DLN: 93493318125639 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization D Employer identification number B Check if applicable United States Adult Soccer Association ☐ Address change 13-3241866 ☐ Name change % DUNCAN RIDDLE Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (708) 496-6874 City or town, state or province, country, and ZIP or foreign postal code Bridgeview, IL $\,$ 60455 $\,$ G Gross receipts \$ 3,651,150 Name and address of principal officer H(a) Is this a group return for LORI STONEBURNER □Yes ☑No subordinates? 7000 S Harlem Avenue H(b) Are all subordinates Bridgeview, IL 60455 ☐ Yes ☐No included? Tax-exempt status **☑** 501(c)(3) □ 501(c)() **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW USASA COM L Year of formation 1984 **M** State of legal domicile IL K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities THE ASSOCIATION DEVELOPS, PROMOTES, AND ADMINISTERS THE GAME OF SOCCER AMONG PLAYERS. THE ASSOCIATION FOSTERS AMATEUR COMPETITION AND PROMOTES SOCCER TO ALL AGE GROUPS Activities & Governance Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 4 11 Number of independent voting members of the governing body (Part VI, line 1b) 5 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 13 Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 7b **Current Year** 190,000 199,500 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . . 3,449,733 3,419,539 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 5,967 5,980 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 9,042 24,181 3,639,700 3,664,242 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 18,127 46,350 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 342,956 361,916 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 3,079,375 3,139,020 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 3,440,458 3,547,286 19 Revenue less expenses Subtract line 18 from line 12 . 223,784 92,414 Net Assets or Fund Balances **Beginning of Current Year End of Year** 3,741,656 20 Total assets (Part X, line 16) . 3,903,619 724,690 21 Total liabilities (Part X, line 26) . 655,141 22 Net assets or fund balances Subtract line 21 from line 20 . 3,178,929 3,086,515 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 2019-11-15 Signature of officer Sign Here ORI STONEBURNER TREASURER Type or print name and title Print/Type preparer's name Preparer's signature Date Check I If 2019-11-15 P00175845 Paid self-employed Firm's name ► BKD LLP Firm's EIN Preparer Use Only Firm's address ▶ 1901 S Meyers Road Suite 500 Phone no (630) 282-9500 Oakbrook Terrace, IL 601815209 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y