Form **990**

2014

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the	2014 calendar year, or tax year beginning , 2014, and endi	ng		,		
В	Check if a	oplicable: C Name of organization SOCCER WITHOUT BORDERS		D Emplo	yer identific	cation number	
	Addre	ess change Doing business as		20-	37861	29	
	Name	e change Number and street (or P.O. box if mail is not delivered to street address) Room.	/suite	E Teleph	one number		
	Initial	return 9 WATERHOUSE ST		(85	7) 26	4-0097	
	Final re	clum/terminated City or town, state or province, country, and ZIP or foreign postal code					
	Amer	ded return CAMBRIDGE MA 02138		G Gross	receipts \$	693,36	7
	Applic	cation pending F Name and address of principal officer:	H(a) Is this a		ON THE REAL PROPERTY.		1201
	50.00	MARY MCVEIGH 9 WATERHOUSE STREET CAMBRIDGE MA 02138	H(b) Are all s	subordinates	included?		
1	Tax-exe	empt status X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	If 'No,' a	attach a list.	(see instruct	ions)	
J	Webs		H(c) Group e	ovemntion n	ımbar 🕨		
K		organization: X Corporation Trust Association Other ► L Year of formati	10/0-50		State of lega	Ldd-ll D7	
	and the second s	Summary	on. 2000) IVI	State of lega	I domicile: PA	4
			C COCCI	חוא א כוי			
41		lefly describe the organization's mission or most significant activities: PROVIDIN DUCATIONAL OPPORTUNITIES TO UNDER-SERVED YOUTH.	G 2000	FK WILL			
2	=	DOMITORIA OTTORIONITIES TO UNDER SERVED TOUTH.					
Governance	-						
)Ve	2 C	neck this box ► if the organization discontinued its operations or disposed of more the	han 25% of	 f its net a			
ဗ	3 No	umber of voting members of the governing body (Part VI, line 1a)			3		10
Activities &	4 Nu	umber of independent voting members of the governing body (Part VI, line 1b)			4		8
£;	5 To	tal number of individuals employed in calendar year 2014 (Part V, line 2a)			5		8
美	6 To	tal number of volunteers (estimate if necessary)			6		486
Ă	\$25 care 2 = 2,000 c	tal unrelated business revenue from Part VIII, column (C), line 12			7a		0.
	b Ne	et unrelated business taxable income from Form 990-T, line 34 · · · · · · · · · · · · · · · · · ·			7b		0.
				ior Year		Current Y	ear
<u>a</u>		ontributions and grants (Part VIII, line 1h)		538,6	46.	651	,034.
Revenue	9 Pr	ogram service revenue (Part VIII, line 2g)	8	6,2	56.	23	,824.
é		restment income (Part VIII, column (A), lines 3, 4, and 7d)					
ш.	11 Ot	her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		26,7			,744.
_		tal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		571,6	46.	685	,602.
		ants and similar amounts paid (Part IX, column (A), lines 1-3)					
		nefits paid to or for members (Part IX, column (A), line 4)			1.500		
Ś	15 Sa	laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		124,6	93.	176	,749.
Expenses	16a Pro	ofessional fundraising fees (Part IX, column (A), line 11e)					
be	b To	tal fundraising expenses (Part IX, column (D), line 25) ► 33,853.				Shall Back	
மி	1 5	her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		252 0	40	202	222
		tal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		353,6			,223.
		venue less expenses. Subtract line 18 from line 12		478,3			<u>,972.</u>
- Se	10 110	vende loss expenses. Cubitaet line to nom line 12		93,3			,630.
anc.	20 To	tal assets (Part X, line 16)	Beginning			End of Ye	
Net Assets Fund Balanc	21 To	tal liabilities (Part X, line 26)		208,3			,801.
E d	22 Ne						,219.
		t assets or fund balances. Subtract line 21 from line 20		203,9	52.	320,	,582.
		Signature Block					
comp	r penalties o lete. Declara	f perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the bes ation of preparer (other than officer) is based on all information of which preparer has any knowledge.	t of my knowled	dge and beli	ef, it is true,	correct, and	
(
ei.		Signature of officer	Date	/15/1	5		
Sig He	JII ro	MADY MOVETON					
110	16	MARY MCVEIGH Type or print name and title.	EXECU	TIVE D	IRECT	OR	
		Print/Type preparer's name Preparer's signature Date			I Isr.		
10000 100	2020		C	Check	if PTI		
Pai		James A. George, CPA, CVA, JD	s	elf-employe	d PO	0659906	
	parer	Firm's name James A. George, PC					
US	e Only	Firm's address 401 Edgewater Place Suite 190	F	irm's EIN ▶	20-39	968236	
		Wakefield MA 01880	P	hone no.	(781)	245-820	0
May	the IRS	discuss this return with the preparer shown above? (see instructions)				X Yes	No
D A /	P. B.						Total Control

	till Statement of Program Service Accomplishments	20-3786129	Page 2
2	ANNAL STREET		
1	Check if Schedule O contains a response or note to any line in this Part III		X
•	PROVIDING SOCCER AND EDUCATIONAL OPPORTUNITIES TO UNDER-SERVED YOU	Stimit	
		70TH	
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior	
	Form 990 or 990-EZ?	Ye	es X No
	If 'Yes,' describe these new services on Schedule O.		<u> </u>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Y Y.	es X No
4	If 'Yes,' describe these changes on Schedule O.		_
7	Describe the organization's program service accomplishments for each of its three largest program services, a Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ott and revenue, if any, for each program service reported.	s measured by expeners, the total expene	nses. ses,
4 a	(Code:) (Expenses \$118,207. including grants of \$ 0.) (Re	evenue \$	4,713.)
	RAN A YEAR-ROUND YOUTH DEVELOPMENT PROGRAM FOR NEWCOMER YOUTH		4,713.
	IN THE CITY OF OAKLAND, CA, PROVIDING MORE THAN 420 REFUGEE ASYL	 EE	
	AND IMMIGRANT YOUTH WITH A TOOLKIT TO OVERCOME OBSTACLES OF GROWT	H,	
	INCLUSION, AND PERSONAL SUCCESS.		
4.	(Code:) (Expenses \$ 124,170 including grants of \$ 0.1/Re		***
	(Code:)(Expenses \$124,170. including grants of \$0.)(Re RAN A YEAR-ROUND YOUTH DEVELOPMENT PROGRAM FOR NEWCOMER YOUTH IN BALTIMORE CITY, MD, PROVIDING MORE THAN 135 YOUTH WITH A TOOLKIT OVERCOME OBSTACLES TO GROWTH, INCLUSION, AND PERSONAL SUCCESS.		0.)
	(Code:)(Expenses \$ 84,599. including grants of \$0.)(Reverse A	venue \$	8,055.)
-	INCLUSION, AND PERSONAL SUCCESS.		
4 d (Other program services. (Describe in Schedule O.)		<u>, </u>
(Expenses \$ 176,642 including grants of \$ 0 .) (Revenue \$	11,220	.)
4 e T	otal program service expenses ► 503 618		·

Form 990 (2014) SOCCER WITHOUT BORDERS 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)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ı	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11b		Х
•	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
ł	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Part IV Checklist of Required Schedules (continued)

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If Yes,' complete Schedule L, Part III. 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If Yes,' complete Schedule L, Part IV. b A family member of a current or former officer, director, trustee, or key employee? If Yes,' complete Schedule L, Part IV. c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If Yes,' complete Schedule L, Part IV. 28 Did the organization receive more than \$25,000 in non-cash contributions? If Yes,' complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If Yes,' complete Schedule M. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If Yes,' complete Schedule N, Part II. 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If Yes,' complete Schedule N, Part II. 31 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301,7701-2 and 301,7701-3? If Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1. 34 Was the organization related to any tax-exempt or taxable entity? If Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1. 35 a Did the organization have a controlled entity within the me				Yes	No
column (A), line 27 II Yes,' complete Schedule I, Parts I and III. 22 X 23 bid the organization assers "Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If Yes,' complete Schedule I, Part II V 24a Did the organization have a tracexempt bond issue with an outstanding intribulal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002 If Yes,' anamel lines 24b through 24d and complete Schedule II. If No, yo to line 25s. 25a Saction \$50 (c)(3), 501(c)(4), and \$501(c)(2) organizations. Did the organization regulation and the second part are completed by the compensation of the second part and the second part and the second part and the second with a diequalified person during the year II I I/Se; Complete Schedule II. Part I . 25a Saction \$501(c)(3), 501(c)(4), and \$501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a diequalified person during the year II I I/Se; Complete Schedule II. Part I . 25a Saction \$501(c)(3), 501(c)(4), and \$501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a diequalified person during the year II I I/Se; Complete Schedule II. Part I . 25a Did the organization avers that it engaged in an excess benefit transaction with a diequalified person during the year II I/Se; Complete Schedule II. Part I . 25b St the organization report any amount on Part X, line 8, 8, or 22 for receivables from or payables to any current or former officers, director, furstees, leve employees, highest compensated employees, or disqualified persons? II Yes, complete Schedule II. Part II I . 27c A current or organization provide a grant or other assistance to an officer, director, furstee, key employees, authorized any of these persons? II Yes, complete Schedule II. Part II I . 28a A current or other officer, director, trustee, or key employee? II Yes,	21		21		Х
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule V. If "No." you to live a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the lest day of the year, that was issued after December 31, 2002? If "Yes," amover lines 240 through? 24d and complete Schedule K. If "No." you to live 25a. 24a D. Did the organization maintain an occrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 25a Saction 501(c)(3), 901(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 25a Saction 501(c)(3), 901(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 25a Saction 501(c)(3), 901(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "yes," complete Schedule L. Part I. 25a In the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person or payables to any current or furner of filters, directors, trustees, they employees, or disqualified persons? If Yes, complete Schedule L. Part IV. 25b In the organization provide a grant or other assistance to an officer, director, trustee, or year, and the filter organization provide a grant or other assistance to an officer, director, trustee, or key employee, or disqualified persons? 27c In the organization or part you to business transaction with one of the following parties (see Sched	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
the lest day of the year, that was issued after December 31, 2002? If Yes, 'answer lines 24b through 24d and complete Schadule K. If No, yo to line 25d. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization mentain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an on behalf of issuer for bonds outstanding at any time during the year? 24d d Did the organization act as an on behalf of issuer for bonds outstanding at any time during the year? 24d 5a Sacctino 51(c)(3), 501(c)(4), and 601(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have not been reported on any of the organization sport Forms 990 or 990-E27 if Yes, 'complete Schedule L, Part I. b is the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, injuhest completes from or payables to any current or former officers, directors, trustees, key employees, injuhest completes organization provide a grant selection committion employee, or disqualified persons? If Yes, 'complete Schedule L, Part II. 27 X 28 Was the organization provide a grant selection committion employee, or a 58% controlled entity or family member of any of these persons? If Yes, 'complete Schedule member, or to a 58% controlled entity or family member of a current or former officer, director, trustee, or key employee? If Yes, 'complete Schedule L, Part IV. 28 Was the organization receive more threat sense and the most of the following parties (see Schedule L, Part IV. 28 Did the organization receive more former officer, director, frustee, or key employee? If Yes, 'complete Schedule R. 29 Did the organization in receive more former officer, director, frustee, or key employee? If Yes, 'complete Schedule R. 30 D	23	and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete	23		Х
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization meintain an escrow account other than a refunding accrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) anglaziations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'yes,' complete Schedule L, Part I. b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the interaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I. 25b X b Is the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, frustees, key employees, inighests compressed employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II. 27 Did the organization proof as grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes, complete Schedule L, Part III. 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV '28 and A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV '28a 'X and the organization receive contributions of 'Yes,' complete Schedule L, Part IV '28a 'X and officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV '28a 'X '	24	the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and	242		×
any tax-exempt bonds? 24c 24c d Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction what and been reported on any of the organization's prior Forms 990 or 990-E2? If 'Yes,' complete Schedule L, Part II 25b X 25b 25					- 11
d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 28a Saction 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes, complete Schedule L, Part I. 25a X b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If 'Yes,' complete Schedule L, Part I. 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or puyubles to any current or former officers, directors, fusiences, by employees, inglest compensated employees, or disqualified persons? 27 If 'Yes,' complete Schedule L, Part II. 28 Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part IIV. 27 Was the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions): 29 A Carrent or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 29 C An entity of which a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule M 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 Did the organization with a subject of the p		c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	1				
that the fransaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Ye's, 'complete Schedule L, Part IV 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M, Part I 30 Did the organization injudidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, lin	25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
former officers, directors, trusfees, key employees, highest compensated employees, or disqualified persons? If Yes', complete Schedule L, Part II Zo Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes', complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If Yes, 'complete Schedule L, Part IV. 28a	!	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes.' complete	25b		Х
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III. 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. 20 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I . 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If Yes,' complete Schedule N, Part II . 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 . 33 AW 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 2 . 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 . 35 Bold the organization have a controlled entity within the meaning of section 5012(b)(3)? If 'Yes,' complete Schedule R, Part V, line 2 . 36 Section 501(c)	26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?	26		Х
instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV. 28b	27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		Х
b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV. 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I. 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II. 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I. 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 37 A Did the organization complete Schedule R of the organization and that is treated as a partner	28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	-22-23-25-25-25-2	X
officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV". 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 A Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 A X 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 A X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI. lines 11b and 19?	i	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	(An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
contributions? If 'Yes,' complete Schedule M	29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	+	Х	
Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
Schedule N, Part II	31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I			
301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
and Part V, line 1	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X
entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35 a	·	-		
organization? If 'Yes,' complete Schedule R, Part V, line 2	E	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

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Form 990 (2014)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. [
		L	Yes	No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	(also also also also also also also also	
2	a 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 2 a			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	1990/1907	X
	b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4	a 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)?	4 a		Х
	b If 'Yes,' enter the name of the foreign country: ►		li de la composición	14(983)
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)			
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	(dissort/dillinore)	X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).	011		
,	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
ı	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 828Ž?	7 с		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
•	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		X
1	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
9	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 0		
ı	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 g		
	Form 1098-C?	7 h	Х	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring		Per nerv	Water 19
	organization have excess business holdings at any time during the year?	8	18035163260605	BASISBASIA
	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b	SEGMERACE SHOWN IN	H521562021039
	Section 501(c)(7) organizations, Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	6 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
ł	o Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 8	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
ŀ	of Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
ŧ	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
Ł	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		Х
t.	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

200	Citon A. Governing Body and Management			
	a Enter the number of voting members of the governing body at the end of the tax year		Yes	No
2	b Enter the number of voting members included in line 1a, above, who are independent	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
/ 3	members of the governing body?	7 a		х
	b Are any governance decisions of the organization reserved to (or subject to approval by) members,			<u> </u>
,	stockholders, or persons other than the governing body?	7 b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
_	the following:		.,	
	a The governing body?	8 a 8 b	X	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.0		
3	organization's mailing address? If 'Yes, ' provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)	
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		X
	operations are consistent with the organization's exempt purposes?	10 b		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	NAME OF TAXABLE PARTY.
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 · · · · · · · · · · · · · · · · · ·	12 a	Х	
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
•	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c		_X_
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	nemanischenwi	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?			
	The organization's CEO, Executive Director, or top management official	15 a		X
Ł	Other officers or key employees of the organization	15 b	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X
k	olf 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► See Form 990, Page 6, Line 17 (continued)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply.	vailabl	е	
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year.	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	MARY MCVEIGH 9 WATERHOUSE STREET CAMBRIDGE MA 02138 (85	57) 2	64-0	097
BAA	TEEA0106 11/13/14	Form	990 (2	014)

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Page 7

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(C)			The state of the s		
(A) Name and Title	(B) Avera hou per	ge th	an on is bo	e box,	unles officer	eck mo s perso and a ee)	re on	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list ar hours i relate organiz tions below dotter line)	director	Individual trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
_(1) ZOEY_BOUCHELLE	5.0									
SECRETARY		X	-		<u> </u>	ļ		0.	0.	0.
(2) SKYE DELANO PRESIDENT	5.0	$ 0 _{X}$						0.	0	2
(3) BRIAN GEFFERT	1.0	$-\!\!\!\!-$	+	\vdash		 		0.	0.	0.
DIRECTOR		X						0.1	0.	0.
	40.0	0 X								
DIRECTOR (5) MARY MCVEIGH	40.0		+		_			27,600.	0.	0.
EXECUTIVE DIRECTOR	40.0	Ω X						32,400.	0.	0.
(6) BILL PRICE	5.0									
TREASURER		X	\perp				_	0.	0.	0.
_(7)_LUCAS_RICHARDSON DIRECTOR	10	0. X					İ	0.	0.	0.
(8) MICHAEL SACK	1.0	0 x								<u></u>
DIRECTOR	1.0		—					0.	0.	0.
DIRECTOR		□ X						0.	0.	0.
(10) JOHN O'BRIEN DIRECTOR	<u>_1.0</u>	0 x						0		
(11)		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						0.	0.	0.
(12)		-								
		-	1							
(13)										
(14)		-					\dashv			

Part VII Section A. Officers, Directors, Tr	ustees, (B)	Key	En En	npl	oye C)	es,	an	d Highest Con	npensated Emp	loye	es (co	ntinued
(A) Name and title	Average hours per week	hours box, unless person is both ar officer and a director/trustee week					an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related assignments.	(F) Estimated amount of other		ther
	(list any hours for related organiza - tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	0	ompensal from the rganization and relate rganization	e on ed
(15)												
(16)												
<u>(17)</u>												
(18)												
(19)												
(20)												
(21)							1					
(22)							1					
(23)				1	1		+					
(24)							1					
(25)					1							
1 b Sub-total	n A					. >		60,000.	0.			0.
d Total (add lines 1b and 1c)	to those li	sted a	abov	 /e) w	· · ·	recei	ved	60,000. more than \$100,00	0 . 00 of reportable com	pensa	tion	0.
harden de la companya					÷	2.6.2	1000				Yes	No
on line 1a? If 'Yes,' complete Schedule J for such inc	dividual .						• •		loyee 	3		X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual	an \$150 0	102 I	f 'Va	c' cc	mn	oto S	Coho	dula I for	2	4		X
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	mpensatio	n froi	m an	W Hr	rela	ted c	rna	nization or individu	al	TED ATE		X
Section B. Independent Contractors 1 Complete this table for your five highest compensate compensation from the organization. Report compensation	d indepen	dont (contr	racto	oro t	ant re	nooi,	und more than \$40	0.000			
(A) Name and business address		ne ca	alenc	заг у	/ear	enai	ng w	(B) Description of s		((C) nsation	
									3	s.iipo		
							+	7				
2 Total number of independent contractors (including b	ut not limit	ed to	thos	se lis	sted	abov	/e) w	vho received more	than		No.	
\$100,000 of compensation from the organization	TE	FA010	0 00	100/4	-				65/4	10.1545	200 (0	

io and an	Žamoja (aksti	Check if Schedule O	contains a i	espo	nse or note to any l	Sile .			<u> </u>
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1 1	a Federated campaigns .	H-	1 a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues		1 b					
S A	,	Fundraising events	[1 c					
#	(d Related organizations .		1 d					
S, E	(Government grants (contributi	ions)	1 e	70,794.				
<u> </u>		F All other contributions, gifts, g	rants and			1000 000 000 1			
F E	'	similar amounts not included a	above	1f	580,240.				
Ē	(g Noncash contributions include	ed in lines 1a-	1f: \$	28,150.				
S	ı	n Total. Add lines 1a-1f				651,034.			
					Business Code				
Ē	2 a	EARNED INCOME			900099	23,824.	23,824.	0.	0.
æ) ====================================			20003	23,021.	25,024.	<u></u>	<u> </u>
Program Service Revenue	(;							
ē.		y 				7761.			
E	. 6							7.0.4.	
gra	f	All other program service							
문		Total. Add lines 2a-2f .				23,824.		A STATE OF THE STA	
	3	Investment income (inclu				23,024.			
	"	other similar amounts) .	····						
	4	Income from investment	of tax-exen	npt bo	nd proceeds				
	5	Royalties							
		_	(i) Rea		(ii) Personal				
	6 a	Gross rents							1000
	k	Less: rental expenses							
	c	Rental income or (loss)						0.000	
	ı	Net rental income or (los	s)						
		Gross amount from sales of	(i) Securiti		(ii) Other				
	1 4	assets other than inventory				312			
	١.	Less; cost or other basis				2000			
	L	and sales expenses +							
	С	Gain or (loss)							
		Net gain or (loss)			<i></i>				
¥.		Gross income from fundra (not including\$							211027212
e u		of contributions reported	on line 1c)						
Ę		See Part IV, line 18			10015				
Other Reven	h	Less: direct expenses			10/313.			0.0000000000000000000000000000000000000	
Ě		Net income or (loss) from			1,700.				
U				_	1	10,580.		0.	10,580.
	9 a	Gross income from gamir See Part IV, line 19	ng activities	. a					
	b	Less: direct expenses .							
		Net income or (loss) from							
	iva	Gross sales of inventory, and allowances	ess returns	s .a					
	b	Less: cost of goods sold		. b					
		c Net income or (loss) from sales of inventory ▶							
		Miscellaneous Revenue		Ť	Business Code				
	11 a	MISCELLANEOUS I	NCOME	-	300099	164.	164.	0.	0.
	b						201.	· .	<u>U.</u>
	C			-					
	d	All other revenue		- H					
	e	Total. Add lines 11a-11d				164.			
		Total revenue. See instru			L L	685,602.	23,988.	0.	10,580.
						000,002.	20,000	U•1	

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).

Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) (C) (D) Do not include amounts reported on lines Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 60,000 51,450 <u>3,240</u> 5,310. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)...... 78,850 70,042 208 8,600. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)..... 23,906. 23,779 51 76. 10 13,993 12,184 348. 1,461. Fees for services (non-employees): e Professional fundraising services. See Part IV, line 17. Other. (If line 11g amt exceeds 10% of line 25, column 33,585 (A) amount, list line 11g expenses on Schedule () . . . 22,006. 10,547 1,032. Advertising and promotion 12 897 797 0 100. 13 68,343 51,416 7,118 <u>9,809.</u> 14 Information technology 1,668 1,430 94 144. 15 16 45,009 41,916 384 2,709. 17 73,901 72,990 0 911. Payments of travel or entertainment expenses for any federal, state, or local Conferences, conventions, and meetings . . . 19 20 Interest 21 22 Depreciation, depletion, and amortization . . . 5,200. 0 5,200 0. 23 7,242 3,186 4,056 0. Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a COACHES____ 81,695 25 81,670 n. b REFEREE FEES 815 815 0 0... * RECREATIONAL EQUIPMENT 39,183. 39,183 0 0. d PROGRAM 2<u>58</u> 258 0 0. e All other expenses 34,427 30,496 230 3,701. Total functional expenses. Add lines 1 through 24e. . 568,972. 503,618 31,501. 33,853. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here > if following SOP 98-2 (ASC 958-720). . . .

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X End of year Beginning of year 1 176,075 293,139. 2 2 3 3 20,000. 20,655 4 Loans and other receivables from current and former officers, directors, 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 7 8 Prepaid expenses and deferred charges 4,587 9 5,795 10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 a 10b 7.067 10 c 10,867. 11 12 12 13 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 208,384 329,801 17 17 4,432. 9,219 Grants payable............ 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 Secured mortgages and notes payable to unrelated third parties 23 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . 25 Total liabilities. Add lines 17 through 25.......... 4,432 26 Organizations that follow SFAS 117 (ASC 958), check here ► x and complete Balances lines 27 through 29, and lines 33 and 34. 27 198.952 27 240,582 Temporarily restricted net assets 5,000 28 80,000. Fund] 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. ģ Capital stock or trust principal, or current funds 30 30 Net Assets 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32

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33

34

329,801 Form 990 (2014)

320,582

33

203,952

208,384

Form 990 (2014) SOCCER WITHOUT BORDERS	37861	29	Р	age 12					
Part XI Reconciliation of Net Assets									
Check if Schedule O contains a response or note to any line in this Part XI					- X				
1 Total revenue (must equal Part VIII, column (A), line 12)		1			602.				
2 Total expenses (must equal Part IX, column (A), line 25)		2			972.				
3 Revenue less expenses. Subtract line 2 from line 1									
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4			<u>630.</u> 952.				
5 Net unrealized gains (losses) on investments		5		,	2001				
6 Donated services and use of facilities		6							
7 Investment expenses		7							
8 Prior period adjustments	/	8							
9 Other changes in net assets or fund balances (explain in Schedule O)		9							
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,									
column (B))		10		20,	<u>582.</u>				
Part XII Financial Statements and Reporting									
Check if Schedule O contains a response or note to any line in this Part XII					. X				
1 Accounting method used to prepare the Form 990: Cash X Accrual Other			-	Yes	No				
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.									
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?			. 2 a	CONTROL DESIGNATION	X				
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed of separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	na								
b Were the organization's financial statements audited by an independent accountant?			. 2b	Х					
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:									
X Separate basis Consolidated basis Both consolidated and separate basis									
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	audit		. 2 c	Х					
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.									
3 a 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?									
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits			. 3b						
					<u>: </u>				

Form 990 (2014)

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is

OMB No. 1545-0047 2014

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2014

Department of the Treasury Internal Revenue Service Name of the organization

at www.irs.gov/form990. Employer identification number

SOCCER WITHOUT BORDERS 20-3786129 Part | Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 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.) 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 9 investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one 11 or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations g Provide the following information about the supported organization(s). (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 listed in your governing (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) document? Yes (A) (B) (D) (E) Total BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cal beg	endar year (or fiscal year jinning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	175,569.	135,275.	274,173.	568,559.	622,884.	1,776,460.
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 through 3	175,569.	135,275.	274,173.	568,559.	622,884.	1,776,460.
5	The portion of total contributions by each person (other than a governmental unit or publicty 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						1,776,460.
Se	ction B. Total Support						
	endar year (or fiscal year inning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	175,569.	135,275.	274,173.	568,559.	622,884.	1,776,460.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	į	gg .	7.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on						10-041-
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		- 1123				***
11	Total support. Add lines 7 through 10						1,776,460.
12	Gross receipts from related activities	es, etc (see instruc	tions)			12	
13	First five years. If the Form 990 is organization, check this box and st	for the organization for the o	n's first, second, th	nird, fourth, or fifth	tax year as a secti	on 501(c)(3)	
Sec	tion C. Computation of Pul	olic Support P	ercentage				
	Public support percentage for 2014						100.00%
15	Public support percentage from 20	13 Schedule A, Pa	rt II, line 14	• • • • • • • • •		15	100.00%
16	a 33-1/3% support test — 2014. If t and stop here. The organization q	he organization dic ualifies as a public	not check the box y supported organ	on line 13, and the	e line 14 is 33-1/39	% or more, check ti	nis box
I	33-1/3% support test — 2013. If the and stop here. The organization q	e organization did ualifies as a public	not check a box or ly supported organ	n line 13 or 16a, ar ization	nd line 15 is 33-1/3	% or more, check t	this box
17 a	a 10%-facts-and-circumstances ter or more, and if the organization me the organization meets the 'facts-an	ets the facts-and-	circumstances' test	t, check this box ar	nd stop here. Expl.	ain in Part VI how	▶ □
	10%-facts-and-circumstances termore, and if the organization me organization meets the 'facts-and-c	ets the 'facts-and-o ircumstances' test	circumstances' test The organization	i, check this box ar qualifies as a publi	id stop here. Expl cly supported orga	ain in Part VI how tenization	he ····· □
18	Private foundation. If the organiza	tion did not check	a box on line 13, 1	6a, 16b, 17a, or 17			
RΔΔ					0-6-	dula A /Cama 000	000 E3) 0044

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
	ndar year (or fiscal yr beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	and membership fees			1			
	received. (Do not include any 'unusual grants.').						
2	Gross receipts from admis-						
	sions, merchandise sold or services performed, or facilities						
	furnished in any activity that is					į	
	related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on						
5	its behalf						
J	facilities furnished by a						
	governmental unit to the organization without charge						
6	Total, Add lines 1 through 5		·		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
7 a	Amounts included on lines 1,						
	2, and 3 received from disqualified persons						
b	Amounts included on lines 2						
	and 3 received from other than disqualified persons that				ļ		
	exceed the greater of \$5,000 or						
	1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line		200				
	7c from line 6.)						
	tion B. Total Support			<u></u>	<u></u>		
	dar year (or fiscal yr beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511						
	taxes) from businesses acquired after June 30, 1975					,	
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include						
	gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11 and 12.)						
14	First five years. If the Form 990 is organization, check this box and st	for the organization	on's first, second, t	hird, fourth, or fifth	tax year as a secti	on 501(c)(3)	
Sect	tion C. Computation of Pul			.			
15	Public support percentage for 2014	4 (line 8, column (f)	divided by line 13				ક
	Public support percentage from 20					16	용
	tion D. Computation of Inv						
	Investment income percentage for						96
	Investment income percentage from						용
19 a	33-1/3% support tests $-$ 2014. If is not more than 33-1/3%, check the	the organization did is box and stop be	d not check the bo	x on line 14, and li	ne 15 is more than	33-1/3%, and line	e 17 ⊾ □
b	33-1/3% support tests -2013 . If	the organization did	d not check a box	on line 14 or line 1	9a, and line 16 is r	nore than 33-1/39	%. and □
	line 18 is not more than 33-1/3%, o	check this box and	stop here. The or	ganization qualifies	as a publicly supp	orted organizatio	n ▶
20	Private foundation. If the organiza	ation did not check	a box on line 14,	19a, or 19b, check	this box and see in	structions	▶

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A	. All	Supporting	Organizations
-----------	-------	------------	---------------

				Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain		1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	 	2		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	 	3a		
i	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination	 	3b		
4	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	 	3c		
4	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below		4a		
ı	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations		4b		
•	c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	 •	4c		
5 8	a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)		5a		
ŀ	b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		5b		
C	c Substitutions only. Was the substitution the result of an event beyond the organization's control?		5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI		6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L. (Form 990)		7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)		8		
9 a	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI		9a		
Ė	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI		9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI		9с		
0 a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below		10a		
t	Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	 •	10b		

Pá	art IV Supporting Organizations (continued)	
		Yes No
11	Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the	
	governing body of a supported organization?	11a
	b A family member of a person described in (a) above?	11b
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c
Se	ction B. Type I Supporting Organizations	
		Yes No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2
Sec	ction C. Type II Supporting Organizations	· · · · · · · · · · · · · · · · · · ·
		Yes No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1
Sec	ction D. All Type III Supporting Organizations	
		Yes No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1
. 2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3
Sec	tion E. Type III Functionally-Integrated Supporting Organizations	1 9 1 1
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):	
	□	
k	The state of the s	
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction)	ons).
2	Activities Test. Answer (a) and (b) below.	Yes No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b
3	Parent of Supported Organizations. Answer (a) and (b) below.	
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i>	3a
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	aniza	ations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on tother Type III non-functionally integrated supporting organizations must complete Section 1.	Nover ctions	nber 20, 1970. See instru A through E.	ctions. All
Sec	ction A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_ 2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3 · · · · · · · · · · · · · · · · · ·	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1 a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1 c		
	Total (add lines 1a, 1b, and 1c)	1 d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
3_	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6 	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-integrated (see instructions).	д Туре	III supporting organization	1
BAA			Schedule A (Form	n 990 or 990-EZ) 2014

Pa	rt.V. Type III Non-Functionally Integrated 509(a)(3) So	upporting Organiza	ations (continued)	
Sec	tion D — Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exempt purpos	ses		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organizatio	ns,	
3	Administrative expenses paid to accomplish exempt purposes of suppo			
_ 4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions	· · · · · · · · · · · · · · · · · · ·		
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organiza in Part VI). See instructions.	· · · · · · · · · · · · · · · · · · ·		
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1_	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014:			State of the state
a				
b			2.18	
c d	National Section 1997			
е	From 2013			
f	Total of lines 3a through e			The second secon
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			RESERVOISMENT PROPERTY OF THE
	Carryover from 2009 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f	- AND COMMERCIAL PROPERTY OF THE PROPERTY OF T		
4	Distributions for 2014 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			A STATE OF THE STA
7	Excess distributions carryover to 2015. Add lines 3j and 4c			
8	Breakdown of line 7:			
a				
b				
C		100000		
d	Excess from 2013			
е	Excess from 2014			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 2014

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

	SOCCER WITHOUT BORDERS	20-3786129
Da	rt Organizations Maintaining Donor Advised Funds or Other Similar Funds	or Accounts
# 59, C	Organizations Maintaining Donor Advised Funds or Other Similar Funds of Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.	- 1.000 a
	(a) Donor advised funds	(b) Funds and other accounts
1		(c) - Ende End onle decounts
2	Aggregate value of contributions to (during year)	
3		
4		
5	are the organization's property, subject to the organization's exclusive legal control?	· · · · · · Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be us for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose compermissible private benefit?	ed only offerring One Yes No
Pa	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 education)	torically important land area
	Protection of natural habitat Preservation of a cer	tified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of last day of the tax year.	a conservation easement on the
		Held at the End of the Tax Year
		2 a
		2 b
	c Number of conservation easements on a certified historic structure included in (a)	2 c
	d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2 d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the or tax year ►	rganization during the
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, handling of violand enforcement of the conservation easements it holds?	ations,
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements durin	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the	year year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h) and section 170(h)(4)(B)(ii)?	(4)(B)(i) · · · · · · · · · · Yes
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense st include, if applicable, the text of the footnote to the organization's financial statements that describes the conservation easements.	atement, and balance sheet, and organization's accounting for
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Othe Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.	er Similar Assets.
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement, historical treasures, or other similar assets held for public exhibition, education, or research in furthers in Part XIII, the text of the footnote to its financial statements that describes these items.	nt and balance sheet works of ance of public service, provide,
ŀ	o If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement are historical treasures, or other similar assets held for public exhibition, education, or research in furtherance following amounts relating to these items:	e of public service, provide the
	(i) Revenue 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 gramounts required to be reported under SFAS 116 (ASC 958) relating to these items:	ain, provide the following
á	a Revenue included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·	▶ \$
ŀ	Assets included in Form 990. Part X	- ¢

Part III Organizations Maintaining	Collections of Art, His	torical Treasures,	or Other Similar Ass	sets (continued)
3 Using the organization's acquisition, acce items (check all that apply):	ssion, and other records, chec	k any of the following the	at are a significant use of it	s collection
a Public exhibition	d Loar	n or exchange programs		
b Scholarly research	e Othe	er		
c Preservation for future generations				<u> </u>
4 Provide a description of the organization's Part XIII.	collections and explain how t	ney further the organizat	ion's exempt purpose in	
5 During the year, did the organization solid to be sold to raise funds rather than to be	maintained as part of the orga	nization's collection?		Yes No
Part IV Escrow and Custodial Arra line 9, or reported an amoun	i ngements. Complete if t on Form 990, Part X, lii	the organization anne 21.	swered 'Yes' to Form	990, Part IV,
1 a Is the organization an agent, trustee, cust on Form 990, Part X?			ssets not included	Yes No
b If 'Yes,' explain the arrangement in Part X	III and complete the following	able:	 	
n i i lili				Amount
c Beginning balance			<u> </u>	
d Additions during the year				
e Distributions during the year				
f Ending balance			L	
2 a Did the organization include an amount or b If 'Yes,' explain the arrangement in Part X			·	Yes No
Part V Endowment Funds. Comple	ete if the organization an	swered 'Yes' to For	m 990 Part IV line 10)
The state of the s	Current year (b) Prior year			(e) Four years back
1 a Beginning of year balance	Control year	di (c) two years bo	ck (u) Tillee years back	(c) Four years back
b Contributions				
c Net investment earnings, gains, and losses			411	
d Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses				
g End of year balance				
2 Provide the estimated percentage of the c	urrent year end balance (line 1	g, column (a)) held as:		
a Board designated or quasi-endowment				
b Permanent endowment	 			
c Temporarily restricted endowment				
The percentages in lines 2a, 2b, and 2c sh	iould equal 100%.			
3 a Are there endowment funds not in the pos organization by:	session of the organization tha	t are held and administe	red for the	Yes No
(i) unrelated organizations				3a(i)
(ii) related organizations				3a(ii)
b If 'Yes' to 3a(ii), are the related organization	ns listed as required on Scheo	lule R?		3b
4 Describe in Part XIII the intended uses of t				<u> </u>
Part VI Land, Buildings, and Equip				
Complete if the organization		990, Part IV, line 11	a. See Form 990. Par	t X. line 10.
Description of property	(a) Cost or other basis	(b) Cost or other	(c) Accumulated	(d) Book value
	(investment)	basis (other)	depreciation	(a) book value
1a Land				
ђ Buildings				
c Leasehold improvements				
d Equipment	18,600.		7,733.	10,867.
e Other				20,00,1
Total. Add lines 1a through 1e. (Column (d) mus		mn (B), line 10c.)		10,867.
BAA				le D (Form 990) 2014

		Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
<u>(F)</u>		
(G)		
(H)	-	
<u>()</u>		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) > Part VIII Investments — Program Related.		
Complete if the organization answered "	Yes' to Form 990 F	Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)	1.7	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) >		
Part IX Other Assets.		
		Part IV, line 11d. See Form 990, Part X, line 15.
(1)	scription	(b) Book value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B), I	ne 15.)	·····
Part X Other Liabilities. Complete if the organization answered 'Yes' to Fo	arm 000 Dart IV line 1"	10 or 11f Coo Form 000 Dort V line 25
(a) Description of liability	(b) Book value	Te of Th. See Form 990, Part X, line 25
(1) Federal income taxes	(b) Book value	
(2)		
(3)		
(4)		
(5)		
(5) (6)		
(5) (6) (7)		
(5) (6) (7) (8)		
(5) (6) (7) (8) (9)		
(5) (6) (7) (8) (9) (10)		
(5) (6) (7) (8) (9)		

Part XIII | Supplemental Information.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn	l.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1	739,517.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		The state of the s
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2 e	53,915.
3 Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	685,602.
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 XIII.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	685,602.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	rn.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	622,887.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d		53,915.
3 Subtract line 2e from line 1	3	568,972.
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 XIII.)		
C Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	568.972.

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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

THE ORGANIZATION IS EXEMPT FROM INCOME TAXES AS A CHARITABLE ORGANIZATION UNDER SECTION 501(C)3 OF THE INTERNAL REVENUE CODE AND IS NOT CLASSIFIED AS A PRIVATE FOUNDATION. DURING 2010, THE ORGANIZATION WAS REQUIRED TO ADOPT CERTAIN PROVISIONS OF FASB ASC 740, "INCOME TAXES" WHICH PROVIDE A NEW FRAMEWORK FOR HOW COMPANIES SHOULD RECOGNIZE, MEASURE, PRESENT AND DISCLOSE UNCERTAIN TAX POSITIONS IN THEIR FINANCIAL STATEMENTS. WITH THESE CHANGES, THE ORGANIZATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY THE TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE ORGANIZATION DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2014. AS OF

Part XIII | Supplemental Information (continued)

DECEMBER 31, 2014, THE ORGANIZATION DID NOT RECORD ANY PENALTIES OR INTEREST ASSOCIATED WITH UNCERTAIN TAX POSITIONS. THEREFORE, THE CERTAIN PROVISIONS OF FASB ASC 740, WHICH WERE ADOPTED DURING 2010, HAD NO IMPACT ON THE ORGANIZATION'S FINANCIAL STATEMENTS. THE ORGANIZATION FILES IRS FORM 990 ANNUALLY WITH THE FEDERAL GOVERNMENT AND IS STILL Pt X, Line 2 OPEN TO EXAMINATION BY TAXING AUTHORITIES FOR THE PAST THREE YEARS. FORM 990 PART VII, LINE 8C LISTS INCOME FROM FUNDRAISING EVENTS NET OF EXPENSES, FINANCIAL STATEMENTS LIST FULL AMOUNT OF FUNDRAISING INCOME UNDER REVENUE, AND SEPERATELY LIST FUNDRAISING EXPENSES WITH ALL OTHER Pt XI, Line 2d EXPENSES. FORM 990 PART VII, LINE 8C LISTS INCOME FROM FUNDRAISING EVENTS NET OF EXPENSES. FINANCIAL STATEMENTS LIST FULL AMOUNT OF FUNDRAISING INCOME UNDER REVENUE, AND SEPERATELY LIST FUNDRAISING EXPENSES WITH ALL OTHER Pt XII, Line 2d EXPENSES.

Schedule F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

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

OMB No. 1545-0047

2014

Department of the Treasury Internal Revenue Service Open to Public Inspection Name of the organization Employer identification number

SOCCER WITHOUT BORDERS 20-3786129 Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b.

For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the

United States.

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) Central America	1	6	EDUCATION	YOUTH DEVELOPMENT	74,599
(2) Sub-Saharan Africa	1	6	EDUCATION	YOUTH DEVELOPMENT	54,054
(3)					
(4)					
(5)					
(6)		***			
(7)					,
(8)					**
(9)					· · ·
(10)		~-		1474	- No.
(11)					
(12)					
(13)					
(14)					
(15)					
16)					
(17)					
3 a Sub-total	2	12			128,653.
b Total from continuation sheets to Part I					
C Totals (add lines 3a and 3b) .	2	12			129 652

128,653

Partil Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)				, , , , , , , , , , , , , , , , , , ,				N NATURE OF THE PROPERTY OF TH
(3)				Table and the				
(4)				TO THE PARTY OF TH				
(c)								7
(6)							· · · · · · · · · · · · · · · · · · ·	
(2)								
(8)					7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(9)					774444	TRACTOR:		
(10)								
(11)		118						and the
(12)								
(13)								
(14)								7
(15)								T TOTAL COLUMN
(16)								THE STATE OF THE S

Enter total number of reciplent organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities. BAA

Schedule F (Form 990) 2014

Page 3

SOCCER WITHOUT BORDERS

Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2014 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance Ξ 4 (2) <u>@</u> 3 9 8 8 (6) (10 (11) (12) (13) (14) (15) (17) (18) (16)

TEEA3503 06/13/14

Pa	rt IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	· · ☐Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No
BAA	TEEA3505 06/16/13	Schedule F (Form	990) 2014

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Pt I Line 2

FUNDS AT THE INTERNATIONAL PROGRAM SITES IN CENTRAL AMERICA AND AFRICA ARE MONITORED BY SOCCER WITHOUT BORDERS STAFF MEMBERS. IN NICARAGUA, THIS STAFF MEMBER IS A TRAINED LOCAL DIRECTOR WITH A CERTIFICATION AND DEGREE IN ACCOUNTING. IN UGANDA, THIS STAFF MEMBER IS OUR TRAINED LOCAL DIRECTOR, WITH SUPPORT FROM AN AMERICAN FULL-TIME VOLUNTEER WHO IS TRAINED AT THE SWB HEADQUARTERS IN BOSTON, MA BEFORE SERVING IN UGANDA. BOTH LOCATIONS USE AN ON-SITE LEDGER SYSTEM AND ONLINE REPORTING SYSTEM, AND COMPLY WITH SWB STANDARD OPERATING PROCEDURES. THE PRIMARY RESPONSIBILITIES OF THESE STAFF MEMBERS WITH REGARDS TO FINANCIALS ARE TO RECEIVE MONEY TRANSFERS, MAKE PAYMENTS, DOCUMENT, AND REPORT ON THESE FUNDS. CASH IS RECEIVED VIA MONEY TRANSFER AND IMMEDIATELY USED TO PAY FIXED COSTS INCLUDING RENT AND UTILITIES. THE REMAINDER OF FUNDS ARE PLACED INTO A LOCKED CASH BOX, NOTING THE EXCHANGE RATE AND DEPOSIT ON THE LEDGER. ONLY THE DIRECTOR HAS THE KEY TO THE CASH BOX, THOUGH COACHES MAY REQUEST WITHDRAWALS FOR PROGRAM ACTIVITIES WITH PERMISSION AND WITHIN THE CONSTRAINTS OF THE BUDGET. ALL WITHDRAWALS FOR ARE NOTED ON A LEDGER WITH RECEIPTS ATTACHED, IF THEY ARE AVAILABLE. AT THE END OF EACH MONTH, THE STAFF MEMBER RECONCILES THE LEDGER, RECEIPTS, AND WITHDRAWALS AGAINST THE CASH BOX AND SUBMITS AN ONLINE EXPENSE FORM TO THE FINANCE DIRECTOR AND EXECUTIVE DIRECTOR, SIGNING TO ACKNOWLEDGE THE TOTALS ARE CORRECT TO THE BEST OF THEIR KNOWLEDGE. VARIANCE IN MONTH-BY-MONTH COST, OR FROM THE BUDGET, TRIGGERS A CONVERSATION BETWEEN THE LOCAL DIRECTOR AND THE FINANCE DIRECTOR.

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047 2014

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

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

SOCCER WITHOUT BORDERS					20-378612	29	
Part I Fundraising Activities. Comp	lete if the organ	ization and	swered 'Ye	s' to Form 990, Part IV,			
1 Indicate whether the organization ra				ng activities. Check all th	nat apply.		
a Mail solicitations			е	[]			
b Internet and email solicitations			f	Solicitation of gove	-		
			-	=	=		
c Phone solicitations			g	Special fundraising	events		
d In-person solicitations							
2 a Did the organization have a written of employees listed in Form 990, Part V	or oral agreeme	nt with any	individual	(including officers, direc	tors, trustees or kev		
b If 'Yes,' list the ten highest paid indiv	iduals or entities	s (fundrais	ers) pursua	ant to agreements under	which the fundraiser is t	to be	
compensated at least \$5,000 by the							
(i) Name and address of individual	(ii) Activity	(iii) Did f	undraiser	(iv) Gross receipts from activity	(v) Amount paid to	(vi) Amount paid to	
or entity (fundraiser)		have custo	dy or control ibutions?		(or retained by) fundraiser listed in	(or retained by) organization	
		0,0000	iodions:		column (i)	organization	
		Yes	No				
·			<u> </u>				
1							
_			 		·		
2							
3							
4							
5							
				· · · · · · · · · · · · · · · · · · ·			
6							
7							

8							
9							
y							
10							
Total							
3 List all states in which the organization	on is registered o	or licensed	l to solicit c	ontributions or has beer	notified it is exempt from	n registration	
or licensing.							
							
			-				
	 -		_		- 		
							
							
 			_				
		-					

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1 DINNER	(b) Event #2	(c) Other events	(d) Total events (add column (a)		
R			(event type)	(event type)	(total number)	through column (c)		
REVENUE	1	Gross receipts	18,345.			18,345.		
Ē	2	Less: Contributions						
	3	Gross income (line 1 minus line 2)	18,345.			18,345.		
	4	Cash prizes						
_	5	Noncash prizes						
D RECT	6	Rent/facility costs						
	7	Food and beverages	2,545.			2,545.		
EXPEZSES	8	Entertainment	500.		****	500.		
N S E	9	Other direct expenses	4,720.			4,720.		
ъ	10	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from	.,					
Par	11 # 111	Gaming. Complete if the organizati						
Latin control		\$15,000 on Form 990-EZ, line 6a.		.010/11/000, 7 4/11/1	, mic 13, or reporte	d more than		
REVEN			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))		
U E	1	Gross revenue						
E	2	Cash prizes						
D P E N S E S	3	Noncash prizes						
C S T E S	4	Rent/facility costs				***************************************		
	5	Other direct expenses						
	6	Volunteer labor	Yes	Yes 8	Yes %			
	7 Direct expense summary. Add lines 2 through 5 in column (d)							
	8	Net gaming income summary. Subtract line	7 from line 1, column (d)					
9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? Yes No b If 'No,' explain:								
	10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No b If 'Yes,' explain:							

Sch	nedule G (Form 990 or 990-EZ) 2014 SOCCER WITHOUT BORDERS 20-	-3786129	Page :
11	Does the organization operate gaming activities with nonmembers?	· · · Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	Yes	 ∏No
13	Indicate the percentage of gaming activity conducted in:	1	
	a The organization's facility	13 a	oło
	b An outside facility		
14			
	Name ►		
	Address -		. — — — —
	a Does the organization have a contact with a third party from whom the organization receives gaming revenue? b If 'Yes,' enter the amount of gaming revenue received by the organization		No
	of gaming revenue retained by the third party \$ c If 'Yes,' enter name and address of the third party:		
	Name ►		
	Address •		
16	Gaming manager information:		
	Name -	· - 	 -
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	Yes	No
b	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year 🕒 \$		
Par	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additinformation (see instructions).	; (iii) and (v), ional	
	memana (coo menana),		
BAA	TEEA3703 09/16/14 Schedule G (F	orm 990 or 990-F	7) 2014

TEEA3703 09/16/14

Schedule G (Form 990 or 990-EZ) 2014

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2014

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

Open To Public Inspection

Nam	ne of the organization			·····	Employe	er identification number		
SOCCER WITHOUT BORDERS						20-3786129		
P	art I Types of Property				1			
1		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribu amounts reporte on Form 990, Part VIII, line 1	ed i	(d) Method of determining noncash contribution amount		
1	Art - Works of art							
2	Art – Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6			The property of the control of the c					
7	Boats and planes							
8	Intellectual property							
9	Securities – Publicly traded							
10								
11	Securities - Partnership, LLC, or trust interests.				-			
12								
13	•							
	Historic structures							
14	Qualified conservation contribution – Other							
15	Real estate – Residential							
16	Real estate – Commercial							
17	Real estate – Other	``	····			·····		
18	Collectibles		***	44		· · · · · · · · · · · · · · · · · · ·		
19	Food inventory				_	114		
20	Drugs and medical supplies			\	_			
21	Taxidermy					···		
22	Historical artifacts				-+			
23	Scientific specimens	·		·	_			
24	Archeological artifacts		······································					
25	Other► (EQUIPMENT) .	Х	42	20.15				
26	Other () .		42	28,15	30. -			
27	Other► () .							
28	Other () .							
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Donee A	during the tax	x year for contributions for	or which the				
					· · 29	Yes No		
	During the year, did the organization receive by contribuld for at least three years from the date of the initial purposes for the entire holding period?	contribution	, and which is not require	ed to be used for ex	vemnt	· · · · · 30a X		
k	If 'Yes,' describe the arrangement in Part II.							
31	Does the organization have a gift acceptance policy the	nat requires t	he review of any non-sta	indard contributions	s?	· · · · 31 X		
	Does the organization hire or use third parties or relations contributions?	ed organizat	ions to solicit, process, o	r sell	. .			
6	If 'Yes,' describe in Part II.							

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

describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) (2014)

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is

OMB No. 1545-0047 2014

Department of the Treasury Internal Revenue Service Name of the organization

at www.irs.gov/form990.

Open to Public Inspection

SOCCER WITHOUT BORDERS

Employer identification number 20-3786129

THE BOARD OF DIRECTORS WAS GIVEN A COPY OF THE 990 AND GIVEN A CHANCE TO

COMMENT PRIOR TO THE FILING OF THE FORM 990. Pt VI, Line 11b

DOCUMENTS ARE AVAILABLE TO THE PUBLIC BY REQUESTING ITEMS IN WRITING TO

Pt VI, Line 19 THE ORGANIZATION.

Pt XII, Line 3b THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.