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.

OMB No. 1545-0047 2013 Open to Public Inspection

Form 990 (2013)

<u>A</u>		alendar year, or tax year beginning , and ending			
В	Check if applicable:	C Name of organization		D Emp	loyer identification number
	Address change	GRASSROOT SOCCER, INC.		l	
	Name change	Doing Business As		43	3-1957920
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		phone number
H	1	198 CHURCH ST. PO BOX 712		80	2-649-2900
F	Terminated	City or town, state or province, country, and ZIP or foreign postal code		- 00	2 043 2300
L	Amended return	NORWICH VT 05055		G Gross re	eceipts\$ 7,552,60
П	Application pending	F Name and address of principal officer:		G Gloss is	ecelpis 1,332,00
	.,	THOMAS S. CLARK	H(a) Is this a gro	oup return for	subordinates? Yes X N
		198 CHURCH ST. PO BOX 712	H(b) Are all sub	ordinates in	cluded? Yes N
		NORWICH VT 05055	Victorial and an experience of		t. (see instructions)
1	Tax-exempt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527			(
J	Website: ▶ G	RASSROOTSOCCER.ORG	- Way 0		
K	Form of organization:		Year of formation: 2		
F	Part I Su	mmary	rear or formation: Z	002	M State of legal domicile: NI
	1 Briefly de	cribe the organization's mission or most significant activities:			
ø	SEE 2	ATTACHED STATEMENT #1			
anc	*				
Activities & Governance					
8	2 Check this	box			
Ö	3 Number o	box ▶ ☐ if the organization discontinued its operations or disposed of more than 2st voting members of the governing body (Part VI, line 1a)			Las
SS	4 Number o	independent voting members of the account in the factors of the account in the account in the factors of the account in the ac		. 3	13
iţį	5 Total num	independent voting members of the governing body (Part VI, line 1b)		. 4	12
:€	6 Total num	per of individuals employed in calendar year 2013 (Part V, line 2a)		. 5	39
A	72 Total upro	per of volunteers (estimate if necessary)		. 6	50
	h Not uprole	ated business revenue from Part VIII, column (C), line 12		. 7a	0
	b Net unrela	ted business taxable income from Form 990-T, line 34		. 7b	0
a)	8 Contribution	ns and grants (Part VIII, line 1h)	Prior Year		Current Year
Revenue	9 Program s	ervice revenue (Part VIII, line 2g)	7,424	_	6,657,419
3Ve	10 Investmen	income (Part VIII, column (A), lines 3, 4, and 7d)	2.0	425	220
ď	11 Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,163	-47,159
	12 Total rever	III = add lines 8 through 11 (must equal Det) (III select (A) III (A)		,273	
	13 Grants and	similar amounts paid (Port IX, column (A), line 12)	7,664		7,416,322
	14 Renefits no	similar amounts paid (Part IX, column (A), lines 1–3) id to or for members (Part IX, column (A), line 4)	422	,606	1,099,658
,	45 0 1 1	,	0.050		0
xpenses	16a Profession	ther compensation, employee benefits (Part IX, column (A), lines 5–10) al fundraising fees (Part IX, column (A), line 11e) aising expenses (Part IX, column (D), line 25) ▶ 859, 494	3,252	,756	3,677,962
ben	h Total fundr	picing expenses (Part IX, column (A), line 11e)			0
X	17 Other eyes	Proce /Port IX column (D), line 25) 859, 494			
	17 Outor expe	11363 (Fart IX, Column (A), lines 11a-110, 11f-24e)	3,555		3,328,497
	10 Povenue le	ises. Add lines 13–17 (must equal Part IX, column (A), line 25)	7,231		8,106,117
es	19 Nevenue le	ss expenses. Subtract line 18 from line 12		,603	-689,795
Net Assets or Fund Balances	20 Total asset	s (Part X line 16)	Beginning of Curre		End of Year
ASS Ba	21 Total liabilit	s (Part X, line 16)	5,950		5,360,326
E N	22 Net assets	ies (Part X, line 26) or fund balances. Subtract line 21 from line 20		,439	203,682
		nature Block	5,846	, 439	5,156,644
true	e, correct, and com	jury, I declare that I have examined this return, including accompanying schedules and statemer plete. Declaration of preparer (other than <u>officer) is based on all</u> information of which preparer ha	nts, and to the bes	t of my kno	owledge and belief, it is
		protest book adult of propage (officer than officer) as passed on all information of which preparer has	as any knowledge.		
Sign	Sign	ature of officer		lu l	1114
ler		ULOMA C CT T T T		Date	
iei		'HOMAS CLARK CEO &	FOUNDER		Ē
_	5967 12551	A STATE OF THE STA		-	-
aid		Preparer's signature	Date	Check	if PTIN
	arer UASON C.		11/12/11	self-emp	loyed P00454851
	Only Firm's name	REYNOLDS, HIX & CO., P.A.	Firm	's EIN	85-0349798
3 8 (Unity	6729 ACADEMY RD.NE STE. D			
	Firm's addres		Phor	ne no.	505-828-2900
ay t	he IRS discuss t	nis return with the preparer shown above? (see instructions)	[1110	.5 ,,5,	Yes No
or P	aperwork Reducti	on Act Notice, see the separate instructions.			Form 990 (2013)
					FORD JJU (2013)

rm 990 (201	3) GRASSROOT SO	CCER, INC.	43-1957920)	Page
Part III	Check if Schedule O.	n Service Accomplishments			
Briefly d	escribe the organization's mis	ontains a response or note to	any line in this Part III		
SEE A	TTACHED STATEME	NT #1			
		985 m. 165 m			
Did the c	organization undertake any sig	nificant program services during the	year which were not listed on th	9	
prior For	m 990 or 990-EZ?			П	Yes X No
		on conedule O.		·······	100 21 110
Did the o	rganization cease conducting	, or make significant changes in how	it conducts, any program		
services					Yes X No
Describe	describe triese crianges on St	nedule O.			_
evnenses	Section 501(c)(3) and 501(c)	ervice accomplishments for each of it	s three largest program services	s, as measured by	
the total	expenses and revenue if any	(4) organizations are required to rep	ort the amount of grants and all	ocations to others,	
uno totali	oxponedo, and revenue, it any	, for each program service reported.			
(Code:) (Expenses \$	874,734 including grant	o of ¢	·	
THER	ACTIVITIES - S	EE ATTACHED STATEM	H) (Revenue \$	

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· · · · · · · · · · · · · · · · · · ·	······································	688,153 including grants		••••••••••••••••••••••••••••••••	
		(******************************			

					• • • • • • • • • • • • • • • • • • • •
Code:) (Expenses \$	4,284,091 including grants SEE ATTACHED STATE	of \$ 1.099.658) (Povonuo ¢	
UCATI	NG CHILDREN -	SEE ATTACHED STATE	MENT #1) (Nevenue \$	
		***************************************	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		

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• • • • • • • • • • • • • • • • • • • •					
Nh oz					
	am services. (Describe in Sch				
expenses	am service expenses ▶	including grants of \$ 5,846,978) (Revenue \$)	
progre	Solvior exhelises	3,040,918			

	1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	_		Yes	N
	complete contequie A			1	
	2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of			X	
			2	Χ	
	sandados for public officer if res, complete Schedule C. Part I				
	4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		3		X
	and the state of t				
	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives		4		X
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,				
	Therefore	1			
	6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		5		X
	have the right to provide advice on the distribution or investment of accounts for which donors				
	"Yes," complete Schedule D. Part I				
	"Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	L	6		X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar to be a similar to be				
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	[]	7		X
	complete Schedule D. Part III				
ç	complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability: serve as a	8	3		X
	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	1			
10	Did the organization, directly or through a related organization, held accepts in the control of	9			X
F-14-10-20	Did the organization, directly or through a related organization, hold assets in temporarily restricted		_		
11	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D.	10			X
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.				
	This is a supplicable.				
7.4		000000	***	·	
3	complete Scriedule D, Part VI	11:	a X	.	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	· - '''	a 25	+	_
	or to total description in Fait A, line 10? If "Yes." complete Schedulo D. Bost VIII	111		١,	X
		111	,		7
c	or no total assets reported in Part X, line 16? If "Yes." complete Schedule D. Bost VIII	110		,	<i>y</i>
	bid the organization report an amount for other assets in Part X line 15 that is 5% or more of the base.	-	-	+	<u>X</u> _
	i oportod in i dit A, ilile 10; il Tes complete Schodulo D. Do-t IV	110			,
e	and organization report an amount for other liabilities in Part Y line 252 if "Vee "	110			<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		+-	<_
40-	3 made of a made of a made of a made of the made of th	1445	A s		,
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	-	12	_
	anisatio B, ratio XI aliu XII	100	37		
b		12a	X	+-	_
		1.0		1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	12b	-	X	_
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from accordance.			X	_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a	X		_
	randraising, business. Investment, and program conting out the second of				
	ioroign investments valued at \$100,000 or more? If "Yes " complete Schodulo E. Dorte L. J. 104			-	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b	X	-	
	and IV				
16	Did the organization report on Part IX column (A) line 3 mars than 65 and 4	15	X		_
	accordance to or for foreign individuals? If "Yes," complete Schedule F. Parte III and IV				
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		X	_
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G. Part I (see instructions)				
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		X	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G. Part II				_
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	X		_
	If "Yes," complete Schedule G. Part III				105
20a	Did the organization operate one or more hospital facilities? If "You" complete Out to the control of the contr	19		X	
_b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		Χ	
	statements to this return?	20b		1	_

Part IV Checklist of Required Schedules (continued)

22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes." complete Schedule I. Parts Land II.	2	Did the organization report more than \$5,000 of grants as all as a standard or a stand		Yes	s No
Due the organization report more than \$5,000 of gramts or other assistance to individuals in the United States on Part IX, column (A), lace 2 if Y-reys, complete Schedule I, Part I and III 2D to the organization answer "Yes to Part VII, Section A, line 3, 4, or 5 about compensation of the organizations current and former officers, discotors, frustesses, key employees, and highest compensated employees? If "Yes," complete Schedule I, experimental and the state of the state day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is into 25a 2d 2d and complete Schedule Is Schedule Is Into 25a 2d 2d and complete Schedule Is Schedule Is Into 25a 2d 2d and complete Schedule Into 25a 2d 2d and 2d 2d and complete Schedule Into 25a 2d 2d and 2d 2d and complete Schedule Into 25a 2d 2d and 2d 2d 2d and 2d 2d 2d and 2d		Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A) line 12 if "You" complete Salvadata II. Provided to the control of the cont			
or in all tris, counting All, linke 27 in "Yes", complete Schedule I, Parts I and III 22	22	Did the organization report more than \$5,000 of grapts or other applicance to both the state of	2	1	X
Dut the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former offices, directors, furstees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X Z 24 Did the organization has at tax-exampt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complote Schedule K. If "No." go to line 25a 24a X 10 the organization inwest any proceeds of Lax-exampt bonds beyond a temporary period exception? 24b 24a X 10 the organization maintain an escove account other than a refunding escrow at any time during the year? 24b 10 the desses any lax-exampt bonds? 24c 10 bit the organization act as an "on behalf of issuer for bonds outstanding at any time during the year? 24c 24d 25a Section 591((3)) and 51((6)) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? ("Yes," complete Schedule L. Part I wis a second that the transaction has not been reported on any of the organization's prior Forms 990 or 900-E27? If "Yes," complete Schedule L. Part I I organization and that the transaction has not been reported on any of the organization's prior Forms 990 or 900-E27? If "Yes," complete Schedule L. Part I I organization proport any amount on Part X, line 5, 6, or 22 for receivables from or payablos to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L. Part II I organization part yet to a business transaction with not or 35% controlled employees or other assistance to an officer, director, trustee, key employee (or a family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV 25a X X 25b and 25b and 25c an		UII Edit IA, COlumn (A) line 27 if "Yee" complete Cohedula I Dura I unit			
on injunization is current and former officers, directors, trustees, key employees, and highest compensated employees? If Yes, "complete Schedule I, and is a with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If Yes," answer lines 24b through 24d and complete Schedule K. If No., "go to line 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year defease any tax-exempt bonds? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24d Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d Did the organization and under the year of the organization and under the year of the organization and under the year and the organization and under the year and the organization and under the year 24d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has no to bean reported on any of the organization's prior Forms 930 or 990-E2? If "Yes," complete Schedule I, Part I Did the organization and that the transaction has no to bean reported on any of the organization's prior Forms 930 or 990-E2? If "Yes," complete Schedule I, Part I Did the organization and year 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? If so, complete Schedule I, Part II 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 a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV 27	23	Did the organization answer "Yes" to Part VII. Section A line 3.4 or 5 about componential of the	2	2	X
empoyees "in "res, complete Schedule J 2a Did the organization have at tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24 and complete Schedule K. If "No.", go to line 25c 2b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 2d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 2d Did the organization act as an "on behalf of lisuer for bonds outstanding at any time during the year? 2d Did the organization act as an "on behalf of lisuer for bonds outstanding at any time during the year? 2d Did the organization act that it engaged in an excess benefit transaction with a disqualified person during the year? (I'Yes," complete Schedule L. Part I 2i Did the organization aver 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 2b Did the organization aver that it engaged in an excess benefit transaction or year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 2b Did the organization provide a grant or Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustees, key employees, or discussified persons? If it so, complete Schedule L, Part II 2c Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part II) 27 A verse of family member of any of these persons? If Yes," complete Schedule L, Part II 27 A current or former officer, director, fustee, or key employee (or a family member therord) 28 Was the organization and prior to former officer, director, fustee, or key employee (or a family member therord) 28 A current or former officer, dir		organization's current and former officers, directors, trustees, key employees, and highest several and former officers.			
24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, Intelligent was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K, If "No," go to line 25a b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c) Did the organization mentalian an escrew account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d) Did the organization as an "on behalf of issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II 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 900 or 990-E2? If "Yes," complete Schedule L, Part II 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, trusteses, key employees, or disqualified persons? If so, complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, furestee, key employee, substantial contributor or remployee thereof, a grant selection committee member, or to a 35% controlled entity of family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X Was the organization provide a grant or other assistance to an online, director, furestee, key employee, substantial contributors or remployee thereof, a grant selection committee member, or to a 35% controlled entity of family member of any of these persons? If "Yes," complete Schedule L, Part IV Was the organization the promptove thereof, a grant selection committee to the process of the selection of the				11 /	
Since the property of the last day of the year, that was issued after December 31, 2002/1 ff "Yes," answer lines 24b Did the organization invest any proceeds of tax-exempt bands beyond a temporary period exception? 2db Did the organization invest any proceeds of tax-exempt bands beyond a temporary period exception? 2db Did the organization large that in the process of tax-exempt bands beyond a temporary period exception? 2dc Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 2dc Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 2dc Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 2dc Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 2dc Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 2dc Did the organization act be 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-E2? If "Yes," complete Schedule I., Part II 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, director, trustee, key employees, or discussified persons? If yes, complete Schedule I., Part III Did the organization provide a grant or other assistance to an officer, director, trustee, we 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 I., Part IV 2as A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV 2a A current or former officer, director, frustee, or key employee? If Yes, complete Schedule I., Part IV 2a A current or former officer, director, fruste	24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	2	3 X	
b. Did the organization maintain an escrow account other than a refunding escrow at any time during the year Did the organization maintain an escrow account other than a refunding escrow at any time during the year Did the organization act as an *on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization act as an *on behalf of issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? if Yes, organization engage 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 sprior Forms 980 or 990-E27 If Yes,* complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payablos to any current or former officers, directors, trustees, key employees, highest compensated amployees, or disqualified persons? If so, complete Schedule L, Part II Did the organization report any of these persons? If Yes,* complete Schedule L, Part III Did the organization or any of these persons? If Yes,* complete Schedule L, Part III 27 X X Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If Yes,* complete Schedule L, Part IV Did the organization reporte more than \$250,001 in non-cash form of the following parties (see Schedule L, Part IV A current or former officer, director, trustee, or key employee? If Yes,* complete Schedule L, Part IV Did the organization receive more than \$250,001 in non-cash contributions? If Yes,* complete Schedule L, Part IV Did the organization receive more than \$250,001 in non-cash contributions? If Yes,* complete Schedule N, Part II Did the organization value of the part of the part of the part of the part of the		\$100,000 as of the last day of the year, that was issued after December 31, 20022 If "Vos." appropriate 24			
b Did the organization invest any proceeds of flax-exempt bonds beyond a temporary period exception? 2db		unough 24d and complete Schedule K. If "No." go to line 25a			
to defease any tax-exempt bonds? Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d		b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24		X
Obtenesses any law-exempt bonds? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Sas Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage 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 I., Part I 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? If so, complete Schedule I., Part II II Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If so, complete Schedule I., Part III 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If so, complete Schedule I., Part III 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule I., Part III 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule I., Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV 29 An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., 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 more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization sell, exchange, dispose of, or transfer more than \$25% of its net assets? If "Yes," complete Schedule M, Part I. 30 Did the organization sell, exchange, di		Did the organization maintain an escrow account other than a refunding escrow at any time during the year	. 24	b	-
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I 1 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 spons 990 or 990-E2? 25b X 27c		to delease any tax-exempt bonds?			
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 transaction has not been reported on any of the organization's prior Forms 990 or 890-E2? If "Yes," complete Schedule L, Part I 25b X 26b 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, fusetes, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II 27c 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 27c X 28c Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV and IV) instructions for applicable filling thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28d X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28d X A an entry of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28d X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28d X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29d X Did the organization injudiate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M 29d X Did the organization organization organized as separate from the organization under Regulation secure or particular or than 50 far in statistical treasures, or other similar asse		and organization dot as all on behalf of issuer for bonds outstanding at any time during the year?	. 24		-
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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 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1 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 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 V Is and the organization complete Schedule O and provide explanations in Schedule O for Part V Is and the Island of the organization complete Schedule O and provide explanations in Schedule O for Part V Is and the Island of the organization complete Schedule O and provide explanations in Schedule O for Part V Is and the Island of the Island of the Organization complete Schedule O and provide explanations in Schedule O for Part V Island O for Par		Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
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sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33	33	Did the organization own 100% of an entity disregarded as a second of the organization own 100% of an entity disregarded as a second of the organization own 100%	32		X
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Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI lines 44by. 37 X	37	Did the organization conduct more than 5% of its activities through an entity that is not a related experiently.	36		<u>X</u>
38 Did the organization complete Schedule O and provide explanations in Schedule O for Port VI. lines 44h		and that is treated as a partnership for federal income tax purposes? If "Yes " complete School D			
		Part VI			
19? Note. All Form 990 filers are required to complete Schedule O	38		37		<u>X</u>
		19? Note. All Form 990 filers are required to complete Schedule O	20	Y	

Part 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 X Yes No Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return ________2a If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 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 If "Yes," enter the name of the foreign country: ▶ SEE SCHEDULE O X 4a See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? C 5c 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? X 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or b gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 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? X 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? g 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 a 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b 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 Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O DAA

Form 990 (2013) GRASSROOT SOCCER, INC. 43-1957920 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. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Χ 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 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 X 15a Other officers or key employees of the organization 15b X If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a If "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? Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ▶ NM, VT
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 - \overline{X} Own website \overline{X} Another's website \overline{X} Upon request \overline{X} Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ ANGELA M. CARPENTER 198 CHURCH ST. PO BOX 712

VT 05055

802-649-2900

Form 990 (2013) GRASSROOT SOCCER, INC.	Form	990	(2013)	GRASSROOT	SOCCER.	TNC
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43-1957920

Page 7

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors	<u> </u>
14	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	_

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for	(d bc of	o not x, unl ficer a	Pos check ess pe	C) sition more erson directo	than o	one n an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) THOMAS S.CLARK	40.00									
CHIEF EXEC OFFICER	40.00	X		Х				147 504	•	
(2) KEVIN BORGMANN	0.00	Λ		Λ			_	147,594	0	43,207
SECRETARY	0.00	Х		Х				0	0	
(3) TOM CROTTY	0,00	2.1		21				0	0	0
BOARD CHAIR	0.00	Х		Х				0	0	0
(4) GREGG LEMKAU	22 72 11							ű	Ŭ	<u> </u>
BOARD MEMBER	0.00	Х						0	0	0
(5) ANGELA MWANZA BOARD MEMBER	0.00	Х						0	0	0
(6) MATT RIGHTMIRE								U	O	<u> </u>
BOARD MEMBER	0.00	Х						0	0	0
(7) JONATHAN KLEIN	0.00									
BOARD MEMBER	0.00	Х						0	0	0
(8) MICHEL SIDIBE BOARD MEMBER	0.00	Х						0	0	0
(9) PETER GRIEVE									Ŭ	0
BOARD MEMBER	0.00	Х						0	0	0
(10) SEB BISHOP	0.00									
BOARD MEMBER	0.00	Х						0	0	0
(11) VUYELWA MAQUBELA	0.00									
BOARD MEMBER		Х						0	0	0
et e										Form 990 (2013)

(A) Name and title	(B) Average hours per week	(d bo	o not	Po: check ess pe	c) sition more	than o	one i an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below dotted line)	or director		Officer	Key employee	Highest compensated employee	ee) Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(12) CYNTHIA CARROLL	0.00									
BOARD MEMBER	0.00	X						0		
(13) JENNIFER DIAMONI								0	0	
BOARD MEMBER	0.00	Х								
(14) SUSAN SMITH ELLI		Λ						0	0	
BOARD MEMBER	0.00	Х						0	0	(
(15) ROBERT A. ADAMS	40.00								Ü	
CHIEF OPER OFFICER (16) JASON HIX	0.00			Χ				224,793	0	38,113
MDHAOMDED	0.00									
TREASURER (17) GEORGE LIGHTBODY	0.00			Х		-	-	0	0	0
TREASURER	0.00		3	Х				0	0	0
(18) JULIE O'BRIEN	40.00								Ü	0
CHIEF DEVEL OFFICER (19) GERHARD K. FRIED	40.00 0.00 RTCH					Х		148,978	0	41,569
EXECUTIVE DIRECTOR	40.00					Х		109,190	0	25 471
1b Sub-total							•	630,555	U	35,471 158,360
c Total from continuation sheet	s to Part VII, S	ectio	n A				-	630,555		
2 Total number of individuals (incl reportable compensation from the compensation from the compensation).	uding but not lin	nited	to th	ose	liste	d ab	ove)	who received more than \$	100,000 in	158,360
3 Did the organization list any form employee on line 1a? If "Yes," c	mer officer, dire	ctor	or tri	uste	e, ke	y em	ploy	ree, or highest compensate	ed	Yes No
4 For any individual listed on line organization and related organiz	1a, is the sum o	f repo	ortab	le co	omp	ensai	ion :	nnieta Schadula I for auch	11	3 X
individual 5 Did any person listed on line 1a for services rendered to the orga	receive or accru	ie coi	mpe	nsati	on f	rom a		inrelated organization or in	·····	4 X
Section B. Independent Contractors										5 X
Complete this table for your five compensation from the organiza	highest comper	nsate	d ind	epe	nder	nt cor	ntrac	tors that received more that	an \$100,000 of	11
Name and bus	A) siness address	проп	outio	11 101	uic	Cale	iluai	year ending with or within (E	the organization's tax year 3) of services	(C) Compensation
								Description	or services	Compensation
						+				
2 Total number of independent con received more than \$100,000 of con	tractors (includi	ng bu	it not	t limi	ted	to the	se I	isted above) who		
	portoution II	Jill (I	0	yanı	Lall(JII			0	

Form 990 (2013) GRASSROOT SOCCER, INC. 43-1957920 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (B) Related or (C) Unrelated (D) Revenue excluded from tax exempt function business under sections 512-514 revenue Grants mounts revenue 1a Federated campaigns 1a b Membership dues 1b Program Service Revenue Contributions, Gifts, Gra c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e 30,940 f All other contributions, gifts, grants, and similar amounts not included above 6,626,479 \$ 151,451 g Noncash contributions included in lines 1a-1f: Total. Add lines 1a-1f_..... 6,657,419 Busn. Code SALES 220 220 f All other program service revenue Total. Add lines 2a-2f 220 Investment income (including dividends, interest, and other similar amounts) -47,159-47,159Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6a Gross rents b Less: rental exps. c Rental inc. or (loss) Net rental income or (loss) D Gross amount from (i) Securities (ii) Other sales of assets other than inventor Less: cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 694,827 b Less: direct expenses 136,284 c Net income or (loss) from fundraising events 558,543 9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities . 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory . Miscellaneous Revenue Busn. Code 11a OTHER REVENUE 247,299 247,299

247,299

0

7,416,322

0

...... d All other revenue e Total. Add lines 11a-11d

Total revenue. See instructions.

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 Do not include amounts reported on lines 6b, (A) Total expenses (B) Program service expenses (C) (D) Fundraising Management and 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 1,099,658 1,099,658 Benefits paid to or for members 4 Compensation of current officers, directors. trustees, and key employees 372,387 80,041 216,597 75,749 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 2,732,680 1,507,841 755,070 469,769 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 417,937 167,130 199,186 51,621 Payroll taxes 10 154,958 68,540 51,937 34,481 11 Fees for services (non-employees): Management 127,936 112,404 15,532 Legal 2,050 2,050 Accounting 62,184 42,616 19,568 Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion 12 29,863 26,993 1.619 1,251 Office expenses 13 Information technology 14 15 Royalties Occupancy 16 280,029 218,901 29,546 31,582 17 Travel 623,141 515,078 28,551 79,512 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 254,883 224,965 17,928 11,990 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 30,170 14,812 9,932 5,426 23 Insurance 59,054 39,630 12,515 6,909 24 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 CONTRACT LABOR 854,055 834,916 6,558 12,581 PROGRAM SUPPLIES 360,972 360,910 40 22 c TELECOMMUNICATIONS 130,663 114,028 6,941 9,694 PRINTING AND REPRODUCTION 119,900 107,668 4,236 7,996 e All other expenses 393,597 310,847 37,371 45,379 Total functional expenses. Add lines 1 through 24e 8,106,117 5,846,978 1,399,645 859,494 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 ▶ 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 Dort V			
		Shook is Constitute O Contains a response of note	to any	me in uns Part X	(A)	т	/5)
					Beginning of year		(B) End of year
	1	Cash—non-interest bearing			964,314	1	
	2	Savings and temporary cash investments			509,784		
	3	Pledges and grants receivable, net			4,088,611	_	
- 1	4	Accounts receivable, net			142,073		THE REPORT OF THE PARTY OF THE
	5	Loans and other receivables from current and former of	ficers.	directors	112/073	-	119,420
- 1		trustees, key employees, and highest compensated em					
		Complete Part II of Schodula I				5	
	6	Loans and other receivables from other disqualified pers	sons (a	s defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B),	and co	ntributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary	employ	ees' beneficiary			
ts		organizations (see instructions). Complete Part II of Sch	nedule l	L		6	
Assets	7	Notes and loans receivable, net		*****************		7	
Ϋ́	8	Inventories for sale or use		***************************************	111,115	_	107,667
	9	Prepaid expenses and deferred charges		60,565		67,452	
	10a	Land, buildings, and equipment: cost or			00/303		07,432
		other basis. Complete Part VI of Schedule D	10a	226,390			
	b	Less: accumulated depreciation	10b	186,901	49,871	10c	39,489
la la	11	Investments—publicly traded securities			13/011	11	35,405
	12	Investments—other securities. See Part IV, line 11		12			
	13	Investments—program-related. See Part IV, line 11		13			
198	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			24,545		28,280
	16	Total assets. Add lines 1 through 15 (must equal line 34	1)		5,950,878		5,360,326
	17	Accounts payable and accrued expenses			104,439		203,682
	18	Grants payable			18	200,002	
1	19	Deferred revenue			19	'	
2	20	Tax-exempt bond liabilities				20	
2	21	Escrow or custodial account liability. Complete Part IV of	lule D		21		
se 2	22	Loans and other payables to current and former officers,	directo	ors,			
Liabilities		trustees, key employees, highest compensated employe	es, and	3			
iab		disqualified persons. Complete Part II of Schedule L				22	
4	23	Secured mortgages and notes payable to unrelated third	parties			23	
	24	Unsecured notes and loans payable to unrelated third pa	rties			24	
2	25	Other liabilities (including federal income tax, payables to	relate	d third			
		parties, and other liabilities not included on lines 17-24).					
		of Schedule D				25	
- 2	26	Total liabilities. Add lines 17 through 25			104,439	26	203,682
S		Organizations that follow SFAS 117 (ASC 958), check	here I	► X and			
و ا د		complete lines 27 through 29, and lines 33 and 34.					
ala		Unrestricted net assets			891,681	27	204,480
9 2	8	Temporarily restricted net assets			4,954,758	28	4,952,164
<u>.</u> 5 4	9	Permanently restricted net assets				29	
<u> </u>		Organizations that do not follow SFAS 117 (ASC 958),	, check	there ▶ 📗 and			
ts		complete lines 30 through 34.					
Net Assets or Fund Balances	4	Capital stock or trust principal, or current funds	·····			30	
3 A	1	Paid-in or capital surplus, or land, building, or equipment	fund			31	
	2	Retained earnings, endowment, accumulated income, or	other fo	unds		32	
3	3	Total net assets or fund balances			5,846,439	33	5,156,644
3	4	Total liabilities and net assets/fund balances			5,950,878	34	5,360,326

For	m 990 (2013) GRASSROOT SOCCER, INC. 43-1957920			P	age 12
P	art XI Reconciliation of Net Assets				-30 12
_	Check if Schedule O contains a response or note to any line in this Part XI	80 F			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7.4	16.	322
2	rotal expenses (must equal Part IX, column (A), line 25)	2			117
3	Revenue less expenses. Subtract line 2 from line 1	3			795
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			439
5	Net unrealized gains (losses) on investments	5	0/0	10/	100
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	3			
	33, column (B))	10	5,1	56	611
Pa	art XII Financial Statements and Reporting	10	J, 1	50,	044
******	Check if Schedule O contains a response or note to any line in this Part XII				
	a response of note to any line in the rate Air			C	
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.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				V
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		2a		I X
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
h				3.7	
~	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		2b	Χ	
	separate basis, consolidated basis, or both:				
U	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	***************************************
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
2-					
Sa	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				1
1.	the Single Audit Act and OMB Circular A-133?		3a	X	
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	X	ĺ

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 at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

GRASSROOT SOCCER, INC.

Employer identification number

P	art IRe	ason for Public Chari	ty Status (All organization	ns must	comple	te this	nart)	Soo in	3-19	3/92	20		
The	organization is	not a private foundation beca	ause it is: (For lines 1 through 1	1 check o	only one h	nov)	part.)	See II	istructi	ons.			
1	A church,	convention of churches, or a	ssociation of churches describe	ed in sact	ion 170/k)(4)(A)(es.						
2	A school of	lescribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)	ou iii seci	170(1)(1)(A)(1).						
3	A hospital	or a cooperative hospital ser	rvice organization described in	saction 1	70/6\/4\/	A\/:::\							
4	A medical	research organization opera	ted in conjunction with a beauty	section i	70(D)(1)(A	4)(111).							
	city, and s	tate:	ted in conjunction with a hospita	ai describ	ea in sec	tion 170)(b)(1)(A)(iii). E	nter the	hospita	ıl's nam	ne,	
5			it of a college or university over										
	section 1	70(b)(1)(A)(iv). (Complete Pa	it of a college or university owner	ea or oper	rated by a	govern	mental u	nit des	cribed ir	1			
6													
7	X An organiz	ration that normally receives	governmental unit described in	section	170(b)(1)	(A)(v).							
		in section 170(b)(1)(A)(vi). (a substantial part of its support	from a go	vernmen	tal unit d	or from the	ne gene	eral publ	ic			
8	A commun	ity trust described in as attach	Complete Part II.)	100000									
9	An organiz	ation that normally reselves	170(b)(1)(A)(vi). (Complete Pa	art II.)									
	receipts fro	anon mat normally receives:	(1) more than 33 1/3% of its su	pport fror	n contribu	utions, m	nembers	hip fees	s, and g	ross			
	Support fro	m gross invostment in serve	empt functions—subject to certa	ain except	ions, and	(2) no r	nore tha	n 33 1/3	3% of its	3			
	acquired by	the organization after two	and unrelated business taxable	income (less secti	on 511 t	ax) from	busine	esses				
10	An organiz	etion organized and an area.	30, 1975. See section 509(a)(2	2). (Comp	lete Part	III.)							
11	An organize	ation organized and operated	d exclusively to test for public sa	afety. See	section	509(a)(4	1).						
	Durnoses o	f one or more publicly suppo	exclusively for the benefit of, to	o perform	the funct	ions of,	or to car	ry out t	he				
	509(a)(3) (Theck the box that describes	rted organizations described in	section 5	09(a)(1) o	r sectio	n 509(a)	(2). See	e sectio	n			
	a Typ	be I b Type II	the type of supporting organiza	ition and	complete	lines 11	e throug	h 11h.					
е			c Type III–Functio	nally integ	grated	d	Ту	pe III-N	lon-func	tionally	integra	ated	
	other than f	oundation managers and ath	ganization is not controlled dire	ctly or inc	lirectly by	one or	more dis	qualifie	d perso	ns			
	or section 5	00/21/21	er than one or more publicly su	pported o	rganizatio	ons desc	cribed in	section	509(a)	(1)			
f													
•	organization	, check this box	ermination from the IRS that it i	s a Type	I, Type II,	or Type	III supp	orting					
a													
g	following pe	orenno?	ation accepted any gift or contril	bution fro	m any of	the							
	(iii) hole	on who directly or indirectly o	ontrols, either alone or together	with pers	ons desc	ribed in	(ii) and					Yes	No
	(ii) A famile	w, the governing body of the	supported organization?								11g(i)		
	(11)	monibor of a person descri	bed iii (i) above?								11g(ii)		
h	Provide the	following information at and	described in (i) or (ii) above?								11g(iii)		
(0.1	Name of supported		the supported organization(s).	200 C - 41 C C C									
(7)	organization	(ii) EIN	(iii) Type of organization (described on lines 1–9		organization		you notify		Is the	(vii)	Amount o	of moneta	ary
			above or IRC section	1.717	isted in your document?		nization in of your		tion in col. ized in the		suppo	ort	
		1	(see instructions))			sup	port?		S.?				
(A)				Yes	No	Yes	No	Yes	No				
(, ,)		l II											
(B)													
(0)													
(C)													
(0)													
(D)													
(D)													
/E)						_							
(E)													
Total													
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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.)

	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5,759,272	7,087,997	5,181,763	7,424,081	6,657,419	32,110,532
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	5,759,272	7,087,997	5,181,763	7,424,081	6,657,419	32,110,532
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount					9,551,7123	92,110,332
6	shown on line 11, column (f)						5,808,594
	Public support. Subtract line 5 from line 4.						26,301,938
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(a) 2011	(4) 0040	(10040	
7	Amounts from line 4			(c) 2011	(d) 2012	(e) 2013	(f) Total
8	Gross income from interest, dividends,	5,759,272	7,087,997	5,181,763	7,424,081	6,657,419	32,110,532
	payments received on securities loans, rents, royalties and income from similar sources	20,493	5,586	-117,608	-38,163	-47,159	-176,851
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10			57,379	168,825	247,519	473,723
12	Gross receipts from related activities, etc.	(see instructions)				1	32,407,404
13	First five years. If the Form 990 is for the	organization's first	cocond third for				1,804,460
5.5	organization, check this box and stop here	organization s ilist	, second, tilita, lot	rtin, or intin tax yea	r as a section 501(c)(3)	. —
Sec	tion C. Computation of Public Su	pport Percent	age				
14	Public support percentage for 2013 (line 6,	column (f) divided	by line 11 column) (f))		14	01 1 50/
15	Public support percentage from 2012 Sche	edule A. Part II. line	: 14		• • • • • • • • • • • • • • • • • • • •	15	81.16%
16a	Public support percentage from 2012 Sche 33 1/3% support test—2013. If the organi	zation did not ched	k the box on line 1	3. and line 14 is 3	3 1/3% or more, ch	neck this	80.57 %
	box and stop here. The organization quali	fies as a publicly si	upported organizat				▶ [X]
b	33 1/3% support test-2012. If the organi	zation did not chec	k a box on line 13	or 16a, and line 15	5 is 33 1/3% or mo	re	
	check this box and stop here. The organiz	ation qualifies as a	publicly supported	d organization	3 10 00 17070 OF IIIO	0,	NП
17a	10%-facts-and-circumstances test—201	3. If the organization	n did not check a	box on line 13 16	or 16h, and line		
	10% or more, and if the organization meets	s the "facts-and-cire	cumstances" test.	check this box and	ston here Evolai	n in	
	Part IV how the organization meets the "fac	cts-and-circumstan	ces" test. The orga	anization qualifies	as a publicly suppo	orted	
	organization						▶ □
b	10%-facts-and-circumstances test—201	2. If the organization	n did not check a	box on line 13, 16	a. 16b. or 17a. and	line	
	15 is 10% or more, and if the organization	meets the "facts-ar	nd-circumstances"	test, check this bo	x and ston here	iiio	
	Explain in Part IV how the organization me	ets the "facts-and-o	circumstances" tes	t. The organization	qualifies as a nub	licly	
	and the second s				A STATE OF THE PARTY OF THE PAR		▶ □
8	Private foundation. If the organization did	not check a box or	line 13, 16a, 16b	, 17a, or 17b, ched	k this box and see		r ⊔
	instructions	VIII.			and out		• □
	were and the state of the state						········ —

Schedule A (Form 990 or 990-EZ) 2013 GRASSROOT SOCCER, INC.

Part III Support Schedule for Organizations Described in Sec

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.)

Se	ction A. Public Support	quality direct	trio tooto notou	bolow, please	complete Fart	1.)	
Cal	endar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			(,,=,,,	(4) 2012	(0) 2010	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
800	tion B. Total Support		1				
	ndar year (or fiscal year beginning in)	/) 0000		Waterwood a			
9	Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
10a	Gross income from interest, dividends,						
IVa	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						
С	Add lines 10a and 10b						
1	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
3	Total support. (Add lines 9, 10c, 11, and 12.)						
4	First five years. If the Form 990 is for the	organization's first	second, third, fou	rth or fifth tay yea	r as a section 501	(0)(3)	-
	organization, check this box and stop here						▶ □
ec	tion C. Computation of Public Su	pport Percent	age				
5	Public support percentage for 2013 (line 8,	column (f) divided	by line 13, column	(f))		15	%
6	rubile support percentage from 2012 Sche	dule A, Part III, lin	e 15	****************			%
	non D. Computation of investmen	nt income Per	centage				
7 8	Investment income percentage for 2013 (lin	ie 10c, column (f)	divided by line 13,	column (f))		17	%
	investment income percentage from 2012	Schedule A, Part II	II, line 17			18	%
Ja	oo now support tests—2013. If the organ	lization did not che	eck the box on line	14, and line 15 is i	more than 33 1/3%	and line	
b	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2012. If the organ	ization did not che	rne organization qu eck a box on line 14	or line 102 and "	iy supported organ	ization	▶ ∐
	line 18 is not more than 33 1/3%, check this	s box and stop he	re. The organization	n qualifies as a ni	ine to is more than	ranization	▶ □
0	Private foundation. If the organization did	not check a box o	n line 14, 19a, or 1	9b, check this box	and see instruction	941112411011 ns	······ 【

Schedule A (F	orm 990 or 990-E	Z) 2013 GRAS	SROOT SOC	CER, INC.		43-1957920	Page
Part IV	Supplement	al Information.	Provide the e	xplanations red	quired by Part II, lin information. (See i	e 10: Part II, line 17a or 1	7b; and
PART I	I, LINE 1	0 - OTHER	INCOME [ETAIL			
CONTRA	CT SERVIC	ES	••••••	\$	344,050		***********
REIMBU	RSED EXPE	NSES		\$	84,297		
MISCEL	LANEOUS			\$	45,376	***************************************	***********
	*****************				*****************	•••••	
• • • • • • • • • • • • • • • • • • • •							
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Employer identification number

2013

GRASSROOT SOC		43-1957920				
Organization type (check on	e):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
Check if your organization is c Note. Only a section 501(c)(7) instructions.	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	ı. See				
General Rule						
For an organization fili property) from any one	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mone contributor. Complete Parts I and II.	ey or				
Special Rules						
under sections 509(a)(organization filing Form 990 or 990-EZ that met the 33 ¹ /3 % support test of the regulation (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contributor of or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1.	ution of				
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
during the year, contrib not total to more than \$ year for an exclusively applies to this organiza	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year					
Caution. An organization that is 990-EZ, or 990-PF), but it must	s not covered by the General Rule and/or the Special Rules does not file Schedule B (Fo t answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 9 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or	orm 990,				

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

Name of organization
GRASSROOT SOCCER, INC.

Employer identification number 43–1957920

Part I	Contributors (see instructions). Use duplicate copies of F	Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.1	SEE STATEMENT #2 NAMES PROVIDED IN ATTACHMENT ADDRESSES PROVIDED IN ATTACHMENT NORWICH VT 05055	\$4,738,422	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
t		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)	(c)	(d)
	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
ennú.		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

OMB No. 1545-0047

Employer identification number

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

Open to Public Inspection

GRASSROOT SOCCER, INC. 43-1957920 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ Aggregate contributions to (during year) 2 Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **▶**\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): 4 Provide a description of the organization's collections and explain how they further the organization's exampl purpose in Part XIII. 5 During the year, did the organization's collections and explain how they further the organization's exampl purpose in Part XIII. 5 During the year, did the organization's collections and explain how they further the organization's exampl purpose in Part XIII. 5 During the year, did the organization solids or receive denations of art, historical treasures, or other similar assets to be solid to rate feather after the not be maintened as part of the organization's collection? Part III Secrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets and included an amount on Form 990, Part X line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 1 Edinding balance 1 Additions during the year 1 Edinding balance 2 Detection of the organization include an amount on Form 990, Part X, line 21? 1 If Yes is applied the dependent of the organization answered "Yes" to Form 990, Part IV, line 10. 1 If Yes is applied the dependent of the organization answered "Yes" to Form 990, Part IV, line 10. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:		nedule D (Form 990) 2013 GRASSRO	OT SOCCER,	INC.		43-1	1957920			Page
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b Scholarly research e Other	3	Using the organization's acquisition, acce	ssion, and other record	ls, check any of the f	ollowing tha	t are a sign	ificant use of its			<i>-</i>
b Scholarly research e Other	6	Public exhibition	d 🗍	Loan or exchange or	roorams		0.00			
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.	ŀ	Scholarly research								
A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV. Escrivow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X XIII and complete the following table: ■ Beginning balance ■ Distributions during the year ■ Endowment Funds. ■ Distributions during the year ■ Endowment Funds. ■ Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V ■ Endowment Funds. ■ Complete if the organization answered "Yes" to Form 990, Part IV, line 10. ■ Beginning of year balance ■ Contributions ■ Complete if the organization answered "Yes" to Form 990, Part IV, line 10. ■ Contributions	(Preservation for future generations				••••••				
Sulling the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part.IV: Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If Yes, explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? D If If Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part.Y. Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions 1a Beginning of year balance c Nat investment earnings, gains, and losses d Grants or scholarships of Hermitian or quast-endowment % Ferminant endowment % Complete if the organizations elisted as required on Schedule R7 1a Land b Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.	4		collections and explain	how they further the	organizatio	n'e evemnt	nurnana in Day			
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g End of year balance g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated depreciation depreciation (diher) depreciation depreciation (diher) depreciation (diher) depreciation (diher) depreciation (diher) (a) Book value (di) Book value (di) Book value (di) Buildings c Leasehold improvements d Equipment e Other Other								1		
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Provide the estimated percentage of the current year end balance (line 1g, 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 should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations		End of year belows								
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated depreciation (investment) (other) 4 Land 4 Description of property (a) Cost or other basis (c) Accumulated depreciation 4 Description of property (a) Cost or other basis (c) Accumulated depreciation 4 Description of property (a) Cost or other basis (c) Accumulated depreciation 4 Description of property (a) Cost or other basis (c) Accumulated depreciation 4 Description of property (a) Cost or other basis (c) Accumulated depreciation 4 Description of property (a) Cost or other basis (c) Accumulated depreciation 4 Description of property (a) Cost or other basis (c) Accumulated depreciation 4 Description of property (a) Cost or other basis (c) Accumulated depreciation	9	End of year balance								
b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 226, 390, 186, 901, 30, 490	_	Provide the estimated percentage of the cu	rrent year end balance	(line 1g, column (a))	held as:					
Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 5 If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 226 390 186 901 30 400	a	Board designated or quasi-endowment	%							
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Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 226 390 186 901 30 400	С	Temporarily restricted endowment ▶	%					2		
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b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) (investment) (other) 4 Description of property (d) Book value (investment) 5 Buildings 5 C Leasehold improvements 6 Equipment 6 Other COMPLETED TO SCHOOL TO S		(i) unrelated organizations						3		3 110
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 226 390 186 901 30 480										-
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (investment) Buildings C Leasehold improvements d Equipment e Other 226, 390, 186, 901, 30, 480	b	If "Yes" to 3a(ii), are the related organization	is listed as required on	Schedule R2					2000	+-
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (investment) (other) (d) Book value (d) Book value (d) Book value (d) Book value (e) Cust or other basis (other) (oth	4	Describe in Part XIII the intended uses of th	e organization's endou	ment funde				ــــــــــــــــــــــــــــــــــــــ	3D	
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (other) (d) Book value (d) Book value (d) Book value (other) Equipment (D) Cost or other basis (other) (Pa	rt VI Land, Buildings, and Fou	ipment.	mont rulius.						
Description of property (a) Cost or other basis (investment) (investment) (investment) (other) (o	3000000000			o Form 000 Dor	4 IV / Iima 4	1- 0 1	- 000 B			
1a Land b Buildings c Leasehold improvements d Equipment e Other (investment) (investment) (other) (other) (other) (other) (d) Book value (d) Book value (d) Book value (d) Book value	*	Description of property	(a) Cost or other to							
1a Land b Buildings c Leasehold improvements d Equipment e Other 226 390 186 901 30 490		Booking to the property	TATA C 6 SEA	VEZ-ERECEDIE	Marian Marian Son	200	57 SS	(d)	Book value	
b Buildings c Leasehold improvements d Equipment e Other	10	Land		(othe	17	dep	reciation			
c Leasehold improvements d Equipment e Other	ld L	Lallu								
d Equipment 226 390 186 901 30 490	D	bullaings								
e Other	С	Leasehold improvements								
e Other	d	Equipment								
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	е	Other		22	26,390		186,901		39.	489
	l otal.	Add lines 1a through 1e. (Column (d) must	equal Form 990, Part X	, column (B), line 10	(c).)	· · · · · · · · · · · · · · · · · · ·				

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" to	Form 990 Part IV line	11h See Form 990 Par	X line 12
	(a) Description of security or category	(b) Book value	(c) Method of val	
	(including name of security)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Cost or end-of-year n	narket value
(1) Financial d				
	lerivatives Id equity interests			
				i i
(=)				
(C)				
(1.1)				
	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII	Investments—Program Related.			
***************************************	Complete if the organization answered "Yes" to	Form 990, Part IV, line	e 11c. See Form 990, Par	t X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of va	
			Cost or end-of-year n	narket value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" to	Form 990, Part IV, line	e 11d. See Form 990, Par	
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)		12		
(8)				
(9)	(1) 15 000 Part V and (D) line 45 \		b	
***************************************	n (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities. Complete if the organization answered "Yes" to	Form 000 Part IV line	110 or 11f See Form 90	00 Part X
	Committee and the second of th	roilli 990, rait iv, ilik	e The of Th. occ Form oc	70, r art 71,
	line 25.	(b) Book value		
1.	(a) Description of liability	(b) book value	-	
	income taxes			
(2)	A Company of the Comp		-	
(3)			-	
(4)			1	
(5)			1	
(6)			-	
(7)			-	
(8)			1	
(9)	(h) must sound form 000 Port V and (P) line 25 \		1	
otal. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶ uncertain tax positions. In Part XIII, provide the text of the for	otnote to the organization's	financial statements that reports	the
2. Liability for	liability for uncertain tax positions under FIN 48 (ASC 740). C	Check here if the text of the	footnote has been provided in P	art XIII
organization's	mapling for uncertain tax positions under 1 in 40 (AGO 740).	SHOOK HOLD II THO TOXE OF THE	Dear provided in 1	

Pa	rt XI Reconciliation of Revenue per Audited Financial S Complete if the organization answered "Yes" to Form	Statements With Reve	nue per Return.	
1	Total revenue, gains, and other support per audited financial statements	oog rantity into that	11	7,605,806
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1,000,000
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	189,484	
е	Add lines 2a through 2d			189,484
3	Subtract line 2e from line 1		3	7,416,322
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			,,110,022
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2.)	5	7,416,322
Pa	Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" to Form	Statements With Expe	enses per Return	1,110,022
1	Total expenses and losses per audited financial statements	000,1 01117, 1110 120.	1	8,242,401
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			0,242,401
	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С				
	Other (Describe in Part XIII.)		136,284	
e	Add lines 2a through 2d	Zu		136,284
3	Subtract line 2e from line 1		2e	
4	Subtract line 2e from line 1			8,106,117
	Investment expenses not included on Form 990, Part VIII, line 7b	12		
b	Other (Describe in Part XIII.)	4b		
C	Add lines As and Ab		4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	(8.)	5	8,106,117
2; Par PA	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 t XI, lines 2d and 4b. Also complete this part to RT XI, LINE 2D - REVENUE AMOUNTS INCL	provide any additional inform	nation. IALS - OTHE	R
			\$	136,284
CU	RRENCY GAIN/LOSS		\$	53,200
 РА	RT XII, LINE 2D - EXPENSE AMOUNTS INC	LUDED IN EINAN		
		HODED IN FINAN		
::. <u>:</u>	RECT FUNDRAISING EXPENSES		\$	136,284
				• • • • • • • • • • • • • • • • • • • •
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DAA			Sch	edule D (Form 990) 2013

Schedule D (F	Form 990) 2013	GRASSROOT	SOCCER, INC	Σ.	43-1	957920	Page !
Part XIII	Supplemer	ital Information (SOCCER, INContinued)				-
			**********	*********			

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				W/FRW NO 40			

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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. ▶ See separate instructions. Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

GRASSROOT SOCCER, INC. GRASSROOT SOCCER, INC. 43-1957920

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

Employer identification number

Part I	General Informati Form 990, Part IV, lin			utside the United States. Co	omplete if the organization answer	ered "Yes" on
assistar	ntmakers. Does the organce, the grantees' eligibility	niza y fo	ation maintain records or the grants or assista	to substantiate the amount of its gance, and the selection criteria used	to award the	X Yes No
2 For gra		art \	√ the organization's pr	ocedures for monitoring the use of		
3 Activities	s per Region. (The followi	ng	Part I, line 3 table car	be duplicated if additional space is	needed.)	
(a) 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
SUB-SAH	ARAN AFRICA	9	24	MANAGEMENT AND GEN.		864,638
SUB-SAH	ARAN AFRICA	9	24	FUNDRAISING		614,281
SUB-SAH (3)	ARAN AFRICA	9	24	TRAINING OF COACHES	TRAIN TO DELIVER CUR	559,688
(4)	ARAN AFRICA	9	24	EDUCATING CHILDREN	TEACHING CURRICULUM	1,442,357
(5)	ARAN AFRICA	9	24	OTHER EVENTS	HIV TEST&HOME VISITS	871,802
(6)	ARAN AFRICA	9	24	RESEARCH & DEVELPMNT	DEVELOP GRS CURRICUL	580,889
(7)	ARAN AFRICA ARAN AFRICA	9	24	MONITOR & EVALUATION	PROGRAM EFFECTIVENES	434,829
(8)	ARAW AFRICA	9	24	INTERN PROGRAM	JOB TRAINING PROGRAM	246,428
(9) EUROPE	THE THE TENT	9	24	PROGRAM COMMUNICATNS	SPREADING WORD-GRS	149,873
(10) EUROPE		1	1	MGT & GENERAL		18,866
(11) SOUTH A	MERICA	1	1	FUNDRAISING		16,001
(12) SOUTH AI		-	1	MNGMNT & GEN.	×	2,371
(13) SOUTH AI		-	1	RESEARCH & DEVELPMNT	DEVELOP GRS CURRICUL	22,950
(14)	AMERICA	-	1	MONITOR & EVALUATION	PROGRAM EFFECTIVENES	6,784
(15)	AMERICA	-	1	TRAINING OF COACHES	TRAIN TO DELIVER CUR	12,477
RUSSIA		+	1	EDUCATING CHILDREN	TEACHING CURRICULUM	540
17) 3a Sub-total	8	3	1 224	MGMT & GENERAL		20,767 5,865,541
b Total from continuous sheets to Part I	nuation		7			115,834
c Totals (add lines 3a and		3	231			5,981,375

SCHEDULE F (Form 990)

Statement of Activities Outside the United States
Complete if the organization answered "Yes" on Form 999, Part IV, line 14b, 15, or 16

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

2013
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

GRASSROOT SOCCER, INC.

Employer identifications is at www.irs.gov/form990.

Employer identification number 43-1957920

Pi		eneral Information rm 990, Part IV, line		utside the United States. Co	omplete if the organization answ	ered "Yes" on
1	For grantmal	kers. Does the organize the grantees' eligibility f	zation maintain records for the grants or assista	s to substantiate the amount of its gance, and the selection criteria used	to award the	Yes No
2		kers. Describe in Part Itside the United State		rocedures for monitoring the use of	its grants and other	
3	Activities per	Region. (The following	Part I, line 3 table car	be duplicated if additional space is	needed.)	
	(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)	JSSIA		1	FUNDRAISING	E .	1,799
(2)	JSSIA JSSIA		1	TRAINING OF COACHES	TRAIN TO DELIVER CUR	6,420
(3)	JSSIA		1	EDUCATING CHILDREN	TEACHING CURRICULUM	35
(4)	JSSIA		1	RESEARCH & DEVELPMNT	DEVELOP GRS CURRICUL	73,244
(5)	DDLE EAS	r	1	MONITOR & EVALUATION	PROGRAM EFFECTIVENES	33,582
(6) MI	DDLE EAS	ŗ	1	TRAINING OF COACHES	TRAIN TO DELIVER CUR	690
(7)		16.5	1	EDUCATING CHILDREN	TEACHING CURRICULUM	64
(8)				·		
(9) (10)						
(11)						
(12)					15	
13)						
14)				-		
15)						
16)						
17) 8a Տւ	ıb-total		7			115,834
b Tot	al from continuation		,			113,834
	tals (add					

Page 2

INC. GRASSROOT SOCCER, Schedule F (Form 990) 2013

Part II

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. 43-1957920

(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,
(1)			IMPL.COUNSELING	31,930	AY	MENT		other) BOOK
(2)			HEALTH PROMOTION	446,493	BANK TRANSFER	SFER		BOOK
(3)			HEALTH PROMOTION	59,643	BANK TRANSFER	FER		BOOK
(4)			HIV IN UKRAINE	340,309	BANK TRANSFER	SFER		BOOK
(5)			HIV IN UKRAINE	172,795	BANK TRANSFER	FER		BOOK
(9)			HIV PREVENTION	42,910	BANK TRANSFER	FER		BOOK
(2)			HIV PREVENTION	5,578	BANK TRANSFER	FER		BOOK
(8)								
(6)								
(10)								
(11)								
(12)								n
(13)			e					
(14)								
(15)								
(16)								

Enter total number of recipient 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 7

Enter total number of other organizations or entities က



Schedule F (Form 990) 2013

F	art IV Foreign Forms	rage	_
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)	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)] 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)] 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	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	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)	No	

Schedule F (Form 990) 2013

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).

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS GRASSROOT SOCCER, INC. ISSUED SEVEN SUBGRANTS DURING 2013. ONE OF THESE SUBGRANTS WAS ISSUED IN ZAMBIA TO CONTINUE OUR WORK WITH AN IMPLEMENTING PARTNER THAT PROVIDES COUNSELING SERVICES FOR HIV POSITIVE YOUTH. TWO OF THE SUBGRANTS WERE ISSUED IN NIGERIA AND EQUATORIAL GUINEA FOR WORK SURROUNDING HEALTH PROMOTION AND MALARIA PREVENTION. TWO MORE ISSUED IN UKRAINE FOR OUR PROGRAM WITH ELTON JOHN AIDS FOUNDATION CALLED FAIR PLAY -TACKLING HIV IN UKRAINE. ONE WAS ISSUED IN TANZANIA FOR AN HIV PREVENTION PROGRAM CALLED ZINDUKA. THE FINAL SUBGRANT WAS ISSUED IN SOUTH AFRICA FOR WORK FOR DEVELOPING THE SKILLS OF YOUTH. FOR SUBGRANTS OVER \$5,000, GRS HAS SIGNED CONTRACTS THAT DETAIL OUT THE DURATION, SCOPE OF WORK, FEES AND PAYMENT TERMS, GENERAL TERMS AND CONDITIONS, TERMINATION OF CONTRACT, SETTLEMENT OF DISPUTES AND GOOD FAITH. THE AGREEMENTS SPECIFY THAT PAYMENT IS BASED ON COMPLETING MILESTONES, TURNING IN SPECIFIC REPORTS AND ISSUING INVOICES. REPORTS SUBMITTED BY THE SUBGRANTEE ARE REVIEWED AND APPROVED BY THE PROGRAM MANAGER FOR SIGN OFF REGARDING PROGRAM IMPLEMENTATION AND COMPLETION OF MILESTONES. THE PROGRAM MANAGERS MONITOR THE PROGRESS OF THE SUBGRANTEES BY VISITING THE SITE PERIODICALLY AND INTERACTING WITH THE INDIVIDUALS MANAGING AND DELIVERING THE PROGRAM AS WELL AS THE BENEFICIARIES. THEY ALSO REVIEW THE INVOICE AND FINANCIAL REPORT FOR APPROPRIATENESS. THE FINANCE DEPARTMENT MATCHED UP RECEIPTS (IF REQUIRED) TO THE EXPENSE REPORTS AND COMPARES THE ACTUAL EXPENSES TO THE BUDGET TO DETERMINE IF THE ORGANIZATION HAS SPENT THE FUNDS APPROPRIATELY. PAYMENT OF THE NEXT TRANCHE OF FUNDING IS RELEASED ONCE THE PROGRAM MANAGER AND FINANCE DIRECTOR HAVE APPROVED THE REPORTS. FOR SUBGRANTS UNDER \$5,000, GRS USES A LESS FORMAL MONITORING PROCESS THAT INCLUDES FINANCIAL REPORTING AND

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).

PROGRAMMATIC CHECK-INS.			
DADT I TIME 2 ACTIVITIES DED DESTON		•••••••••••••••••••••••••••••••••••••••	
PART I, LINE 3 - ACTIVITIES PER REGION			
REGION	EX	PENDITURES INVES	PMENTS
SUB-SAHARAN AFRICA	\$	864,638 \$	0
SUB-SAHARAN AFRICA	\$	614,281 \$	0
SUB-SAHARAN AFRICA	\$	559,688 \$	0
SUB-SAHARAN AFRICA	\$	1,442,357 \$	0
SUB-SAHARAN AFRICA	\$	871,802 \$	0
SUB-SAHARAN AFRICA	\$	580,889 \$	0
SUB-SAHARAN AFRICA	\$	434,829 \$	0
SUB-SAHARAN AFRICA	\$	246,428 \$	0
SUB-SAHARAN AFRICA	\$	149,873 \$	0
EUROPE	\$\$	18,866 \$	0
EUROPE	\$	16,001 \$	0
SOUTH AMERICA	\$	2,371 \$	0
SOUTH AMERICA	\$	22,950 \$	0
SOUTH AMERICA	\$	6,784 \$	0
CENTRAL AMERICA	\$	12,477 \$	0
CENTRAL AMERICA	\$	540 \$	0
RUSSIA	\$	20,767 \$	0
RUSSIA	\$	1,799 \$	0
RUSSIA	\$	6,420 \$	0
RUSSIA	\$	35 \$	0
RUSSIA	\$	73,244 \$	0
RUSSIA	\$	33,582 \$	0

Part V	Supplemental Information Provide the information required by Part I, lir amounts of investments vs. expenditures pe Part III, column (c) (estimated number of rec information (see instructions).	ne 2 (monitoring of funds); Pa r region); Part II, line 1 (acco	unting method): Part III (ac	counting method): and
MIDDLE	EAST	\$	690 \$	0
MIDDLE	EAST	\$	64 \$	0
PART V	- ADDITIONAL INFORMATION		•••••	
SCHEDU	LE F PART II COLUMN (C)RE	GION:		******************************
1) SUB	-SAHARA AFRICA			
2) SUB	-SAHARA AFRICA		· · · · · · · · · · · · · · · · · · ·	•••••
3) SUB-	-SAHARA AFRICA			
4) SOU	ΓΗ ASIA		***************************************	
5) SOUT	TH ASIA		***************************************	
6) SUB-	-SAHARA AFRICA		*******************************	
7) SUB-	-SAHARA AFRICA		***************************************	***************************************
			·	

		•••••••	***************************************	
		******************************		V

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service 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.

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

OMB No. 1545-0047

Name of the organization GRASSROOT SOCCER,	TNC				Employer identifica	
Fundraising Activities. Complete if	the organizati	ion a	nswe	red "Yes" to Form 99	00, Part IV, line	17.
Form 990-EZ filers are not required a lindicate whether the organization raised funds through				Check all that apply		
a Mail solicitations				vernment grants		
b Internet and email solicitations						
c Phone solicitations				ment grants		
d In-person solicitations	g Special fu	indrais	ing ev	rents		
 Did the organization have a written or oral agreement w or key employees listed in Form 990, Part VII) or entity If "Yes," list the ten highest paid individuals or entities (f compensated at least \$5,000 by the organization. 	in connection with	profe	ssiona	al fundraising services?	ndraiser is to be	Yes No
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	raise cust	id fund- er have ody or trol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4					ч	
5						
6						
7						
8						
9						
0						
otal			D			
List all states in which the organization is registered or lice registration or licensing.	censed to solicit c	ontrib	utions	or has been notified it is e	exempt from	

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 (b) Event #2 (c) Other events (d) Total events EVENT 1-NYC MAR EVENT 2-OCEANS (add col. (a) through (event type) (event type) (total number) col. (c)) 1 Gross receipts 497,154 133,361 64,312 694,827 2 Less: Contributions 3 Gross income (line 1 minus 497,154 133,361 64,312 694,827 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs Direct Expenses 7 Food and beverages 8 Entertainment 53,887 9 Other direct expenses 38,693 43,704 136,284 10 Direct expense summary. Add lines 4 through 9 in column (d) 136,284 11 Net income summary. Subtract line 10 from line 3, column (d) 558,543 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more Part III than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes % 6 Volunteer labor 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 operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain:

Sch	edule G (Form 990 or 990-EZ) 2013 GRASSROOT SOCCER, INC.	43-1957920	Р	age 3
11	Does the organization operate gaming activities with nonmembers?	10 100/020	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		J 165 [
	formed to administer charitable gaming?	Г] v [
13	Indicate the percentage of gaming activity operated in:		Yes	No
а		1,0		2.
b	The organization's facility An outside facility	13a		<u>%</u>
14	An outside facility Enter the name and address of the person who propage the organization's accoming to the person who propage the organization is a constant to the person who propage the organization is a constant to the person who propage the organization is a constant to the person who propage the organization is a constant to the person who propage the organization is a constant to the person who propage the organization is a constant to the person who propage the organization is a constant to the person who propage the organization is a constant to the person who propage the organization is a constant to the person who propage the organization is a constant to the person who person to the person who person to the per	13b		%_
17.	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶			
	Address ►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming		••	
	revenue?		Yes	No
b	if it es, enter the amount of gaming revenue received by the organization \(\rightarrow \)\$	the		
	amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address of the third party:			
	and party.			
	Name			
	Name ▶		••	
	Address▶			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other example example example.		V [7 M.
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or	Ц	Yes	No
	spent in the organization's own exempt activities during the tax year > \$			
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, column	(''')		
**********		ins (III) and (V), and	d	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to	o provide any		
	additional information (see instructions).			
				New York
				••••
				53.55
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

SCHEDULE J (Form 990)

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ See separate instructions.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Part I

GRASSROOT SOCCER, INC. **Questions Regarding Compensation**

Employer identification number 43-1957920

1	a Check the appropriate hov/es) if the organization provided any of the full in the first of the		Yes	No
•	la Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. X Housing allowance or residence for personal use.			
	Thousand anomalice of residence for personal use			
	T dyments for business use of personal residence			
	X Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to		1	
	explain	1b		X
2				
2	and an additional prior to reimbursing or allowing expenses incurred by all		1	1
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			
	1a?	2	X	
3	the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	7 Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance navment or shapes of sould			
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a	_	X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4b		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		Χ
	, and the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а				
		5a		X
775	Any related organization? If "Yes" to line 5a or 5b, describe in Part III.	5b		X
	ii 100 to line od or ob, describe iii Fart III.			
6	For persons listed in Form 000, Bort VIII. Soution A. Handa Hall			
Ŭ	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
2		6a		X
h	The organization? Any related organization?	6b		X
	Any related organization? If "Yes" to line 6a or 6b, describe in Part III.			
	in resituine da di ob, describe in Part III.			
7	For persons listed in Form 000, Port VIII, Continue to the con		1	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
7	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Χ
7 8	payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject	7		X
7 8	payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe	7		X
7 8	payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe	7		X
	payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III			
	payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			

GRASSROOT SOCCER, INC.

Schedule J (Form 990) 2013

Part

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. 43-1957920

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

Note. The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(a) Made (b)	And (E) amounts for trial lidividual	
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(E) lotal of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
THOMAS S.CLARK 1 CHIEF EXEC OFFICER	(1) 147,594	0:0	0	0:	43,207	190,801	0
			0	0			0
K II.	(1) 224, /93	0:0	0:	0	38,113	262,906	0
O'BRITN	7		0			0	0
CHIRT DEVICE OPPICED		0::::::::::::::::::::::::::::::::::::::	0	0	41,569	190,547	0
DEVEL OFFICER			0			:	
4							
2	(II)						
9	(II)						
)	(E)						
8	(t)						
9	(n)						
10 (0	(tr)						
11	(n)						
12 (0	(3)						
13 (ii)	0						
(1) (1)							
(1) (1)							, , , , , , , , , , , , , , , , , , , ,
(ii) (iii)							

Part ≡

5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part ORGANIZATIONS FOR RECOMMENDATIONS TO THE BOARD OF DIRECTORS FOR THE CHIEF FOLLOWED GRASSROOT SOCCER, INC. USES 990 INFORMATION FROM COMPARABLE NON-PROFIT PART I, LINE 3 - RELATED ORG METHODS USED FOR COMPENSATION EXPLANATION WRITTEN POLICY REGARDING PAYMENT OR REIMBURSEMENT. EXECUTIVE OFFICER'S SALARY. FOR KEY EMPLOYEES THE SAME PROCESS IS Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, REIMBURSEMENT POLICY EXPLANATION TO DETERMINE SALARY RANGES - WRITTEN Supplemental Information GRS DOES NOT HAVE A for any additional information. 1B PART I, LINE

Schedule J (Form 990) 2013

SCHEDULE M (Form 990)

Noncash Contributions

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.

OMB No. 1545-0047

2013

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

GRASSROOT SOCCER, INC

Employer identification number

	Part I Types of Property	1 0000	DEN, INC.		43-195	920
*****	J. S.	(a) Check if	(b) Number of contributions or	(c) Noncash contribution	(d) Method of determ	uala a
		applicable	items contributed	amounts reported on Form 990, Part VIII, line 1g	noncash contribution	₹/.
1	Art — Works of art			Tomi 950, Part VIII, line 1g	nonecon contribution	anounts
2	Art — Historical treasures					
3	Art — Fractional interests					
4	Books and publications					
5	Clothing and household					
	goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities — Publicly traded					
10	Securities — Closely held stock					
11	Securities — Partnership, LLC,					
	or trust interests					
12	Securities — Miscellaneous					
13	Qualified conservation					
	contribution — Historic					
	structures					
14	Qualified conservation					
	contribution — Other		. 17			
15	Real estate — Residential					
16	Real estate — Commercial					
17	Real estate — Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other ▶ (PRODUCT)	X	1	151,451	FMV	
26	Other ▶()					
27	Other ▶(
28	Other ()					
29	Number of Forms 8283 received by the	e organiza	ition during the tax year t	for contributions for		
	which the organization completed Form	m 8283, Pa	art IV, Donee Acknowled	gement	29	
						Yes No
30a	During the year, did the organization re	eceive by o	contribution any property	reported in Part I, lines 1	- 28, that	
	it must hold for at least three years fro	m the date	of the initial contribution	n, and which is not require	ed to be	
	used for exempt purposes for the entir		period?			30a X
	If "Yes," describe the arrangement in F					
31	Does the organization have a gift acce	ptance po	licy that requires the revi	ew of any non-standard		
٠	contributions?				*****************************	31 X
32a	Does the organization hire or use third	parties or	related organizations to	solicit, process, or sell no		
l.	contributions?					32a X
	If "Yes," describe in Part II.					
3	If the organization did not report an am	ount in co	lumn (c) for a type of pro	perty for which column (a) is checked,	
	describe in Part II.					

Schedule M (Form	990) (2013)	GRASSRO	OT SOCCE	R, INC		4	43-1957920	F	Page 2
Part II	0. 90	mental Inforn	n ation. Providonting in Part	de the info	rmation requ	ired by Part I, her of contrib	lines 30b, 32b, and 33	1 1 1	age Z
	0, 4 00,	ibiliation of be	Also Com	piete triis p	part for any a	aditional infor	mation.		
					**************			****************	
* ***********	**********	•••••••					*******************************		
* ***********			*************	***************************************		************		****************	
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* *************			• • • • • • • • • • • • • • • • • • • •			••••••••••••••		*******************	
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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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or 990-EZ.

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

Open to Public Inspection Employer identification nu

GRASSROOT SOCCER, INC.	43-1957920
FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN F	OREIGN COUNTRIES
ZIMBABWE, ZAMBIA, SOUTH AFRICA, MALAWI, UNITED KING	DOM
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCES	
THE ACCOUNTING MANAGER PREPARES THE SCHEDULES AND S	
THIS INFORMATION IS REVIEWED AND APPROVED BY THE AS	
CONTROLLER. THE FORMER BOARD TREASURER PREPARES THE	
REVIEWED BY THE CONTROLLER AND THE AUDIT FIRM. ONCE	
FORMAT, IT IS PRESENTED TO THE BOARD ALONG WITH FINA	ANCIAL STATEMENTS FOR
APPROVAL.	
FORM 990, PART VI. LINE 12C - ENEODGEMENT OF COURTS	
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLIC THE CONFLICT OF INTEREST POLICY IS REQUIRED TO BE CO	MPLETED BY GRS
OFFICERS, DIRECTORS/TRUSTEES AND KEY EMPLOYEES ANNUA	
INTEREST ARE DISCLOSED OR DISCOVERED THEN THE BOARD	
DETERMINE IF IT IS APPROPRIATE OR IF CHANGES NEED TO	BE MADE.
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FO	OR TOP OFFICIAL
THE CHIEF EXECUTIVE OFFICER AND CHIEF OPERATING OFFICE	
BY THE BOARD ON AN ANNUAL BASIS. THE OFFICERS DO A PHONE	ERFORMANCE EVALUATION
OF EACH OTHER AND THEMSELVES. THEN A CROSS SECTION OF	F GRS EMPLOYEES SUBMIT
PERFORMANCE REVIEWS FOR THESE OFFICERS DIRECTLY TO THE	HE BOARD, THEN THE
BOARD REVIEWS AND SETS ANNUAL COMPENSATION.	
FORM 990 DADT UT TIME 155	
FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FO	R OFFICERS

GRASSROOT SOCCER, INC.	43-19	tification number 57920
THE CHIEF EXECUTIVE OFFICER AND CHIEF OPERATING OFFICERS	S' PAY	ARE REVIEWED
BY THE BOARD ON AN ANNUAL BASIS. THE OFFICERS DO A PERFO	RMANCE	EVALUATION
OF EACH OTHER AND THEMSELVES. THEN A CROSS SECTION OF GF	S EMPL	OYEES SUBMIT
PERFORMANCE REVIEWS FOR THESE OFFICERS DIRECTLY TO THE E	OARD,	THEN THE
BOARD REVIEWS AND SETS ANNUAL COMPENSATION.		
*		***************************************
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOS		
WE DO NOT PUBLISH OUR GOVERNING DOCUMENTS OR CONFLICT OF		
BUT WOULD MAKE IT AVAILABLE TO THE PUBLIC UPON REQUEST.	GRS PO	STS ITS
ANNUAL REPORT WHICH INCLUDES FINANCIAL STATEMENTS ON OUR		
ORGANIZATIONS 990 IS AVAILABLE ON GUIDESTAR. GRS PUBLISH	ES ITS	990 ON
CHARITY NAVIGATOR.		
FORM 990, PART XI, LINE 9 - RECONCILIATION OF CHANGES -	OTHER	
DIRECT FUNDRAISING EXPENSES	\$	136,284
CURRENCY GAIN/LOSS	\$	53,200
DIRECT FUNDRAISING EXPENSES	\$	-136,284
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS I	EXPLANA	TION
CURRENCY GAIN/LOSS	\$	53,200



990 Statement of Program Service Accomplishments:

- 1) Grassroot Soccer Inc. (GRS) is a non-profit organization that uses the power of soccer to educate, inspire and mobilize communities to stop the spread of HIV. GRS improves health among youth by continuously developing and improving our innovative educational tools and techniques, sharing our model effectively with like-minded partners, and tapping into the power and popularity of soccer to advance the global fight against HIV and AIDS.
- 2) No.
- 3) No.
- 4) Program Services
- 4a) Other Activities

Other Activities mainly consists of Skillz VCT Tournaments. GRS' innovative "Skillz Tournament" intervention is aimed at gathering a large number of community members while promoting testing, counseling and Know Your Status messages. Using the power of soccer as a tool to bring youth together, these events increase awareness about HIV testing and treatment services and empower youth to know their status by promoting positive peer pressure. Onsite rapid HIV testing and immediate enrollment into care and treatment provided by trusted partners bridges the gap between HIV prevention and treatment services, and demonstrates the power of collective action in communities.

4b) Research & Development

GRS prides itself on its ability to constantly evaluate the efficacy of its programs, develop and pilot new innovations, and make changes based on data. Learning is then shared within GRS and through our global network of partners to promote best practice in fighting HIV/AIDS and developing youth. The research and development (R&D) system within GRS is extremely important for the quality, culture, and scalability of the organization. The GRS R&D team operationalizes the development of our programs, and creates feedback loops to allow us to distill data and information and make regular improvements.GRS R&D is currently managing several large-scale evaluations across Zimbabwe, Zambia, and South Africa as well as developing and piloting new curricula for partners across the world.

4c) Educating Children

One of GRS' core strengths is our ability to adapt, replicate and disseminate our innovative curriculum. In 2013, GRS ran Skillz Street, Skillz Core, Peer Education Outreach, Generation Skillz, and the Skillz Holiday Program. Each of these intervention types is design to reach youth in an engaging and innovative way and to inspire them to change their own behaviors and educate others in the community.

Grassroot Soccer, Inc. EIN 43-1957920 Form 990 Schedule B Part 1 Line No 1

Donor Name and Address	Donation Amount	Contribution Type
3ie 1625 Massachusetts Ave. NW Washington, DC 20036	\$ 188,281.00	Business
Elizabeth Taylor AIDS foundation 269 S. Beverly Drive Suite 147 Beverly Hills, CA 90212	163,818.00	Foundation
Exxon Mobil Foundation 5959 Las Colinas Boulevard Irving, TX 75039-2298	1,200,000.00	Business
FIFA-Federation Internationale de Football Association FIFA-Strasse 20/P.O. Box 8044 Zurich Switzerland	219,037.37	Foundation
Ford Foundation 320 East 43rd Street New York, New York 10017	270,000.00	Foundation
MAC AIDS Fund 130 Prince Street, 2nd Floor New York, NY 10012	335,725.50	Foundation
UNICEF P.O. Box 33610 Lusaka Zambia	206,675.09	Foundation
UN Trust Fund 866 United Nations Plaza, Suite 540 New York, NY 10017	510,525.00	Foundation
Vitol Charitable Foundation Belgrave House 6th Floor 76 Buckingham Palace Road London, England SW1W 9TQ	480,000.00	Foundation
Elton John AIDS Foundation 584 Broadway Suite 906 New York, NY 10012	152,602.50	Foundation
King Innovation Fund Rue Brederodestraat 21 Brussels, Belgium B-1000	250,000.00	Foundation

Goldman Sachs Gives Goldman, Sachs & Co. 200 West Street New York, NY 10282	520,757.46	Business
The Elkes Foundation 60 East 42nd Street New York, NY 10165	241,000.00	Foundation
TOTAL	4,738,421.92	
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Statement #2