Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

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. Department of the Treasury

For the 2016 calendar year, or tax year beginning and ending C Name of organization D Employer Identification number DR PHILLIPS SOCCER CLUB CORPORATION Check if applicable: Doing business as Address change Number and street (or P.O. box if mail is not delivered to street address) Name change 3923 ANGELICA DR E Telephone number enulor failfal City or town State ZIP code (407) 362-1702 ORLANDO FI 32836 belenionethnuter leni Foreign country name Foreign province/state/county Foreign postal code Amendadi retum G Gross receipts \$ 29,893 F Name and address of principal officer. Application pending Yes X No H(a) is this a group return for subordinates? RAFAEL NAVARRO 8923 ANGELICA DR., ORLANDO, FL. 32836 H(b) Are all subordinates included? X 501(c)(3) If "No," attach a list. (see instructions) Tax-exempt status: 501(c) () 🍕 (insert no.) 4947(a)(1) or J Website: ▶ DRPHILLIPSSOCCERCLUB.COM H(c) Group exemption number 🕨 X Corporation L Year of formation: 2015 K Form of organization: Trust Association M State of legal domicile; Part I Summary Briefly describe the organization's mission or most significant activities: This corporation shall be educational Activities & Governance teaching soccer sport and organized and operated to foster national soccer sport competition Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 8 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 0 6 6 Total unrelated business revenue from Part VIII, column (C), line 12. 7a 0 Net surrelated business taxable income from Form 990-T, line 34. 7b 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h) 10.574 29,893 Revenue 9 Investment ancome (Part VIII, column (A), lines 3, 4, and 7d) 10 0 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 0 0 Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . 12 10,574 29,893 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). 15 0 1,567 Professional fundraising fees (Part IX, column (A), line 11e) 0 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 10,757 27,725 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . . 10,757 29.292 19 Revenue less expenses. Subtract line 18 from line 12. -183601 Beginning of Current Year End of Year 20 Total assets (Part X, line 16). 186 391 21 Total liabilities (Part X, line 26) 396 0 Net assets or fund balances. Subtract line 21 from line 20 22 391 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign 4/17/2017 Signature of officer Here RAFAEL NAVARRO PRESIDEN'T Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Paid SELF-PREPARED RETURN self-employed Preparer Firm's name Use Only Firm's EIN ▶ Firm's address I Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) . . . Yes No For Paperwork Reduction Act Notice, see the separate instructions.

Fom	i aan (True)	DA PHILLIPS SOCCER CLUB CORPORATION	47-	Page 2
	ent III	Statement of Program Service Accomplishments		
ì	Pietosa, a	Check if Schedule O contains a response or note to any line in this Part III		. Ц
(B)	This con	escribe the organization's mission: poration shall be educational teaching soccer sport and organized and operated to identify soccer sport competition		
2	the prior	organization undertake any significant program services during the year which were not listed on Form 990 or 990-EZ?	. Yes	X No
3	Did the o	organization cease conducting, or make significant changes in how it conducts, any program	. Yes	X No
4	Describe expenses	describe these changes on Schedule O. the organization's program service accomplishments for each of its three largest program service. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and aspenses, and revenue, if any, for each program service reported.	es, as measured allocations to oth	l by ers,
4a	(Code: MONTHL) (Expenses \$ soccer training_including grants of \$) (Revenue Y TRAINING FEES		
	~~~~~~			
				********
46	(Code:	) (Expenses \$ including grants of \$) (Revenue	\$	)
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lc	(Code:	) (Expenses \$ including grants of \$ ) (Revenue \$	,	
•			************	
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2			**************************************	
-				
(	Expenses	V / (Revenue &	0)	**********
5 T	oful progra	m service evanges h	<u> </u>	

ZBGH NCOC			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		Х
2	ts the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Χ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
G	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
Valen	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Fert II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.			
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		_X_
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D. Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a		X
þ	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			02.95
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	~~·	X
G	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		1	
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		Х
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	444	1	v
Δ	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11d 11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
ĕ	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes."			***
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
148	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
15	foreign investments valued at \$100,000 or more? If "Yes." complete Schedule F, Parts I and IV	14b		_X_
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.			
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		<u>X</u>
*	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	46		v
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16		<u>X</u>
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		Y
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	-'-		<u>X</u> _
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		χ
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part Vill line 9a2			
******	If "Yes," complete Schedule G, Part III	19		X

			Yes	No
20	a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule Id	20a		X
	b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	206		
21				-
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22				
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23				
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Lance of the	Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
1	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
1	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
5	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualitied person during the year? If "Yes," complete Schedule L, Part i	25a		Χ
3	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			1 ,
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
28	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any		1	
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
A.	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
20	entity or family member of any of these persons? If "Yes," complete Schedule L., Part III	27	NAME OF THE OWNER, OWNE	Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	4200		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
u	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28b		X
<b>,</b>	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			26
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		X
	conservation contributions? If "Yes," complete Schedule M.			
34	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		X
	Parl 1	24		v
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	31		X
	If "Yes," complete Schedule N, Part II	32	- 1	v
33	Did the organization own 101% of an entity disregarded as separate from the organization under Degulations	34		X
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	22	1	v
34	vvas the organization related to any tax-exempt or taxable entity? If "Yes." complete Schedule P. Part II	33		X
	Ill, or IV, and Part V, line 1	34	- 1	v
35a	Lid the organization have a controlled entity within the meaning of section 512/b)(13)2	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	UUA		^_
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R. Part V. line 2	35b		
36	Section 301(C)(3) organizations. Did the organization make any transfero to an example you significantly	300	-	
(different	organization? If "Yes," complete Schedule R, Part V, line 2	36		Χ
37	Life the diganization conduct more than 5% of its activities through an entity that is not a setalog comparation			
	and that is treated as a partnership for federal income tax purposes? If "Yes " complete School B. Book		1	
0.5	VI	37		X.
38	Did the organization complete Scherhele O and provide evaluations is only the contractions in the contractions in the contractions in the contractions in the contraction of the contractions in the contraction of the contra			
and the same of the	19: Note: All Coll) 990 filets are required to complete Schedule O	38		Χ
		-		C. T.

Form 990 (2016)

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ALEXANDERS MANAGEMENT OF THE PARTY OF THE PA		MA AR APPRICA	payer	W	22 17	
entrovante	Danerding	I SEETING SECTION	- HITTERS AND	137	Compliance	ė:

	Check if Schedule O contains a response or note to any line in this Part V.			
	1 1	(energy	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	10	Χ	711.00
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	類類		
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	F-551/100	7007044
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	觀測		機能
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	36		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			A Company
	(FEAR)			
5a	Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year?	5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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?	6a		Χ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		X
7	Organizations that may receive deductible contributions under section 170(c).		纖纖	
æ	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?	7a		Χ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Χ
Q	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Χ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	75		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Χ
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			57%
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
dia.	Section 501(c)(12) organizations. Enter:			
盘	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	10.41		
	against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Tales of
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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.	1000	66	
	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			200 (20) (0) (20)
	Enter the amount of reserves on hand			6. 747
ia i	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Χ
b	f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

	Check if Schedule O contains a response or note to any line in this Part VI	jes in Schedule O.	266 IL	struct	X		
Se	ction A. Governing Body and Management	·····		·			
00	Citoti A. Governing body and management			Yes	No		
1.	Enter the number of voting members of the governing body at the end of the tax year	1a	8	100	200		
-	If there are material differences in voting rights among members of the governing body, or		Ť				
	if the governing body delegated broad authority to an executive committee or similar						
	committee, explain in Schedule O.						
1		16	8		1.00		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	onship with		1200			
	any other officer, director, trustee, or key employee?		2	X	Markey		
3	Did the organization delegate control over management duties customarily performed by or und	er the direct					
	supervision of officers, directors, or trustees, or key employees to a management company or o	ther person?	3		Х		
4	Did the organization make any significant changes to its governing documents since the prior Form 940 w	as filed?	4	-	X		
5	Did the organization become aware during the year of a significant diversion of the organization	s assets?	5	1	X		
6	Did the organization have members or stockholders?		6	<del> </del>	X		
78		or appoint					
546	one or more members of the governing body?	от арропп	7a		v		
*	- BANDE FORM CONSTRUCTION OF PERSONAL PROPERTY OF THE STATE OF THE STA	re	18		_X		
	stockholders, or persons other than the governing body?	91 S ₁	76		V		
8	Did the organization contemporaneously document the meetings held or written actions underta	kon durina	7b	200.000	X		
***	the year by the following:	ken dunng	10.00				
a	THE STATE OF THE S		100	2000年			
h			8a	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot b		8b	X			
u	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule C	e reached			1/		
Sec	tion B. Policies (This Section B requests information about policies not required by the i	-t	9	Ļ	X		
4200	months, some firms deciron b requests information about policies not required by me i	nternal Revenue	Code.				
10a	Did the organization have local chapters, branches, or affiliates?		[40-	Yes	No		
b		habantara	10a		_X_		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt	n chapters,	40%				
11a		purposes r., , ,	10b	-	X		
	b Describe in Schedule O the process, if any, used by the organization to review this Form 996.						
12a							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	ship slap to south 1.0	12a		<u>X</u>		
G		give rise to conflicts?	12b		Х		
	describe in Schedule O how this was done	r res,		l			
13	Did the organization have a written whistleblower policy?	* * * * * * *	12c		Х		
14	Did the organization have a written document retention and destruction policy?		13		Χ		
15	Did the process for determining compensation of the following persons include a review and app	* * * * * * * *	14	10000000	X		
***	independent persons, comparability data, and contemporaneous substantiation of the deliberation	roval by					
а	The organization's CEO, Executive Director, or top management official.	n and decision?	115		T. F.		
b	Officer of key condenses of the organization		15a		<u>X</u>		
190	Other officers or key employees of the organization .  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions),		15b		X		
16a	Did the organization invest in contribute accept to a participate.						
Tua	Did the organization invest in, contribute assets to, or participate in a joint venture or similar simal	ngement					
b	with a taxable entity during the year?		16a		X		
IJ	If "Yes," did the organization follow a written policy or procedure requiring the organization to eva	luate its			課刊で 特別的		
	participation in joint venture arrangements under applicable federal tax law, and take steps to sal	eguard					
Sact	the organization's exempt status with respect to such arrangements?	. , , , , ,	16b				
17							
18	List the states with which a copy of this Form 990 is required to be filed FL						
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99 available for public inspection. Indicate how you made there available.	90-T (Section 501(d	)(3)s c	only)			
	available for public inspection. Indicate how you made these available. Check all that apply.  X Own website  Another's website  Upon request  Other (ava)	i. W., Y. (2) (2)					
19	Describe in Schedule O whether (and if so, bow) the organization made its constitution and it	lain in Schedule O)					
<u></u> %	Describe in Schedule O whether (and if so, how) the organization made its governing documents financial statements available to the public during the tax year.	conflict of interest	policy,	and			
20	State the name, address, and telephone number of the person who possesses the organization's						
			<b>*</b>				
	8923 ANGELICA DR, FL 32836	(407) 362-1702					
	The state of the s						

£									
	S SOCCER CLUB CORPORATION			47-	Page 7				
	on of Officers, Directors, Trust	ees, Key Employees,	Highest Com	pensated	Control of the second				
	Employees, and Independent Contractors  Check if Schedule O contains a response or note to any line in this Part VII.								
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.									
<ul> <li>List all of the organization organization, more than \$10.0</li> </ul>	on's former directors or trustees the 100 of reportable compensation from	at received, in the capac	ity as a former o	lirector or truste	e of the				
List persons in the following o compensated employees; and	rder: individual frustees or directors; I former such persons.	institutional trustees; offi	cers; key emplo	yees; highest					
X Check this box if neither t	he organization nor any related orga	inization compensated an	y current officer	, director, or trus	stee.				
(A) Name and Ti	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (do not check more than one box, unless person is both an officer Key employee  Officer  Officer  or director  or director	(D) Reportable comparsation from the organization (W-2/1098-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations				

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box.	unles er an	ieck ss be	ersor direct	e than is both tor/trust	ı an	(D) Reportable compensation from the organization (W-24(99-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) RAFAEL NAVARRO	5.00				<u> </u>	1				
PRESIDENT	0.00	X						0		
(2) NICOLAS NAVARRO	5.00									
VICEPRESIDENT	0.00			Χ				o		
(3) DANIEL NAVARRO	2.00	100								***************************************
TREASURY	0.00			Х			2001	0		
(4) SANDRA GASTELLANDS	1.00									
SECRETARY	0.00			X				0		
(5)										
(6)										
(7)		0.300								***************************************
(8)										
(9)							1	<del>///</del>		
(10)	*******		1	1			+	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		W-110
(11)	************			1			$\exists$			
(12)				1			7			
(13)			~	1	7		+			
(14)				7	1		1			

	Section A. Officers, Directors,	Trustees, Kev E	mpio	vee	S.	and	Hinh	est	Compensated	47 Employees (co	Page {
19942	(A) Name and title	(B) Average hours per	(do i	not cl	Pos neck	C) sition more		one h an	(D) Reportable	(E) Reportable compensation	(F) Estimated amount of
		week (list any hours for related organizations below deffed line)	Individual trustee or director		Officer	Key employee	I CONTRACTOR	**********	from the organization (W-2/1093-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(15	1										
(16											
(17								-3.1.			
(18											Andrew Patricina and Angeles
(19							-				<u></u>
(20											
(21		*****								7.0	
(22)	***************************************			-				$\neg$			
(23)	~~~~			-							
(24)								-			
(25)						-					······································
1b	Sub-total		1		l		l	B-	0	0	
523	Total from continuation sheets to Part VII,	Section A		.,	 5 :			₽	0	0	0
2	Total (add lines 1b and 1c).  Total number of individuals (including but not reportable compensation from the organizatio	limited to those I	isted	abo		wf	o rec	eive	0) ed mone than \$1	00,000 of	0
3	Did the organization list any former officer, die employee on line 1a? If "Yes," complete Sche	rector, or frustee dule J for such îi	, key Idivid	em ual	oloy	/ee,	or hi	ghe	st compensated		Yes No
4	For any individual listed on line 1a, is the sum the organization and related organizations gre intividual	of reportable con ater than \$150,0	mpen 00? /	sati f "Y	on es,	and " co.	othe	r co te S	ompensation from Schedule J for su	n Ich	
5	Did any person listed on line to receive or according services rendered to the organization? If "	rue compensatio	n froi	m a	17y 1	unre	elatec	l on	ganization or inc	lividual	
Sec	tion El. Independent Contractors										5 X
1	Complete this table for your five highest comp compensation from the organization. Report of year.	ensated indepen ompensation for	dent the c	con	trac	ctors r yea	s that ar en	rec	seived more than gwith or within t	n \$100,000 of the organization'	s tax
	(A) Name and business acidn	ess	*********	*****		*	T		(B) Description of service	0	(C)

Total number of independent contractors (including but not limited to those listed above) who received

more than \$100,000 of compensation from the organization

0

Language Mercural	CARL FINELING CONTROL OF CONTROL			41-00	Pa
Part VIII	Statement of Revenue		THE RESERVE OF THE PROPERTY AND A PROPERTY OF THE PROPERTY OF	ALANDAR SANGERS AND THE STREET	And the second second second second second
	Check if Schedule O contains a response or note to any line in	n this Part VIII.			[
		(A)	T (8)	(C)	(D)

					(A) Total revenue	(8) Related or exampt function revanue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Ŋ	₆ 1	a Federated campaigns	1a	0				
rani	unt	프랑이 그렇게 선물에 가지 않는데 가지 않는데 하게 보고 있었다. 그리는 그리는 그리는 그렇게	1b 29,	,893				
S)	Ĕ	ting at analysis was transfer at the contract of the first of the firs	1c	0				
壬	ia.		1d	0				
g,	Ë	경기 :	1e	0			Lagran State Contra	
Contributions, Gifts, Grants	and Other Similar Amounts	f All other contributions, gifts, grants, and						
꿒	5		11	_0				
S	anc	Noncash contributions included in lines 1a-1f:  h Total. Add lines 1a-1f	\$	0				
		II Total Add Illes 14-11	Business Co		29,89	3		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Prodram Service Revenue	2	a			・ 見の数質質が高い。	eligia (Jenara) N		
2242		b	<del></del>			ol	<b>-</b>	<del> </del>
o.		9				3	<del></del>	<u> </u>
5	1	4	<u> </u>			) 	<del></del>	<u> </u>
E		9		~		5	- <del> </del>	<del> </del>
odra	,	f All other program service revenue					<del> </del>	
å		Total. Add lines 2a-2f			(			
	3	Investment income (including dividends, inter			VIII			least hoteleast and a
		other similar amounts)						
	4	Income from investment of tax-exempt bond		· @ .	(			
	5	Royalties , , , , ,		lin.				
	١.	(i) Real	(ii) Persona					
	68					Witness in the		
	0	Not sontal income or (loss)	0	0				
	78	· · · · · · · · · · · · · · · · · · ·	(ii) Other		C		a surediscontractive	
	1 "	assets other than inventory .	ol	_				
	fe	24 16 16 16 16 16 16 16 16 16 16 16 16 16	<u> </u>	<u></u>				
	1	and sales expenses	o	0		<b>基本的企業</b>		
	C		ol	0				
	d	Net gain or (loss)		les-	0			表系统图1600 (St
						Electric States		
nue	8a	Gross income from fundralsing						
é		events (not including \$ 0						
TE.		of contributions reported on line 1c).						
4		See Part IV, line 18		0				
Other Reve	b	Less: direct expenses		0				
36	c	Net income or (loss) from fundraising events .	<del>, , , , , , , , , , , , , , , , , , , </del>	<b>P</b>	.0			And you by a conserve on the feet.
	9a	Gross income from gaming activities.	1	13				
	<b>h</b>	See Part IV, line 19		0			1,000	
	b c	Less: direct expenses		0				
1	10a	Gross sales of inventory, less	·	100	0	ANGEL TO THE PARTY		
	e mag	refusive and allowances		0				
Į.	b	Less: cost of goods sold b		0				
	(200	Net income or (loss) from sales of inventory		U	ACCESSION OF THE		2000年中海666	<b>服务规则的联系</b>
A STATE OF THE PARTY OF THE PAR		Wescellerecope Revenue	Business Code		0		STATE OF VENERAL STATE	and the president of the state
tayura.	tta.			7	٥	SERVICE SERVICE		
	b			-	0			<del></del>
1	£	december december 2000 1000 1000 1000 1000 1000 1000 100			0			•
1	đ	All other revenue			0			
	6	Total. Add lines 11a-11d		p	0			
	12	Total revenue. See instructions		7	29,893	0	0	0

Form 990 (2016) Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must complete a Check if Schedule O contains a response or not				F1
	not include amounts reported on lines 6b, 7b, 3b, and 10b of Part VIII.	(A) Total expenses	(B) Program services expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to demestic organizations				
	domestic governments. See Part IV, line 21	0			
Z	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0		. [174]	21.8676082
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign		f		
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5	Compensation of current officers, directors,				
	trustees, and key employees	0			)
6	Compensation not included above, to disqualified				1
	persons (as defined under section 4958(f)(1)) and				49
ri 1822	persons described in section 4958(c)(3)(B)	0	La company of the contract of		ļ
7	Other salaries and wages	1,567			
8	Pension plan accruals and contributions (include	_			
250	section 401(k) and 403(b) employer contributions).	0			
\$3	Other employee benefits	0			
10	Payrofl taxes	0			
44	Fees for services (non-employees):				
a	Managament	0			
ão.	Legal	139			
G:	Acounting	114			
C.	Lobbying	0			
*	Professional fundraising services. See Part IV, line 17.	0	2011 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	V 100 100 100 100 100 100 100 100 100 10	
К	Investment management fees	0			
Œ	Other. (If line 11g amount exceeds 10% of line 25, column	_		Construction of the Constr	
E 400	(A) amount, list line 11g expenses on Schedule 0.)	0			
12	Advertising and promotion	849			
13	Office expenses	495		ļ	
福	Information technology	0			
韓	Royalijes	0			
16	Occupancy	0			
17	Travel.	4,575			
18	Payments of travel or entertainment expenses				
# ro	for any federal, state, or local public officials	0		<u></u>	
19	Conferences, conventions, and meetings	0	·	<u> </u>	
20	Indexest	0		·	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0		)[0	0
23	Insurance	1,600	Ton Apole Williams		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
Sec. 1	(A) amount, list line 24e expenses on Schedule O.)	V. V			
977	Soccer fields maintenance	10,359			1
b	Portable bathroom and tools for fields	4,512			
C	Donations and gifts	1,119			
d	tornalments	1,800	**************************************		
	All other expenses miscellaneous	2,163			
	Total functional expenses. Add lines 1 through 24e.	29,292	()	0	Ò
	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)				

**Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X . . . (B) Beginning of year 1 End of year Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. . . . . . . . . . . . . . . . . . C Prepaid expenses and defensed charges . . . . . Land, buildings, and equipment; cost or 10a other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation . . . . . 10c Investments-other securities. See Part IV, line 11 . . . . . . . Investments--program-related. See Part IV, line 11. Intangible assets............ Total assets. Add lines 1 through 15 (must equal line 34) . . . . . Deferred revenue........ TO Escrove or custodial account liability. Complete Part IV of Schedule D. Labilities Loans and other payables to current and former officers, directors. trustees, key employees, highest compensated employees, and Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . . Other flabilities (including federal income tax, payables to related third parties, and other habitities mut included on lines 17-24). Complete Ò Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete fines 27 through 29, and lines 33 and 34. Organizations that do not follow SFAS 117 (ASC958), check here pemplete lines 30 through 34. Paid-in or capital surplus, or land, building, or equipment fund. . . . Retained earnings, endowment, accumulated income, or other funds . . -210 

Forth	990 (2016) DR PHILLIPS SOCCER CLUB CORPORATION	4	7-4	P	age 12
Pa	Reconciliation of Net Assets			to the second second	
	Check if Schedule O contains a response or note to any line in this Part XI				
ħ	Total revenue (must equal Part VIII, column (A), line 12)	1		7	29,893
2	Total expenses (must equal Part IX, column (A), line 25)	2		2	29,292
3	Revenue less expenses. Subtract line 2 from line 1	3			601
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			-210
F	Net unrealized gains (losses) on investments	5			
15	Donated services and use of facilities	6			
T	Investment expenses	7			
B	Prior period adjustments	8			
30	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
noveten/www.	column (8))	10			391
Par	Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990: X Cash Accrual Cither  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:    Separate basis	34 40	- 2	2 <b>a</b>	X
b	Were the organization's financial statements audited by an independent accountant?		2	<u>!b</u>	X
ě.	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight the small, review, or compilation of its financial statements and selection of an independent accountant?. If the organization changed either its oversight process or selection process during the tex year, explain in Schedule O.	of 	. 2	lo .	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	EST 61	1	la	X
h	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.			b	X
THE PERSON NAMED AND POST OF	TO SERVICE STATE S	-		m 990	-
			1.0		12010)

#### SCHEDULE A (Form 990 or 990-EZ)

# Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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.gordform990.

Inspection

Employer Identification number Name of the organization DR PHILLIPS SOCCER CLUB CORPORATION Reason for Public Charity Status (All organizations must complete this part.) See instructions, The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An expanization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv), (Complete Part II.) A federal state, or local government or governmental unit described in section 170(b)(1)(A)(v), S Am organization that monmally receives a substantial part of its support from a governmental unit or from the general public 3 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 3 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes 12 of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving a the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions). You must complete Part IV, Sections A. D. and E. Type III wan functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . . . £ 0 Provide the following information about the supported organization(s). (i) Name of supported organization (III) Type of organization (lv) is the organization (9) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) Total 0

Name			CLUB CORPORA			47-	Page 2
植	Support Schedule for Or	ganizations De	escribed in Sec	ctions 170(b)(	1)(A)(iv) and 1	70(b)(1)(A)(vi)	The second secon
	(Complete only if you chec	ked the box on	line 5, 7, or 8 c	of Part I or if the	e organization t	failed to qualify a	under
_	Part III. If the organization	fails to qualify t	under the tests	listed below, p	lease complete	Part III.)	
	ection A. Public Support						
Ça	fendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(4) 2015	(e) 2016	(f) Total
1							
	membership fees received. (Do not					1	
	include any "unusual grants.")	-					(
2	and the second s						***************************************
	benefit and either paid to or expended on			·			
72.7	its behalf	ļ					(
3	The value of services or facilities						
	furnished by a governmental unit to the	1				1	
	organization without charge						C
4	Total. Add lines 1 through 3	Constitution (	0 0	(	0	0	
5	The portion of total contributions by each						
	person (other than a governmental unit	es sellen i Arrest				11 (A) 11 (A) (A) (A)	
	or publicly supported organization)						
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,						
6	ooluma (f.)		branco 45 della		De la company		6
5	Public support. Subtract line 5 from line 4.	199845-98, 2008-98					0
*******	ction B. Total Support	T	1 41 5015			P2************************************	
Gara	endar year (or fiscal year beginning in)	1.00.2.1.2	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
4	Amounts from line 4	0	0	0	0	0	0
S	Gross income from interest, dividends,		ļ				
	payments received on securifies bans,		1				
	ments, royalties and income from similar	]					
	sources						0
3	Net income from unrelated business		}				
	activities, whether or not the business is regularly carried on						
ın							0
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part Vi.)	and the second s					
			Na. 0.50 U.S.V. 20 S.V. 25 S. 25 S. 1	Date Transfer and State Control			0
	Total support, Add lines 7 through 10.	Instruction Symptoms					0
3	Gross receipts from related activities, etc. (se	e instructions) .   .				12	
•	First five years. If the Form 990 is for the organization, check this box and stop here .	yanızation's tirst, se	cona, inira, fotirin, i	or tifth tax year as	a section 501(c)(3)		
ine	tion C. Computation of Public Su	ramant Days and		· · · · · · · · · · ·	· • • • • • • • • • • • • • • • • • • •	3. (*) (*) (*) (*) (*)	
4	Carbellia commanda proportional Con Pade III. C	pport Percente	age				
5	Public support percentage for 2016 (line 6, co	aumn (1) divided by	line 11. column (f))			14	0.00%
g a	Public sugarit percentage from 2015 Schedu	te A, Part II, line 14		* * * * * * *		45	0,00%
7	33 1/3% support test—2016. If the organizate and stop here. The organization qualifies as a	a publicly supported	l organization .  .  .			· · · · · · · · · · · · · · · · · · ·	
13	33 1/3% support test.—2015. If the organization and stop here. The organization qualifies	ion did not check a	hox on line 13 or 16	so and line this a	2 4 (20)	1.44.4	اسسا
ra i	10%-facts and-circumstances test—2016. Is 10% or more, and if the organization meets are visually income the visual and	if the organization d the "facts-and-circu and-circumstances	lid not check a box o umstances" test, che " test. The organiza	on line 13, 16a, or eck this box and st	16b, and line 14 op here. Explain in		
T.	0%-facts-and-circumstances test—2015. It is 10% or more, and if the organization me- lant VII how the organization meets the "facts- upported enganization.	f the organization d ets the "facts-and-c and-circumstances'	ld not check a box o ircumstances" test, ' test. The organizat	on line 13, 16a, 16b check this box and	o, or 17a, and line I stop hem. Explai	n in	
P	rivate foundation. If the organization did not	check a box on line	e 13, 16a, 16b, 17a	or 17b, check this	box and see		▶ []

instructions.

Schedule A (Form 990 or 990-EZ) 2016 DR PHILLIPS SOCCER CLUB CORPORATION

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

	e box on line 10 of Part I or if the organization failed to qualify under Part	11
If the organization fails to qualify	under the tests listed below, please complete Part II.)	
Public Support		-0.5

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕒	(a) 2012	(b) 2013	(c) 2014	(d) :2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						٥
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						0
	A VECTOR DESCRIPTION OF THE PROPERTY OF THE PR						
3	Gross receipts from activities that are not an						0
	unrelated trade or business under section 513	×	<del></del>			<del></del>	
Ą	Tax revenues levied for the organization's	19					
	benefit and either paid to or expended on	Ŋ.					0
	its behalf		***************************************				0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge		- was a succession of the succ				0
6	Total. Add lines # Smough 5	0	0	0	0	0	. 0
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
わ	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						0
~	Add lines 7a and 7b	0	0	0	0	0	0
	to the second se	445 400 S 125 20 125 5	Mintel Control Service		- C G. 10 (10 )		<u>_</u>
B	Public support (Subhact line 7c from						0
0-	line 6.)		(1994) LOS CREMENDO				0
	tion B. Total Support	(a) 0040	(h) 0042	(=) 0044	(a) (i) (E	(-) 0040 T	/6\ T-1-1
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
3	Amounts from line 6	0	0	0	0	. 0	
	Amounits from line 6.  Gross lincome from interest, dividends,	0	0	0	0	0	0
		0	0	0	0	. 0	0
	Gross income from interest, dividends,	0	0	0	0	0	0
10a	Gross income from interest, dividentis, payments received on securities leans,	0	0	0	0	0	
10a	Gross income from interest, dividentis, payments received on securities leans, rents, royd fes and income from similar sources	0	0	0	0	0	
10a	Gross income from interest, dividentis, payments received on securifies loans, rents, royalies and income from similar sources Unrelated business taxable from the (less	0	0	0	0	0	
10a &	Gross income from interest, dividentis, payments received on securities loans, neutra, royalies and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
10a &	Gross income from interest, dividentls, payments received on securities floans, rents, royalies and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses						0
10a &	Aross income from interest, dividents, payments received on securities loans, rents, royalies and income from similar sources.  Unrefaled business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrefated business						0
10a &	Aross income from interest, dividents, payments received on securities loans, rents, royalies and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities rot included in line 10b, whether						0 0
10a & & &	Pross income from interest, dividents, payments received on securifies lloans, rents, royalies and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities rot included in line 10b, whether or rot the business is regularly carried on .						0
10a & & &	Anos income from interest, dividents, payments received on securities leans, rents, royalies and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or						0 0
10a & & &	Aross income from interest, dividents, payments received on securities leans, rents, royalies and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets						0 0
10a 6 c 111	Aross income from interest, dividents, payments received on securities leans, rents, royalies and income from similar sources.  Unrelated business taxable income (less section 5:11 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0 0
10a 6 6 11	Pross income from interest, dividents, payments received on securities loans, rents, royalies and income from similar sources.  Unreliated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  Total support. (Add Fres 9, 10c, 11,		0	0	0	0	0 0
10a 6 6 11 12	Pross income from interest, dividents, payments received on securities loans, nexts, royal ies and income from similar sources.  Unrefated business taxable income (less section 5/1 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrefated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  Total support. (Add fixes 9, 10c, 11, and 12.).	0	0	0	0		0 0
10a 6 6 11 12	Pross income from interest, dividents, payments received on securifies loans, rents, royal fee and income from similar sources.  Unrefated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  Total support. (Add Fres 9, 10c, 11, and 12.).  First five years. If the Form 990 is for the organs.	0 onization's first, se	O cond, third, fourth, o	0 or fillh tax year as a	0 0 section (i01(c)(3)	0	0 0
10a 6 6 11 12	Prose income from interest, dividents, payments received on securifies leans, rents, royalies and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  Total support. (Add knes 9, 10c, 11, and 12.).  First five years. If the Form 990 is for the organization, check this box and stop here.	0 onization's first, sec	O cond, third, fourth, o	0 or fillh tax year as a	0 0 section (i01(c)(3)	0	0 0
10a B C 111 12 13 14 Sec	Prose income from interest, dividents, payments received on securifies loans, rents, royalies and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  Total support. (Add knes 9, 10c, 11, and 12.).  First five years. If the Form 990 is for the organization, check this box and stop here.	0 onization's first, se	O cond, third, fourth, o	0 or filth tax year as a	0 section (i01(c)(3)	0	0 0
10a B C 11 12 13 14 Sec 15	Aross income from interest, dividents, payments received on securities leans, rents, reysties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  Total support. (Add knes 9, 10c, 11, and 12.).  First five years. If the Form 990 is for the organization, check this box and stop here.  Lion C. (Computation of Public Suppublic support percentage for 2016 (line 8, cold	0 enîzatîon's first, se port Percenta umn (f) divided by	O cond, third, fourth, o 	0 or fillh tax year as a	0 section (i01(o)(3)	0	0 0
10a  6  6  11  12  13  14  Sec  15  16	Aross income from interest, dividents, payments received on securities leans, rents, royalies and income from similar sources.  Unrelated business taxable income (less section 5/1 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  Total support. (Add knes 9, 10c, 11, and 12.).  First five years. If the Form 990 is for the organization, check this box and stop here.  Rion C. (Computation of Public Suppublic support percentage for 2016 (line 8, cold Public support percentage from 2015 Schredule	onization's first, serport Percenta	cond, third, fourth, o	0 or fillh tax year as a	0 section (i01(o)(3)	0	0 0 0
10a  6  6  11  12  13  14  Sec  15  16  Sec	Aross income from interest, dividents, payments received on securifies leans, rents, royalies and income from similar sources.  Unrelated business taxable income (less section 5/1 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  Total support. (Add knes 9, 10c, 11, and 12.).  First five years. If the Form 990 is for the organization, check this box and stop here.  Lion C. (Computation of Public Suppublic support percentage for 2015 Schedule iton D. (Computation of Investment)	onization's first, second Percentalimn (f) divided by A, Part III, line 15	cond, third, fourth, o	O or fifth tax year as a	0 section (i01(c)(3)	0	0 0 0 0
10a  6  6  11  12  13  14  Sec  15  16  Sec	Aross income from interest, dividents, payments received on securifies leans, rents, royalies and income from similar sources.  Unrelated business taxable income (less section 5/1 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  Total support. (Add knes 9, 10c, 11, and 12.).  First five years. If the Form 990 is for the organization, check this box and stop here.  Lion C. (Computation of Public Suppublic support percentage for 2015 Schedule iton D. (Computation of Investment)	onization's first, second Percentalimn (f) divided by A, Part III, line 15	cond, third, fourth, o	O or fifth tax year as a	0 section (i01(c)(3)	0	0 0 0 0 ▶ □ 0.00%
10a b c 11 12 13 14 Sec 16 Sec	Public support percentage for 2016 (line 8, colubration D. (Competation of Investment income.)	onization's first, second port Percenta umn (f) divided by the A, Part III, line 15 Income Percone, column (f) divident for the percone percone, column (f) divident for the percone percone for the percone percone percone percone percone percone percone for the percone p	cond, third, fourth, our condition of the condition of th	O or fifth tax year as a	0 section (i01(o)(3)	0 0 15 16	0 0 0 0 
10a b c 111 12 13 14 Sec 15 Sec 17 18	Public support percentage for 2015 Schedule income. Competation of Investment income for 2015 Schedule income.	onization's first, second port Percenta umn (f) divided by the A, Part III, line 15 income Perconce, column (f) divided by the A, Part III, lire	cond, third, fourth, our condition of the condition of th	O or fifth tax year as a	0 section (i01(c)(3)	0 0 15 16	0 0 0 •
10a b c 111 12 13 14 Sec 15 16 Sec 17 18	Public support percentage for 2015 Schedules  Income (Competation of Investment income percentage for 2015 Schedule (Competation of Investment income percentage for 2016 (Competation of Investment income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Income percentage (Competation of Investment Income perc	oport Percenta umn (f) divided by A, Part III, line 15 Income Perc oc, column (f) divided divided by	ond, third, fourth, our condition of the	O or fifth tax year as a	0 section (i01(c)(3)	0 15 16 17 18	0 0 0 0 ▶ □ 0.00% 0.00%
10a 6 6 11 12 13 14 Sec 17 18 19a 6	Public support percentage for 2015 Schedules  First five years. If the Form 990 is for the organization of Investment income from Computation of Investment income from D. (Computation of Investment income percentage for 2015 Schedules from D. (Computation of Investment income percentage for 2015 Schedules from D. (Computation of Investment income percentage for 2016 (line 1 threes) from D. (Computation of Investment income percentage for 2015 Schedules from D. (Computation of Investment income percentage from 2015 Schedules from D. (Computation of Investment income percentage from 2015 Schedules from D. (Computation of Investment income percentage from 2015 Schedules from D. (Computation of Investment income percentage from 2015 Schedules from D. (Computation of Investment income percentage from 2015 Schedules from D. (Computation of Investment Income percentage from 2015 Schedules from D. (Computation of Investment Income percentage from 2015 Schedules from D. (Computation of Investment Income percentage from 2015 Schedules from D. (Computation of Investment Income percentage from 2015 Schedules from D. (Computation of Investment Income percentage from 2015 Schedules from D. (Computation of Investment Income percentage from 2015 Schedules from D. (Computation of Investment Income percentage from 2015 Schedules from D. (Computation D. (Computation Of Investment Income percentage from 2015 Schedules from D. (Computation D. (Computa	port Percenta umn (f) divided by A, Part III, line 15 Income Percence, column (f) divided by the A, Part III, lire to the A, Part III, lire to did not check to the the column (f) divided by the foliation did not check to the foliation did not check	ocond, third, fourth, ocond, third, fourth, ocondine 13, column (f))  entage led by line 13, colume 17	or fifth tax year as a	0 section (i01(c)(3) than 33 1/3%, and dorganization .	0 15 16 17 18 line 17 is	0 0 0 0 ▶ □ 0.00% 0.00%
10a 6 6 11 12 13 14 Sec 17 18 19a 6	Public support percentage for 2015 Schedules  Income (Competation of Investment income percentage for 2015 Schedule (Competation of Investment income percentage for 2016 (Competation of Investment income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Investment Income percentage for 2015 Schedule (Competation of Investment Income percentage (Competation of Investment Income perc	port Percenta umn (f) divided by A, Part III, line 15 Income Percence, column (f) divided by the A, Part III, lire to the A, Part III, lire to did not check to the the column (f) divided by the foliation did not check to the foliation did not check	ocond, third, fourth, ocond, third, fourth, ocondine 13, column (f))  entage led by line 13, colume 17	or fifth tax year as a	0 section (i01(c)(3) than 33 1/3%, and dorganization .	0 15 16 17 18 line 17 is	0 0 0 0 ▶ □ 0.00% 0.00%

Schedule ve (indicate asserts server 2)

Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Sect	ition A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by	A SECTION		
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status	的		
-	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	<b>特别是</b>		
	grownization was described in section 509(a)(1) or (2).	2		
<b>3</b> a	Utid the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
200	(h) and (c) below.	3a		
b	The state of the s			
	satisfied the public support lests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	35	41. 121.2631	1275795-346
¢	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			No.
194	(El) pumposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
Aze	Wilas any supported organization not organized in the United States ("foreign supported organization")? If		1200	
-545	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a	90001140	W. 102.00.00.00
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	<b>阿黎</b>		78
~	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion		17/4 17/4	
	despite being controlled or supervised by or in connection with its supported organizations.	4b	100.00000000	22/2004/14
c	Did the organization support any foreign supported organization that does not have an IRS determination	<b>然</b>		1888X
v	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to emsure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)		1.00	
	purposes	4c	Vacion st	20090-125774
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		<b>建</b>	
-	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	mumbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;	100 S 10 100 S 10 100 S 10		
	(iii) the authority under the arganization's organizing document authorizing such action; and (iv) how the action		装锤	
	was accomplished (such as by amendment to the organizing document).	5a	Signature 1	
h	Type I or Type II only. Was any added or substituted supported organization part of a class already	10.00	Value of	WAS IN
-	designated in the organization's organizing document?	5b	- seque	153200-100
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	MARK.		<b>BASE</b>
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6	MORROUGH	sastonina s
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor		White.	
1.59	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	1,1-2,133,1	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	A ALBERTA DE LA COMP		<b>MAIN</b>
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8	Activity (1987)	interest .
9a	Was the organization commolled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	every research	STATE OF
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			深始的 海绵外
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	ereseroa.	PROGRAMA.
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit		green in	<b>編制</b>
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	2652P.188	65646767
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section	3136	標機	Part of the second
	45/43(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a	(A. poči ogš	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to	Salges Salges	32.35	32076

determine whether the organization had excess business holdings.)

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dule A (	Trainin 990 (at 1990-EZ) 2016 DR PHILLIPS SOCCER CLUB CORPORATION 47	in	F	ege 5
t IV	Supporting Organizations (continued)			
A CHILDREN			Yes	No
Hla	s the organization accepted a gift or contribution from any of the following persons?	2007.00		37.1
Ag	person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	low, the governing body of a supported organization?	11a		
	annily member of a person described in (a) above?	11b		
	15% combrolled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	110		
	B. Type I Supporting Organizations			
			Yes	No
Dic	the directors, trustees, or membership of one or more supported organizations have the power to			
	what are point or elect at least a majority of the organization's directors or trustees at all times during the			
	want? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	woulled the organization's activities. If the organization had more than one supported organization,		3.3	
	resibe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
		1	(72)*161 <u>9</u> 1	\$ \$
	renizations and what conditions or restrictions, if any, applied to such powers during the tax year.	338-548	(RING)	(1777)
	I the organization operate for the benefit of any supported organization other than the supported	150		
	amization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	7 7 7 1 1 1		
	how providing such benefit camied out the purposes of the supported organization(s) that operated,	<b>沙沙</b>		gride gride
	revised, or controlled the supporting organization.	2		
on	C. Type II Supporting Organizations			
		COUNTY SET	Yes	No
	re a majority of the organization's directors or trustees during the tax year also a majority of the directors			
OK I	inustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
OT I	mamagement of the supporting organization was vested in the same persons that controlled or managed			
the	supported organization(s).	1 1		
om	1. All Type III Supporting Organizations			
			Yes	No
Did	the organization provide to each of its supported organizations, by the last day of the fifth month of the		獨議	
Only	anization's tax year, (ii) a written notice describing the type and amount of support provided during the prior tax	2000		
vea	r, (iii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			Halleson Market
	anization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Market	15,311274
	ine any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	200	1500%	EVAL)
	anization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	organization maintained a close and continuous working relationship with the supported organization(s).	2	the same	See Dist.
	reason of the relationship described in (2), did the organization's supported organizations have a	30500	AMENI	
	nificant voice in the organization's investment policies and in directing the use of the organization's	<b>放</b> 整线		
	ome or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
			MARK!	
	ported organizations played in this regard.  E. Type III Functionally Integrated Supporting Organizations	3		
	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instruci	ions	).
-	The organization satisfied the Activities Test. Complete line 2 below.			
	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	ı (see in	struct	ion
	vities Test. Answer (a) and (b) below.	Casser	Yes	No
Did	substantially all of the organization's activities during the tax year directly further the exernpt purposes of			
the	supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
tho	se supported organizations and explain how these activities directly furthered their exempt purposes,	<b>原装置</b>		
how	the organization was responsive to those supported organizations, and how the organization determined	9299238 201230		
	these activities constituted substantially all of its activities.	2a	ASSESSED S	19 N. P. A.
	the activities described in (a) constitute activities that, but for the organization's involvement, one or more	19,257%	SMYSS.	
of th	e organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	253		
reas	ons for the organization's position that its supported organization(s) would have engaged in these			
actii	nities but for the organization's involvement.	2b	NEW CAR	C. C.
0.0000000000000000000000000000000000000		40	- 1	

770	below, fine governing body of a supported organization?	11a		
b	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11b		
©.	A 35% commuled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	110		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
-1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	requirity appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tex year? If "No," describe im Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	14.45		Ditte:
	ampanication(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	We have providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	ME 2001 (25.00)	211491
Sect	ion C. Type II Supporting Organizations			
0000			Yes	No
Ť	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
,	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	185058	MITTER.	an said
Sect	ion I). All Type III Supporting Organizations			
			Yes	No
Ť	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	300	獨洲	
-	anganization's tax year, (ii) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	arganization's governing documents in effect on the date of notification, to the extent not previously provided?	1	NOT THE	152 - 157 J.
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	2000	Tayer.	EKSTW.
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	WOOD !	SAUST
3	By reason of the relationship described in (2), did the organization's supported organizations have a	819200	essani essani	
•	significant voice in the organization's investment policies and in directing the use of the organization's	<b>於整建</b>		garage.
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			美统
	supported organizations played in this regard.	3	17967 <u>7</u>	Section 1
Secti	ion E. Type III Functionally Integrated Supporting Organizations	J_4_1		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in		íana.	,
a	The organization satisfied the Activities Test. Complete line 2 below.	nstruct	ions	).
	lead			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
G	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see in	struct	ions)
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		16.15	4.457
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	300		
	that these activities constituted substantially all of its activities.	2a	40.000000	opinoar.
b	Did the activities described im (a) constitute activities that, but for the organization's involvement, one or more	100000	MANTE	(M) (M) (A)
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b	wdar0an	Activities of the second
3	Parant of Supported Organizations. Answer (a) and (b) below.		(0000)	Wilde.
盘	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	За	Not think	anstrop
B	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		0.53	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	erred A	med With
	Schedule A (Form		10-EZI	2016
	a *	- 35 S	/	

Schedule A (Form 990 or 990-EZ) 2016 **DR PHILLIPS SOCCER CLUB CORPORATION** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 1 Net short-term capital gain 2 2 Recoveries of prior-year distributions 3 3 Other gross income (see instructions) 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4). 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Appregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a 1b b Average monthly cash balances c Fair imarket value of other non-exempt-use assets 10 d Tiotal (add lines 1a, 1b, and 1c) 10 e Eliscount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 3 0 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 0 0 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 0 0 6 0 0 6 Multiply line 5 by .035. 7 7 Recoveries of prior-year distributions 0 8 Minimum Asset Amount (add line 7 to line 6) 8 0 0 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 0 2 Enter 85% of line 1 0 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 0 4 Enter greater of line 2 or line 3. 0

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

5

5 Income tax imposed in prior year

emergency femporary reduction (see instructions).

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

Par	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organi	zations (continued)	
Sec	tion D - Distributions			Current Year
•	Amounts paid to supported organizations to accomplish	exempt purposes		
	Amounts paid to perform activity that directly furthers exe		orted	
	organizations, in excess of income from activity	* * * * * ******		
1	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
-	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required	)	**************************************	
	Other distributions (describe in Part VI). See instructions			
7	7 Total annual distributions. Add lines 1 through 6.			0
	Distributions to attentive supported organizations to which	h the organization is re-	snonsive	
-67	(provide details in Part VI). See instructions.	. The englandation to to	oponone.	
9	Distributable amount for 2016 from Section C, line 6			0
	Line 8 amount divided by Line 9 amount			0.000
	The second secon	T	(ii)	(iii)
5	Section E - Distribution Allocations (see instructions)	(i)	Lindordictributions	Distributable
-	- seemann tasan tasan (one mondone)	Excess Distributions	Pre-2016	Amount for 2016
4	Distributable amount for 2016 from Section C, line 6		110-2010	
	Underdishibutions, if any, for years prior to 2016	1450		0
2	(reasonable cause required—explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2016:			
ส	Ministratic Contract			
b	64 Nacy Salvett, vs. as Strip, and a value value conductor of the contract of the conductor			
	From 2013			
rd vd				
æ		Color Granden (1985)		
	Total of lines 3a through e			
	Applied to underdistributions of prior years	(	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Applied to 2016 distributable amount		0	
a	Canyover from 2011 not applied (see instructions)			0
í	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	0		
4	Distributions for 2016 from	246537 000 000 000 000		
	Section D. line 7: \$ 0			
a	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount		0	2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2
	Remainder. Subtract lines 4a and 4b from 4.	l .		0
5	Remaining underdistributions for years prior to 2016, if	0	State of the state	
	many. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h		0	
	and 46 from line 1. For result greater than zero, explain in			
	Part W. See instructions			
7	Excess distributions carryover to 2017. Add lines 3			0
	and 4c.			
8	Breakdown of the 7:	0		
a	Section 1991 All Colors 1 -			
Б	Excess from 2013			
C:				
rdi	The second secon			
	The state of the s			
e	E100855 from 2016		Allow Literature Day References Schools A	<b>WYSIEEESAWE STATEMENTS ES</b>

Schedule A (Fo	rm 990 or 990-EZ) 2016	DR PHILLIPS SC	OCCER CLUB CO	DRPORATION		47-2000 B	Page 8
Part VI	Supplemental Info	mation. Provide th	e explanations re	equired by Part II,	line 10; Parl II, line 17a	or 17b; Part	
MANAGEMENT I	III line 12: Part IV.	Section A. lines 1, 2	2, 3b, 3c, 4b, 4c,	5a, 6, 9a, 9b, 9c,	11a, 11b, and 11c; Part	IV, Section	
	R lines 1 and 2: Pa	d W Section C lin	a 1: Part IV. Sect	tion D. lines 2 and	3; Part IV, Section E, lir	nes 1c. 2a. 2b.	
	3a and 3h: Part V	line 1. Part V. Sect	on B line 1e Pa	rt V Section D lin	es 5, 6, and 8; and Part	V Section E.	
	lines 2, 5, and 6. Als	co complete this na	rt for any addition	nal information (S	ee instructions )	,	
	illes 2, 3, and 6. Als	so complete mis pe	it for any addition	nai mornadon. Jo	GO III GOLISTIO.		
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SCHEDULE L (Form 990) or 990-EZ)

Transactions With Interested Persons

201

Complete if the organization answered "Yes" on Form 990, Part IV, line 25:1, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

2016

OMB No. 1545-0047

Attach to Form 990 or Form 990-EZ.

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

Open To Public Inspection

Department of the Treasury Internal Revenue Gervice Name of the organization

DR PHILLIPS SOCCER CLUB CORPORATION

-	Employer Identification number
	47.5000000000000000000000000000000000000

Complete if the organization 1 (a) Name of disqualited passon		(b) Relationship between disqualified person and				(c) Description of transaction				(d) Corr	ected		
1	(a) Name of disqualif	ne of disqualified persons (b) relationship b		led parson organization			(c) Describac	n or trans	saction			Yes	No
(1)													
(2)													
(3)										***********			
(4)	On the state of the		.,							****			
(5)									V-2-7-				
(6)												Ll	L
2 1	Eriter the amount of	f tax incurred by	the organizat	ion mar	nagers o	or disqualified pe	ersons dunnig the	e year					
	under section 4958												
3	Enter the amount of	f tax, if any, on li	ine 2, above,	reimbur	sed by t	he organization			1	⊳ \$			
Part I	Complete if the	or From Interes organization a ported an amou	nswered "Yes	on Fo	rm 990- l X, line	EZ, Part V, line 5, 6, or 22.	38a or Form 990), Part	IV, lir	ne 26;	or if	the	200
Part II	Complete if the	e organization a	nswered "Yes	" on For 90, Part (d) Lo fron	rm 990- t X, line an to or the lization?	EZ, Part V, line 5, 6, or 22. (e) Original principal amount	(f) Balance due	(g) In d			proved ard or	(i) W	
	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	" on For 90, Part (d) Lo fron	X, line an to or m the	5, 6, or 22. (e) Original	T	7		(h) Ap	proved ard or	(i) W	ment
(a) Nar	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	(d) Lo from	t X, line on to or on the lization?	5, 6, or 22. (e) Original	T	(g) In d	efault?	(h) Ap	proved ard or nittee?	(i) W agreei	ment?
(a) Nar	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	(d) Lo from	t X, line on to or on the lization?	5, 6, or 22. (e) Original	T	(g) In d	efault?	(h) Ap	proved ard or nittee?	(i) W agreei	ment
(a) Nar (1) (2)	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	(d) Lo from	t X, line on to or on the lization?	5, 6, or 22. (e) Original	T	(g) In d	efault?	(h) Ap	proved ard or nittee?	(i) W agreei	ment
(a) Nar	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	(d) Lo from	t X, line on to or on the lization?	5, 6, or 22. (e) Original	T	(g) In d	efault?	(h) Ap	proved ard or nittee?	(i) W agreei	ment
(1) (2) (3) (4)	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	(d) Lo from	t X, line on to or on the lization?	5, 6, or 22. (e) Original	T	(g) In d	efault?	(h) Ap	proved ard or nittee?	(i) W agreei	ment?
(1) (2) (3) (4) (5)	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	(d) Lo from	t X, line on to or on the lization?	5, 6, or 22. (e) Original	T	(g) In d	efault?	(h) Ap	proved ard or nittee?	(i) W agreei	ment?
(1) (2) (3) (4)	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	(d) Lo from	t X, line on to or on the lization?	5, 6, or 22. (e) Original	T	(g) In d	efault?	(h) Ap	proved ard or nittee?	(i) W agreei	ment?
(a) Nar (1) (2) (3) (4) (5) (6) (7)	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	(d) Lo from	t X, line on to or on the lization?	5, 6, or 22. (e) Original	T	(g) In d	efault?	(h) Ap	proved ard or nittee?	(i) W agreei	ment?
(1) (2) (3) (4) (5) (6)	Complete if the organization re	ported an amou	nswered "Yes int on Form 9 (c) Purpose	(d) Lo from	t X, line on to or on the lization?	5, 6, or 22. (e) Original	T	(g) In d	efault?	(h) Ap	proved ard or nittee?	(i) W agreei	

Part III Grants or Assistance Benefiting Interested Persons,
Complete if the organization answered "Yes" on Form 990, Part IV, line 27

Complete it the o	Iganization answered 165 on	Tome boot t diete, mis		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2016

A TO A SECURITION OF THE PARTY
47.

Part IV	Complete if the organization ar				(a) Sh	aring of
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz rever	zation's nues?
					Yes	No
(1)						
(2)						
(3)	4		-			
<u>(4)</u> (5)						
(6)			,			-
(7)				A PART MANAGEMENT CONT. THE NAME OF THE PARTY		
(8)						
(9)	***************************************					
(10) Part V	Supplemental Information					
I GIL V	Provide additional information	for responses to questions of	n Schedule L (see in	nstructions).		

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SCHEDULE O (Form \$190 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.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Inspection Employer Identification number

Name of the organization	47-
DR PHILLIPS SOCCER CLUB CORPORATION	122
Form 990, Part VI, Section A, Line 2: The board of directors is composed by members of the	**************************************
same family.	
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Scheduki O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization	Employer Identification number
DR PHILLIPS SOCCER CLUB CORPORATION	47.
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 Other contributions total
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