-COMMISSIONER	10.00	X					0.	0.	0.	
COLEEN MARTIN R-COMMISSIONER	10.00	X					0.	0.	0.	
CHARLOTTE YETTAW R-COMMISSIONER	10.00	X					0.	0.	0.	
CHRISTOPHER CLARK R-COMMISSIONER	10.00	X					0.	0.	0.	
DUANE WILL R-COMMISSIONER	10.00	X					0.	0.	0.	
SCOTT JONES R-COMMISSIONER	10.00	X					0.	0.	0.	
NORRIS LOUNSBURY R-COMMISSIONER	10.00	X					0.	0.	0.	
WARREN KUHL R-COMMISSIONER	10.00	X					0.	0.	0.	
SCOTT BEARDSLEE R-COMMISSIONER	10.00	X					0.	0.	0.	
JOANNE ZANG R-COMMISSIONER	10.00	X					0.	0.	0.	
NICOLE SANCHEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID WITTER AREA DIRECTOR	10.00	X					0.	0.	0.	
WILLIAM HOFFMANN R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN MATUS R-COMMISSIONER	10.00	X					0.	0.	0.	
BRIAN BRANDT R-COMMISSIONER	10.00	X					0.	0.	0.	
RONALD MILLS R-COMMISSIONER	10.00	X					0.	0.	0.	
LAURA MCLOGAN-KARLE R-COMMISSIONER	10.00	X					0.	0.	0.	
ERIC WOERNER R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID MCKEIGHAN R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN TACHE R-COMMISSIONER	10.00	X					0.	0.	0.	

Continuation Sheet for Form 990

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SHARLENE TIMMONS R-COMMISSIONER	10.00	X					0.	0.	0.	
JOSHUA INMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
CARRIE EDGERLE AREA DIRECTOR	10.00	X					0.	0.	0.	
DANIEL FAILLA R-COMMISSIONER	10.00	X					0.	0.	0.	
DAWN IGNAT R-COMMISSIONER	10.00	X					0.	0.	0.	
LAURA MARENTETTE R-COMMISSIONER	10.00	X					0.	0.	0.	
KEN LINZNER R-COMMISSIONER	10.00	X					0.	0.	0.	
BILL CAPUTO R-COMMISSIONER	10.00	X					0.	0.	0.	
JENELLE STANTON R-COMMISSIONER	10.00	X					0.	0.	0.	
WILLIAM CRAIN R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHELLE RUSSO R-COMMISSIONER	10.00	X					0.	0.	0.	
LORI HARMON R-COMMISSIONER	10.00	X					0.	0.	0.	
SCOTT DINGMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
CAROL TONDREAU R-COMMISSIONER	10.00	X					0.	0.	0.	
SANDY LANE R-COMMISSIONER	10.00	X					0.	0.	0.	
GWYNNE DE LONGPRE AREA DIRECTOR	10.00	X					0.	0.	0.	
DANIEL DIXON R-COMMISSIONER	10.00	X					0.	0.	0.	
GLEN HOLT R-COMMISSIONER	10.00	X					0.	0.	0.	
MATTHEW KWANTES R-COMMISSIONER	10.00	X					0.	0.	0.	
ROY HAWKINS R-COMMISSIONER	10.00	X					0.	0.	0.	

Continuation Sheet for Form 990

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
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Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
PETER WOODS R-COMMISSIONER	10.00	X					0.	0.	0.	
LAURIE POPMA R-COMMISSIONER	10.00	X					0.	0.	0.	
RONALD HULL R-COMMISSIONER	10.00	X					0.	0.	0.	
JEFFREY BLUM R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVE ORAM SECTION DIRECTOR	10.00	X					0.	0.	0.	
JUDITH FISHER AREA DIRECTOR	10.00	X					0.	0.	0.	
JENNIFER KALM R-COMMISSIONER	10.00	X					0.	0.	0.	
LISA FUELLING R-COMMISSIONER	10.00	X					0.	0.	0.	
BRETT WARDLE R-COMMISSIONER	10.00	X					0.	0.	0.	
JOLENE MOHAR R-COMMISSIONER	10.00	X					0.	0.	0.	
HOLLY PORTER R-COMMISSIONER	10.00	X					0.	0.	0.	
SYLVIA WALL R-COMMISSIONER	10.00	X					0.	0.	0.	
KRISTINE GRAFF R-COMMISSIONER	10.00	X					0.	0.	0.	
KEVIN MITCHELL R-COMMISSIONER	10.00	X					0.	0.	0.	
KIM RASMUSSEN R-COMMISSIONER	10.00	X					0.	0.	0.	
DARYN BRASHER AREA DIRECTOR	10.00	X					0.	0.	0.	
SHAUNA KUMP R-COMMISSIONER	10.00	X					0.	0.	0.	
ANGELA STOFY R-COMMISSIONER	10.00	X					0.	0.	0.	
MARC CARROLL R-COMMISSIONER	10.00	X					0.	0.	0.	
JEFFREY KONDEL R-COMMISSIONER	10.00	X					0.	0.	0.	

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARK PEDERSEN AREA DIRECTOR	10.00	X						0.	0.	0.
LELAND NELSON R-COMMISSIONER	10.00	X						0.	0.	0.
ALLYSON BRIESE R-COMMISSIONER	10.00	X						0.	0.	0.
ROSEMARIE PEDERSEN R-COMMISSIONER	10.00	X						0.	0.	0.
CATHERINE FRAZER R-COMMISSIONER	10.00	X						0.	0.	0.
DANIEL WILMOT R-COMMISSIONER	10.00	X						0.	0.	0.
LANCE HOOVER R-COMMISSIONER	10.00	X						0.	0.	0.
SHANNON HAWKINS AREA DIRECTOR	10.00	X						0.	0.	0.
ANDREW HARTMANN R-COMMISSIONER	10.00	X						0.	0.	0.
SHERIE HOLST R-COMMISSIONER	10.00	X						0.	0.	0.
TRAVIS BRADEN R-COMMISSIONER	10.00	X						0.	0.	0.
SHANNON HAWKINS R-COMMISSIONER	10.00	X						0.	0.	0.
NATALIE LAWES R-COMMISSIONER	10.00	X						0.	0.	0.
JOE DRAGO R-COMMISSIONER	10.00	X						0.	0.	0.
LISA TRACY R-COMMISSIONER	10.00	X						0.	0.	0.
SHAR LEATHEROW R-COMMISSIONER	10.00	X						0.	0.	0.
BRUCE ILLUM R-COMMISSIONER	10.00	X						0.	0.	0.
KENT COBURN R-COMMISSIONER	10.00	X						0.	0.	0.
GINA GONZALEZ R-COMMISSIONER	10.00	X						0.	0.	0.
SHAWN SABAN R-COMMISSIONER	10.00	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ZANE GRAY R-COMMISSIONER	10.00	X					0.	0.	0.	
RICK BOWLES R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL MARKS SECTION DIRECTOR	10.00	X					0.	0.	0.	
DONNA NELSON AREA DIRECTOR	10.00	X					0.	0.	0.	
ROBERT GRECO R-COMMISSIONER	10.00	X					0.	0.	0.	
JUDITH VAUGHN R-COMMISSIONER	10.00	X					0.	0.	0.	
AVIS CHADWICK R-COMMISSIONER	10.00	X					0.	0.	0.	
JANET FENTON R-COMMISSIONER	10.00	X					0.	0.	0.	
BETH VILLANUEVA R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN BUCKLEY R-COMMISSIONER	10.00	X					0.	0.	0.	
NASHID SALAHUD-DIN R-COMMISSIONER	10.00	X					0.	0.	0.	
LUIS PONCE R-COMMISSIONER	10.00	X					0.	0.	0.	
JUAN CANO R-COMMISSIONER	10.00	X					0.	0.	0.	
CHARLES JOHNSON AREA DIRECTOR	10.00	X					0.	0.	0.	
LADONNA KIRBY R-COMMISSIONER	10.00	X					0.	0.	0.	
KAREN TILLQUIST R-COMMISSIONER	10.00	X					0.	0.	0.	
SHANNA WARD R-COMMISSIONER	10.00	X					0.	0.	0.	
EMIL GRAVES R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT MSALES R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT OLIVAREZ R-COMMISSIONER	10.00	X					0.	0.	0.	

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

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
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Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KRISTEN PEARSON R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN OTIS R-COMMISSIONER	10.00	X					0.	0.	0.	
RICARDO ROHDE R-COMMISSIONER	10.00	X					0.	0.	0.	
THOMAS KRAUSE R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD PAGLIARLI AREA DIRECTOR	10.00	X					0.	0.	0.	
JAMES LYON R-COMMISSIONER	10.00	X					0.	0.	0.	
BRIGETTE BRAZIER R-COMMISSIONER	10.00	X					0.	0.	0.	
LESLIE GILDER R-COMMISSIONER	10.00	X					0.	0.	0.	
RUSSELL PLATAMONE R-COMMISSIONER	10.00	X					0.	0.	0.	
NIALL STEWART R-COMMISSIONER	10.00	X					0.	0.	0.	
THOMAS SORCE R-COMMISSIONER	10.00	X					0.	0.	0.	
MARTIN ABBISS AREA DIRECTOR	10.00	X					0.	0.	0.	
MATTHEW GLASGOW R-COMMISSIONER	10.00	X					0.	0.	0.	
STEPHEN MANCEBO R-COMMISSIONER	10.00	X					0.	0.	0.	
JOE OLIVEIRA R-COMMISSIONER	10.00	X					0.	0.	0.	
WAYNE CASSITY R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID MONTGOMERY R-COMMISSIONER	10.00	X					0.	0.	0.	
ANDREA FLORES R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN MENESES R-COMMISSIONER	10.00	X					0.	0.	0.	
JAVIER QUEVEDO R-COMMISSIONER	10.00	X					0.	0.	0.	

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Schedule J-2 (Form 990) 2008

SCHEDULE J-2
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Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
THOMAS LEBENS AREA DIRECTOR	10.00	X					0.	0.	0.	
JOSE ACOSTA R-COMMISSIONER	10.00	X					0.	0.	0.	
TAMARA SLOCUM R-COMMISSIONER	10.00	X					0.	0.	0.	
ANDY KNIGHTLEY R-COMMISSIONER	10.00	X					0.	0.	0.	
STACI TRUELSON R-COMMISSIONER	10.00	X					0.	0.	0.	
SANDY MENANE R-COMMISSIONER	10.00	X					0.	0.	0.	
PAUL CLINE R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK HOVIS AREA DIRECTOR	10.00	X					0.	0.	0.	
JOHN COX R-COMMISSIONER	10.00	X					0.	0.	0.	
JIM NARANJO R-COMMISSIONER	10.00	X					0.	0.	0.	
QUINTIN QUINTEROS R-COMMISSIONER	10.00	X					0.	0.	0.	
LAUREN RAUCH R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVE SINGER AREA DIRECTOR	10.00	X					0.	0.	0.	
ALTHEA JOHN R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK SINGER R-COMMISSIONER	10.00	X					0.	0.	0.	
AHUVA FOGEL R-COMMISSIONER	10.00	X					0.	0.	0.	
SHINAAN KRAKOWSKY R-COMMISSIONER	10.00	X					0.	0.	0.	
MONIQUE FRANKLIN R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN WAWEE R-COMMISSIONER	10.00	X					0.	0.	0.	
JOSE PEREZ R-COMMISSIONER	10.00	X					0.	0.	0.	

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SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

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(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID MENA R-COMMISSIONER	10.00	X					0.	0.	0.	
ARCHIE SHUM AREA DIRECTOR	10.00	X					0.	0.	0.	
VICTOR PELAYA R-COMMISSIONER	10.00	X					0.	0.	0.	
RUBEN GONZALEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
SYLVIA DE SANTIAGO R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN MALONEY R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES BINDON R-COMMISSIONER	10.00	X					0.	0.	0.	
NORMA ALVAREZ R-COMMISSIONER	10.00	X					0.	0.	0.	
GREG AGUILAR R-COMMISSIONER	10.00	X					0.	0.	0.	
MATTHEW WINEGAR R-COMMISSIONER	10.00	X					0.	0.	0.	
THERESA JESTER R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHAEL FULTS SECTION DIRECTOR	10.00	X					0.	0.	0.	
ROBERT BEALE AREA DIRECTOR	10.00	X					0.	0.	0.	
ERANDY MORRELLO R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT ORR R-COMMISSIONER	10.00	X					0.	0.	0.	
CRAIG BALL R-COMMISSIONER	10.00	X					0.	0.	0.	
EDUARDO RAMIREZ R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD ROOT R-COMMISSIONER	10.00	X					0.	0.	0.	
KEN SPIRA R-COMMISSIONER	10.00	X					0.	0.	0.	
FREDRICK FREEMAN R-COMMISSIONER	10.00	X					0.	0.	0.	

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SCHEDULE J-2
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Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
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Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ANTHONY DE GIGLIO AREA DIRECTOR	10.00	X					0.	0.	0.	
GARY SCHUTT R-COMMISSIONER	10.00	X					0.	0.	0.	
GEORGE MARLOW R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN GRAY R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN ALMANZA R-COMMISSIONER	10.00	X					0.	0.	0.	
CHRISTOPHER RODGERS R-COMMISSIONER	10.00	X					0.	0.	0.	
BRETT MINTER R-COMMISSIONER	10.00	X					0.	0.	0.	
RODOLFO CORDOVA R-COMMISSIONER	10.00	X					0.	0.	0.	
WILLIAM BIVENS R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES ROSENBERG AREA DIRECTOR	10.00	X					0.	0.	0.	
PAUL LEVEY R-COMMISSIONER	10.00	X					0.	0.	0.	
DIANA PRESTA R-COMMISSIONER	10.00	X					0.	0.	0.	
DOUGLAS CIRBO R-COMMISSIONER	10.00	X					0.	0.	0.	
ALAN CASERIO R-COMMISSIONER	10.00	X					0.	0.	0.	
TIM DICKINSON R-COMMISSIONER	10.00	X					0.	0.	0.	
GARY HARTUNG R-COMMISSIONER	10.00	X					0.	0.	0.	
PATRICK WHITE R-COMMISSIONER	10.00	X					0.	0.	0.	
DARRYL ROSS R-COMMISSIONER	10.00	X					0.	0.	0.	
DANA EDWARDS R-COMMISSIONER	10.00	X					0.	0.	0.	
RONALD GUERENA R-COMMISSIONER	10.00	X					0.	0.	0.	

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

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
NILY SOTOODEH AREA DIRECTOR	10.00	X						0.	0.	0.
PHILLIP GREENBERG R-COMMISSIONER	10.00	X						0.	0.	0.
RANDY IKEDA R-COMMISSIONER	10.00	X						0.	0.	0.
JEFF BRAUN R-COMMISSIONER	10.00	X						0.	0.	0.
JOHN RUBRIGHT R-COMMISSIONER	10.00	X						0.	0.	0.
DONALD KELLEY R-COMMISSIONER	10.00	X						0.	0.	0.
JONATHAN SMITH R-COMMISSIONER	10.00	X						0.	0.	0.
AUDREY CASTREJE R-COMMISSIONER	10.00	X						0.	0.	0.
MARK BOL AREA DIRECTOR	10.00	X						0.	0.	0.
JOHN GOMEZ R-COMMISSIONER	10.00	X						0.	0.	0.
ANTHONY LAROCCO R-COMMISSIONER	10.00	X						0.	0.	0.
ARMINE ALMENANZA R-COMMISSIONER	10.00	X						0.	0.	0.
MARK HAMMOND R-COMMISSIONER	10.00	X						0.	0.	0.
BRET HENNING R-COMMISSIONER	10.00	X						0.	0.	0.
TONY ROGERS R-COMMISSIONER	10.00	X						0.	0.	0.
WAYNE MARKING R-COMMISSIONER	10.00	X						0.	0.	0.
STEPHEN MINTON AREA DIRECTOR	10.00	X						0.	0.	0.
ROBERT HAWKINS R-COMMISSIONER	10.00	X						0.	0.	0.
JEAN MACIAS R-COMMISSIONER	10.00	X						0.	0.	0.
FRANCISCO RIOS R-COMMISSIONER	10.00	X						0.	0.	0.

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Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARCO BELTRAN R-COMMISSIONER	10.00	X					0.	0.	0.	
SALLIE GOODROW AREA DIRECTOR	10.00	X					0.	0.	0.	
MEL MANN R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVE TEINCUFF R-COMMISSIONER	10.00	X					0.	0.	0.	
ERIC SILVA R-COMMISSIONER	10.00	X					0.	0.	0.	
GEORGE SPECK R-COMMISSIONER	10.00	X					0.	0.	0.	
CALVIN SMITH R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT HOYT R-COMMISSIONER	10.00	X					0.	0.	0.	
MELANIE JONES R-COMMISSIONER	10.00	X					0.	0.	0.	
ELAINE TULVING R-COMMISSIONER	10.00	X					0.	0.	0.	
GERARDO GUTIERREZ AREA DIRECTOR	10.00	X					0.	0.	0.	
SANDRA HEIB R-COMMISSIONER	10.00	X					0.	0.	0.	
MARC MAZZONE R-COMMISSIONER	10.00	X					0.	0.	0.	
LEO ACOSTA R-COMMISSIONER	10.00	X					0.	0.	0.	
ZORAIDA CALTITLA R-COMMISSIONER	10.00	X					0.	0.	0.	
ROSENDA DOMINGUEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
JESUS CERVANTES R-COMMISSIONER	10.00	X					0.	0.	0.	
MARCOS ASPEITIA R-COMMISSIONER	10.00	X					0.	0.	0.	
DANIEL SALAZAR R-COMMISSIONER	10.00	X					0.	0.	0.	
LUIS CASTILLO R-COMMISSIONER	10.00	X					0.	0.	0.	

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

Schedule J-2 (Form 990) 2008

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OMB No. 1545-0047

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Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BRUCE PERKINS SECTION DIRECTOR	10.00	X					0.	0.	0.	
FRANK DUARTE AREA DIRECTOR	10.00	X					0.	0.	0.	
KIMBERLY ANGLIN R-COMMISSIONER	10.00	X					0.	0.	0.	
KAISSA GURVINE R-COMMISSIONER	10.00	X					0.	0.	0.	
PRESTON CLONTS R-COMMISSIONER	10.00	X					0.	0.	0.	
DEBORAH MINER R-COMMISSIONER	10.00	X					0.	0.	0.	
MONSEIS GONZALES R-COMMISSIONER	10.00	X					0.	0.	0.	
ANGEL INZUNZA R-COMMISSIONER	10.00	X					0.	0.	0.	
DEBORAH MARTIN R-COMMISSIONER	10.00	X					0.	0.	0.	
BRIAN OERTEL R-COMMISSIONER	10.00	X					0.	0.	0.	
MARYANN HELFRICH R-COMMISSIONER	10.00	X					0.	0.	0.	
FRANK MONTOYA R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES FREY R-COMMISSIONER	10.00	X					0.	0.	0.	
KAREN MONTANO R-COMMISSIONER	10.00	X					0.	0.	0.	
RAMIRO OLIVAREZ II R-COMMISSIONER	10.00	X					0.	0.	0.	
JOSE PACHECO R-COMMISSIONER	10.00	X					0.	0.	0.	
JANELLE RIEDL AREA DIRECTOR	10.00	X					0.	0.	0.	
GORDON BOWERS R-COMMISSIONER	10.00	X					0.	0.	0.	
MARTIN ETCHEVERRY R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK STATHAM R-COMMISSIONER	10.00	X					0.	0.	0.	

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2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SIOBHAN COFFELT R-COMMISSIONER	10.00	X					0.	0.	0.	
TERRY CIRRE R-COMMISSIONER	10.00	X					0.	0.	0.	
THOMAS MCNEIL R-COMMISSIONER	10.00	X					0.	0.	0.	
NOVALENE GOKLISH R-COMMISSIONER	10.00	X					0.	0.	0.	
KELLY O'BRIEN R-COMMISSIONER	10.00	X					0.	0.	0.	
WILLIAM ORMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID HAWLEY R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT DANIEL AREA DIRECTOR	10.00	X					0.	0.	0.	
JERRY DURAN R-COMMISSIONER	10.00	X					0.	0.	0.	
GREGORY KOURY R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD TRASK R-COMMISSIONER	10.00	X					0.	0.	0.	
WESLEY YOUNG R-COMMISSIONER	10.00	X					0.	0.	0.	
MARTHA ALLEN R-COMMISSIONER	10.00	X					0.	0.	0.	
STEPHEN CASALNUOVO R-COMMISSIONER	10.00	X					0.	0.	0.	
KIMBERLY RUSCETTI R-COMMISSIONER	10.00	X					0.	0.	0.	
EARL CHAVEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
CHRIS HINTZ R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHANN SEAMEN R-COMMISSIONER	10.00	X					0.	0.	0.	
ROSEANNA WEATHERFORD R-COMMISSIONER	10.00	X					0.	0.	0.	
AUDREY HERRERA R-COMMISSIONER	10.00	X					0.	0.	0.	

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SCHEDULE J-2
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Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GUILLERMO BONILLA R-COMMISSIONER	10.00	X					0.	0.	0.	
GARY BLANTON AREA DIRECTOR	10.00	X					0.	0.	0.	
SERENA DENNING R-COMMISSIONER	10.00	X					0.	0.	0.	
CINDY BREKKE R-COMMISSIONER	10.00	X					0.	0.	0.	
STANLEY MILLER R-COMMISSIONER	10.00	X					0.	0.	0.	
JOYCE CRISSMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
JEFFREY SCHENCK R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT SWEENEY R-COMMISSIONER	10.00	X					0.	0.	0.	
TOMAS GUERRA R-COMMISSIONER	10.00	X					0.	0.	0.	
JON PAPSDORF R-COMMISSIONER	10.00	X					0.	0.	0.	
THOMAS COX AREA DIRECTOR	10.00	X					0.	0.	0.	
NICHOLAS GANDT R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES VALADEZ R-COMMISSIONER	10.00	X					0.	0.	0.	
LINDA SPECK R-COMMISSIONER	10.00	X					0.	0.	0.	
RONNIE STOTZ R-COMMISSIONER	10.00	X					0.	0.	0.	
CRYSTAL JOHNSON R-COMMISSIONER	10.00	X					0.	0.	0.	
SHARI SHAFFER SECTION DIRECTOR	10.00	X					0.	0.	0.	
WILLIAM JAMES AREA DIRECTOR	10.00	X					0.	0.	0.	
JASON PETERMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
JO O'BRIEN R-COMMISSIONER	10.00	X					0.	0.	0.	

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SCHEDULE J-2
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Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DIRK JOHNSON R-COMMISSIONER	10.00	X					0.	0.	0.	
PATRICK KELLY R-COMMISSIONER	10.00	X					0.	0.	0.	
KIMBERLY GATES R-COMMISSIONER	10.00	X					0.	0.	0.	
DALE SPRIGG R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK MUSSELMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
JOSEPH D'ANDREA R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK MOUNTAN R-COMMISSIONER	10.00	X					0.	0.	0.	
STEVEN LUCAS R-COMMISSIONER	10.00	X					0.	0.	0.	
GEORGE SMITH R-COMMISSIONER	10.00	X					0.	0.	0.	
WENDY MELIUS R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID WISNEWSKI R-COMMISSIONER	10.00	X					0.	0.	0.	
DEANNE BELLES R-COMMISSIONER	10.00	X					0.	0.	0.	
ALAN CRIDER AREA DIRECTOR	10.00	X					0.	0.	0.	
BRITON ORNDORF R-COMMISSIONER	10.00	X					0.	0.	0.	
JENNIFER WOODWARD R-COMMISSIONER	10.00	X					0.	0.	0.	
MICHELLE BRADLEY AREA DIRECTOR	10.00	X					0.	0.	0.	
VICTORIA ECKERT R-COMMISSIONER	10.00	X					0.	0.	0.	
PAUL BRABSON R-COMMISSIONER	10.00	X					0.	0.	0.	
LYNN BOWERS R-COMMISSIONER	10.00	X					0.	0.	0.	
DANIEL EGGLESTON R-COMMISSIONER	10.00	X					0.	0.	0.	

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SCHEDULE J-2
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Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT BOLLMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
RICKY STANFIELD R-COMMISSIONER	10.00	X					0.	0.	0.	
ROBERT LASAGNA AREA DIRECTOR	10.00	X					0.	0.	0.	
STEVE MCILVEEN R-COMMISSIONER	10.00	X					0.	0.	0.	
MONICA BRANCATO R-COMMISSIONER	10.00	X					0.	0.	0.	
TIFFANY GLESSNER R-COMMISSIONER	10.00	X					0.	0.	0.	
RHONDA SWIHURA R-COMMISSIONER	10.00	X					0.	0.	0.	
CURTIS LICHTENFELS R-COMMISSIONER	10.00	X					0.	0.	0.	
CLYDE LONG R-COMMISSIONER	10.00	X					0.	0.	0.	
JENNIFER LECKEY R-COMMISSIONER	10.00	X					0.	0.	0.	
JAMES STEINBECK R-COMMISSIONER	10.00	X					0.	0.	0.	
WENDELL YODER R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK IRWIN R-COMMISSIONER	10.00	X					0.	0.	0.	
TAMMIE SHETLER R-COMMISSIONER	10.00	X					0.	0.	0.	
MARJORIE ZUBEK R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVE MARSH AREA DIRECTOR	10.00	X					0.	0.	0.	
MALCOLM JONES R-COMMISSIONER	10.00	X					0.	0.	0.	
DAVID BOWERS R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK KESSLER R-COMMISSIONER	10.00	X					0.	0.	0.	
PATRICK MCCURDY R-COMMISSIONER	10.00	X					0.	0.	0.	

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Continuation Sheet for Form 990

OMB No. 1545-0047

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Department of the Treasury
Internal Revenue Service

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Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RONDA REDMAN R-COMMISSIONER	10.00	X						0.	0.	0.
FERNANDO INDACOCHEA R-COMMISSIONER	10.00	X						0.	0.	0.
TROY FOLAND R-COMMISSIONER	10.00	X						0.	0.	0.
KIRK BILLINGSLEY R-COMMISSIONER	10.00	X						0.	0.	0.
JACK RAPKIN AREA DIRECTOR	10.00	X						0.	0.	0.
BRETT HARNEY R-COMMISSIONER	10.00	X						0.	0.	0.
BENJAMIN BOWDEN R-COMMISSIONER	10.00	X						0.	0.	0.
TYGE GIBSON AREA DIRECTOR	10.00	X						0.	0.	0.
JAMES BINNER R-COMMISSIONER	10.00	X						0.	0.	0.
CHARLES PORTER R-COMMISSIONER	10.00	X						0.	0.	0.
DIANNE MCCURLEY AREA DIRECTOR	10.00	X						0.	0.	0.
LESLEY YEICH R-COMMISSIONER	10.00	X						0.	0.	0.
THOMAS HEFFNER R-COMMISSIONER	10.00	X						0.	0.	0.
NICOLE FLAUGH R-COMMISSIONER	10.00	X						0.	0.	0.
ROBERT CHECCHI R-COMMISSIONER	10.00	X						0.	0.	0.
KENNETH MUELLER R-COMMISSIONER	10.00	X						0.	0.	0.
PETER EVANS R-COMMISSIONER	10.00	X						0.	0.	0.
TIMOTHY WHITENIGHT R-COMMISSIONER	10.00	X						0.	0.	0.
JOELLEN FOLEY R-COMMISSIONER	10.00	X						0.	0.	0.
MARK BERNINI R-COMMISSIONER	10.00	X						0.	0.	0.

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SCHEDULE J-2
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Continuation Sheet for Form 990

OMB No. 1545-0047

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Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
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(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DONALD MOCK AREA DIRECTOR	10.00	X					0.	0.	0.	
CHRIS KIEFER R-COMMISSIONER	10.00	X					0.	0.	0.	
KERRY MCCLEAF R-COMMISSIONER	10.00	X					0.	0.	0.	
JASON HOFFMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
SUZANNE HOWARD R-COMMISSIONER	10.00	X					0.	0.	0.	
HEATHER STAMM R-COMMISSIONER	10.00	X					0.	0.	0.	
HEATHER CARMACK R-COMMISSIONER	10.00	X					0.	0.	0.	
MARK HUGHEY R-COMMISSIONER	10.00	X					0.	0.	0.	
GREGORY BARD R-COMMISSIONER	10.00	X					0.	0.	0.	
GREG STRAIT R-COMMISSIONER	10.00	X					0.	0.	0.	
SCOTT HOLDEN R-COMMISSIONER	10.00	X					0.	0.	0.	
LISA MOCK R-COMMISSIONER	10.00	X					0.	0.	0.	
JOHN BUSH AREA DIRECTOR	10.00	X					0.	0.	0.	
DAVID DUKOR-JACKSON R-COMMISSIONER	10.00	X					0.	0.	0.	
NATHANIEL ZECHMAN R-COMMISSIONER	10.00	X					0.	0.	0.	
BRIAN ROBBINS R-COMMISSIONER	10.00	X					0.	0.	0.	
JEFFREY SNYDER R-COMMISSIONER	10.00	X					0.	0.	0.	
TIMOTHY HAUSE R-COMMISSIONER	10.00	X					0.	0.	0.	
BARRY KING R-COMMISSIONER	10.00	X					0.	0.	0.	
BRIAN DERR R-COMMISSIONER	10.00	X					0.	0.	0.	

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Schedule J-2 (Form 990) 2008

Continuation Sheet for Form 990

2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BARRY PIDCOE R-COMMISSIONER	10.00	X					0.	0.	0.	
JOSHUA BILLOW R-COMMISSIONER	10.00	X					0.	0.	0.	
BRUCE WAUGH AREA DIRECTOR	10.00	X					0.	0.	0.	
BRIAN KRAH R-COMMISSIONER	10.00	X					0.	0.	0.	
BOBBI-JO STAVER R-COMMISSIONER	10.00	X					0.	0.	0.	
GINA CHAMPION R-COMMISSIONER	10.00	X					0.	0.	0.	
HEATHER BALDWIN R-COMMISSIONER	10.00	X					0.	0.	0.	
LEESA NEECE R-COMMISSIONER	10.00	X					0.	0.	0.	
CHRISTOPHER MONTGOMERY R-COMMISSIONER	10.00	X					0.	0.	0.	
KRISTIN SHULTZ R-COMMISSIONER	10.00	X					0.	0.	0.	
RAMIRO ANTORCHA R-COMMISSIONER	10.00	X					0.	0.	0.	
JENNIE MCHENRY R-COMMISSIONER	10.00	X					0.	0.	0.	
WENDY SMITH SECTION DIRECTOR	10.00	X					0.	0.	0.	
RICHARD BRADWELL AREA DIRECTOR	10.00	X					0.	0.	0.	
KAROLINE CARVAJAL R-COMMISSIONER	10.00	X					0.	0.	0.	
HECTOR SANTINI R-COMMISSIONER	10.00	X					0.	0.	0.	
JENNIFER MALLEA R-COMMISSIONER	10.00	X					0.	0.	0.	
WILLIAM REESE AREA DIRECTOR	10.00	X					0.	0.	0.	
ROSE ARSENAULT R-COMMISSIONER	10.00	X					0.	0.	0.	
RICHARD SCHWARTZ R-COMMISSIONER	10.00	X					0.	0.	0.	

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number

95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN HESS R-COMMISSIONER	10.00	X						0.	0.	0.
MICHAEL TROTTO R-COMMISSIONER	10.00	X						0.	0.	0.
MICHAEL HARTLEY SR. AREA DIRECTOR	10.00	X						0.	0.	0.
DIDIER KUNTZMANN R-COMMISSIONER	10.00	X						0.	0.	0.
CHRISTOPHER BULL R-COMMISSIONER	10.00	X						0.	0.	0.
TIMOTHY NORTON R-COMMISSIONER	10.00	X						0.	0.	0.
CARLA BAHN R-COMMISSIONER	10.00	X						0.	0.	0.
BONNIE MCMANUS R-COMMISSIONER	10.00	X						0.	0.	0.
REGGY MONSANTO AREA DIRECTOR	10.00	X						0.	0.	0.
ERNEST M TOTH R-COMMISSIONER	10.00	X						0.	0.	0.
MIKE TODD R-COMMISSIONER	10.00	X						0.	0.	0.
CARLOS MOYA AREA DIRECTOR	10.00	X						0.	0.	0.
THERESA BINGHAM AREA DIRECTOR	10.00	X						0.	0.	0.
KRISTIN MASSICOTT R-COMMISSIONER	10.00	X						0.	0.	0.
HUGH MC LEISH CHAIR, COACHING COMM	10.00	X						0.	0.	0.
PATRICK MULLANE CHAIR, REFEREE COMM	10.00	X						0.	0.	0.
IRWIN KAVY CHAIR, TOURNAMENT COMM	10.00	X						0.	0.	0.
EILEEN TABERT CHAIR, MANAGEMENT COMM	10.00	X						0.	0.	0.
ADRIENNE COFFIN NATIONAL BOARD MEMBER	10.00	X						0.	0.	0.
JIM GREGORY NATIONAL BOARD MEMBER	10.00	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2008

Continuation Sheet for Form 990

2008

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

Open to Public Inspection

Name of the Organization

AMERICAN YOUTH SOCCER ORGANIZATION

Employer Identification number
95-6205398

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM HUMMELL NATIONAL BOARD MEMBER	10.00	X						0.	0.	0.
DANIEL KLEIN NATIONAL BOARD MEMBER	10.00	X						0.	0.	0.
MARK LINSKY NATIONAL BOARD MEMBER	10.00	X						0.	0.	0.
RANDOLPH MCNUTT NATIONAL BOARD MEMBER	10.00	X						0.	0.	0.
MICHAEL WADE NATIONAL PRESIDENT	20.00	X		X				0.	0.	0.
PAULA BERRIZ NATIONAL VICE-PRESIDENT	10.00	X		X				0.	0.	0.
MARK STEWART NATIONAL VICE-PRESIDENT	10.00	X		X				0.	0.	0.
JEFFREY STERN NATIONAL TREASURER	20.00	X		X				0.	0.	0.
JAMES SCHAUER NATIONAL SECRETARY	20.00	X		X				0.	0.	0.
RICK DAVIS NATIONAL EXECUTIVE DIREC	40.00			X				227,421.	0.	56,947.
STEVE MEISBERGER CHIEF FINANCIAL OFFICER	40.00			X				186,582.	0.	50,127.
LYNN BERLING-MANUEL CHIEF MARKETING OFFICER	40.00					X		133,432.	0.	35,872.
TOM TOBIN DIR- PROGRAMS & VOL. SVC	40.00					X		115,725.	0.	14,620.

**SCHEDULE M
(Form 990)**

NonCash Contributions

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

Name of the organization
AMERICAN YOUTH SOCCER ORGANIZATION

Employer identification number
95-6205398

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>SOCCER GEAR</u>)	X	4	62,802	FMV
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part 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

AMERICAN YOUTH SOCCER ORGANIZATION

Employer identification number

95-6205398

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BODY AND CHARACTER, AND TO FOSTER SOCCER COMPETITION FOR SUCH YOUTH.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PHILOSOPHIES:

1. EVERYONE PLAYS'

2. BALANCED TEAMS

3. OPEN REGISTRATION

4. POSITIVE COACHING

5. GOOD SPORTSMANSHIP

6. PLAYER DEVELOPMENT

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS REVIEWED BY THE FINANCE COMMISSION BEFORE BEING SENT TO THE NATIONAL BOARD OF DIRECTORS FOR FINAL APPROVAL BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ALL THE NATIONAL BOARD MEMBERS SIGN A CONFLICT OF INTEREST STATEMENT EACH YEAR, WHICH IS MONITORED BY THE CONTROLLER.

FORM 990, PART VI, SECTION B, LINE 15: THE HUMAN RESOURCES DIRECTOR GATHERS EXTERNAL MARKET DATA FOR SALARY RAISES FOR ALL EMPLOYEES INCLUDING OFFICERS AND DIRECTORS. FOR OFFICERS AND DIRECTORS, A COMPENSATION PACKAGE INCLUDING BENEFITS AND ANNUAL SALARY, IS THEN APPROVED BY THE NATIONAL BOARD OF DIRECTORS (NBOD). THE NBOD PRESIDENT DETERMINES AND APPROVES THE COMPENSATION PACKAGE FOR NATIONAL EXECUTIVE DIRECTOR (NED) AND IT GOES TO

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

Schedule O (Form 990) 2008

832211
12-18-08

**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

AMERICAN YOUTH SOCCER ORGANIZATION

Employer identification number

95-6205398

THE NBOD BOARD FOR A FINAL VOTE. THE AMOUNT OF SALARY AND BENEFITS GIVEN TO OTHER EMPLOYEES DETERMINED BY THE NATIONAL EXECUTIVE DIRECTOR (NED), BASED ON THE INDUSTRY AVERAGE. THE NBOD IS INFORMED SUBSEQUENTLY OF THE SALARY RAISE OF OTHER EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19: THE FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE. THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2008

Department of the Treasury
Internal Revenue Service

For calendar year 2008 or other tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**

Open to Public Inspection for 501(c)(3) Organizations Only

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) AMERICAN YOUTH SOCCER ORGANIZATION Number, street, and room or suite no. If a P.O. box, see page 9 of instructions. 12501 SOUTH ISIS AVENUE City or town, state, and ZIP code HAWTHORNE, CA 90250	D Employer identification number (Employees' trust, see instructions for Block D on page 9.) 95-6205398 E Unrelated business activity codes (See instructions for Block E on page 9.) 541800
C Book value of all assets at end of year 69,480,173.	F Group exemption number (See instructions for Block F.) ▶ G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust		

H Describe the organization's primary unrelated business activity. **▶ ADVERTISING**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
 If "Yes," enter the name and identifying number of the parent corporation. **▶**

J The books are in care of **▶ STEVEN MEISBERGER** Telephone number **▶ 800-872-2976**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from partnerships and S corporations (attach statement)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	35,500.	9,608.	25,892.
12 Other income (See instructions; attach schedule.)			
13 Total. Combine lines 3 through 12	35,500.	9,608.	25,892.

Part II Deductions Not Taken Elsewhere (see instructions for limitations on deductions.)
 (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules.)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b
23 Depletion	23	
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule)	28	
29 Total deductions. Add lines 14 through 28	29	0.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	25,892.
31 Net operating loss deduction (limited to the amount on line 30)	31	24,892.
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	1,000.
33 Specific deduction (Generally \$1,000, but see instructions for exceptions)	33	1,000.
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	0.

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and:		
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____		
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____		
c Income tax on the amount on line 34	35c	0.
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	36	
37 Proxy tax. See instructions	37	
38 Alternative minimum tax	38	
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies	39	0.

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	40a	
b Other credits (see instructions)	40b	
c General business credit. Attach Form 3800	40c	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	40d	
e Total credits. Add lines 40a through 40d	40e	
41 Subtract line 40e from line 39	41	0.
42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	42	
43 Total tax. Add lines 41 and 42	43	0.
44a Payments: A 2007 overpayment credited to 2008	44a	
b 2008 estimated tax payments	44b	
c Tax deposited with Form 8868	44c	
d Foreign organizations: Tax paid or withheld at source (see instructions)	44d	
e Backup withholding (see instructions)	44e	
f Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	44f	
45 Total payments. Add lines 44a through 44f	45	
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	46	
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed	47	0.
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48	0.
49 Enter the amount of line 48 you want: Credited to 2009 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	49	

Part V Statements Regarding Certain Activities and Other Information (See instructions on page 18)

1 At any time during the 2008 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see page 5 of the instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____		

Schedule A - Cost of Goods Sold. Enter method of inventory valuation

N/A

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a Additional section 263A costs	4a				X
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5				

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer _____ Date _____	CFO _____ Title _____	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Paid Preparer's Use Only	Preparer's signature _____ Date _____	Preparer's SSN or PTIN P00849209
	Firm's name (or yours if self-employed), address, and ZIP code GREEN HASSON & JANKS, LLP 10990 WILSHIRE BLVD., 16TH FLOOR LOS ANGELES, CALIFORNIA 90024	Check if self-employed <input type="checkbox"/>	EIN 95-1777440 Phone no. (310) 873-1600

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)(see instr. on pg 19)

Table for Schedule C: Rent Income. Includes columns for Description of property, Rent received or accrued (a) and (b), Deductions directly connected with the income (3(a)), Total income, and Total deductions.

Schedule E - Unrelated Debt-Financed Income (See instructions on page 19)

Table for Schedule E: Unrelated Debt-Financed Income. Includes columns for Description of debt-financed property, Gross income from or allocable to debt-financed property, Deductions directly connected with or allocable to debt-financed property (a) and (b), Amount of average acquisition debt, Average adjusted basis, Column 4 divided by column 5, Gross income reportable, and Allocable deductions.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (See instructions on page 20)

Table for Schedule F: Interest, Annuities, Royalties, and Rents From Controlled Organizations. Includes columns for Name of controlled organization, Employer identification number, Net unrelated income (loss), Total of specified payments made, Part of column 4 that is included in the controlling organization's gross income, and Deductions directly connected with income in column 5.

Table for Nonexempt Controlled Organizations. Includes columns for Taxable Income, Net unrelated income (loss), Total of specified payments made, Part of column 9 that is included in the controlling organization's gross income, and Deductions directly connected with income in column 10.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization
(see instructions on page 21)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals	0.			0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income
(see instructions on page 21)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals	0.	0.				0.

Schedule J - Advertising Income (see instructions on page 21)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) PLAYSOCCER	35,500.	9,608.		0.	0.	
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	35,500.	9,608.	25,892.			0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
(5) Totals from Part I	35,500.	9,608.				0.
Totals, Part II (lines 1-5)	35,500.	9,608.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions on page 22)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
			%
			%
			%
			%
Total. Enter here and on page 1, Part II, line 14			0.

American Youth Soccer Organization
2008 Form 990T
EIN: 95-6205398
FORM 990-T

Net Operating Loss

<u>LOSS YEAR ENDING</u>	<u>ORIGINAL LOSS</u>	<u>LOSS PREVIOUSLY USED</u>	<u>LOSS AVAILABLE</u>
6/30/1998	86,280	47,581	38,699
6/30/1999	177,157	-	177,157
6/30/2000	6,614	-	6,614
6/30/2001	31,922	-	31,922
6/30/2002	25,725	-	25,725
6/30/2003	11,803	-	11,803
6/30/2004	3,412	-	3,412
6/30/2005	32,766	-	32,766
6/30/2006	-	-	-
6/30/2007	-	-	-
6/30/2008	3,823	-	3,823
		-	
NET OPERATING LOSS AVAILABLE			<u>331,921</u>
AMOUNT USED IN 2008			<u>24,892</u>
NET OPERATING LOSS CARRYOVER TO 2009			<u><u>307,029</u></u>