Form	99	0
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** PUBLIC DISCLOSURE COPY ** **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.



ΑF	or th	e 2023 calendar year, or tax year beginning and	ending		
B a	Check if Ipplicab	e: C Name of organization		D Employer identific	ation number
	Addre	USA BOXING, INC.			
	Name			84-160416	58
	Initial return	Number and street (or P.0. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final return			719-866-2	
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	10,163,467.
	Amen	COLORADO SPRINGS, CO 80909		H(a) Is this a group re	
	Applio tion pendi	F Name and address of principal officer: MICHAEL MCAILE		for subordinates	? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates ind	
<u> </u>]	Tax-ex	empt status: $X 501(c)(3) 501(c)()$ (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. See instructions
_	Nebsi			H(c) Group exemption	
	_	f organization: X Corporation Trust Association Other	L Year	of formation: 2001 N	I State of legal domicile: CO
Pa	art I	Summary	~~~~~		
ė	1	Briefly describe the organization's mission or most significant activities: THE	CORPOR	ATION IS THE	NATIONAL
anc		GOVERNING BODY FOR AMATEUR BOXING AND IS			
Activities & Governance	2	Check this box if the organization discontinued its operations or dispos	sed of more		
õ	3				<u> </u>
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4	Number of independent voting members of the governing body (Part VI, line 1b)			31
ies	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			150
tivit	6	Total number of volunteers (estimate if necessary)			0.
Act	/ a				0.
	0	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u> </u>		Current Year
	8	Contributions and grants (Dart )/III line 1b)		1,624,853.	3,169,234.
ani	9	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		5,189,010.	5,971,103.
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		24,037.	30,368.
Re	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		143,944.	153,233.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,981,844.	9,323,938.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		203,128.	229,871.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	40	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,302,736.	2,755,186.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
per	b	Total fundraising expenses (Part IX, column (D), line 25) 346, 3	88.		
ы	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,927,990.	5,250,218.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,433,854.	8,235,275.
	19	Revenue less expenses. Subtract line 18 from line 12		547,990.	1,088,663.
or				ginning of Current Year	End of Year
Assets Balanc	20	Total assets (Part X, line 16)		3,723,567.	5,701,145.
ASS	21	Total liabilities (Part X, line 26)		2,165,226.	2,973,633.
Net	1	Net assets or fund balances. Subtract line 21 from line 20		1,558,341.	2,727,512.
D		Signatura Blook		•	

Part II | Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer		Date						
-	MICHAEL MCATEE, EXECUTIVE	DIRECTOR							
	Type or print name and title								
	Print/Type preparer's name	Preparer's synauro and Date	Check PTIN						
Paid	JILL J GOODWIN	JILL J GODWIN 11/04	/24 self-employed P00450838						
Preparer	Firm's name WAUGH & GOODWIN,	LLP	Firm's EIN 20-1766527						
Use Only	Firm's address 1365 GARDEN OF TH	IE GODS, STE 150							
	COLORADO SPRINGS,	CO 80907	Phone no. (719) 590 - 9777						
May the I	May the IRS discuss this return with the preparer shown above? See instructions 🛛 🚺 Yes 🔲 No								
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2023) USA BOXING, INC. 84-160	4168 _F	Page 2
Pa	rt III Statement of Program Service Accomplishments		0
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	THE CORPORATION IS THE NATIONAL GOVERNING BODY FOR AMATEUR BOXI	NG AND	
	IS RESPONSIBLE FOR THE PROMOTION AND DEVELOPMENT OF AMATEUR BOX		
	THE UNITED STATES. THE ORGANIZATION'S MISSION STATEMENT IS TO		
	AND GROW OLYMPIC-STYLE AMATEUR BOXING IN THE UNITED STATES AND		
2	Did the organization undertake any significant program services during the year which were not listed on the	10	
2		Yes 🛛	
	prior Form 990 or 990-EZ?		
	If "Yes," describe these new services on Schedule O.		<b>-</b> ]
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes 2	No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by e		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total ex	penses, and	
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 2,575,805. including grants of \$ 229,871. ) (Revenue \$	443,65	<b>4.</b> )
	DEVELOPMENT AND OTHER PROGRAMS - THE CORPORATION PROMOTES ATHLE	TE'S	
	PHYSICAL AND MENTAL TRAINING IN ORDER TO FURTHER THEIR DEVELOPM	ENT.	
			-
4b		<u>,051,05</u>	<u>1.</u> )
	MEMBERSHIP - THE CORPORATION PROVIDES OFFICIAL OLYMPIC MEMBERSH		
	CREDENTIALS AS WELL AS ACCIDENT AND GENERAL LIABILITY INSURANCE	TO ITS	
	MEMBERS.		
			1
4c	(Code:) (Expenses \$1,620,009. including grants of \$) (Revenue \$	629,63	( <b>1.</b> )
-4c	NATIONAL EVENTS - THE CORPORATION SANCTIONS AMATEUR BOXING EVEN	TS FOR	
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Form 990 (2023) USA BOXING, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
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		X
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<b>v</b>
•	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?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
44	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
~	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	114		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
Ū	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4		v
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"	40		x
20-	complete Schedule G, Part III	<u>19</u>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		
р 21	It "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
~1	domestic government on Part IX, column (A), line 1? <i>If "Yes." complete Schedule I. Parts I and II</i>	21	Х	

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 Form 990 (2023)
 USA BOXING, INC.

 Part IV
 Checklist of Required Schedules (continued)

22       Did the organization report more than \$5,000 of grants or other assistance to ar for domestic individuals on Part IX. Control Part IX. Schedule II, Part I and III.       22       X         23       Did the organization narwer "Yes" to Part IVI. Section A, Ine 3, 4, or 6, about compensation of the organization is current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.       23       X         24       Did the organization narwer "Yes" to Part IVI. Section A, Ine 3, 4, or 6, about compensation of the organization is set assessed after December 31, 2002? II "Yes," answer lines 24b through 24 and complete Schedule K, II "No." go to line 25a       24a       X         25a       Did the organization matrian an escrow account other than a refunding escrow at any time during the year?       24d       X         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year and that the transaction with a disqualified person in a prior year.       26b       X         25       Did the organization report any amount on Part X, line 5 or 22, for receivables from or paylobes to any current or former officer, director, trustee, key employee, creator or founder, substantial contributors? If "Yes," complete Schedule L, Part II       27b       X				Yes	No
23       Did the organization aswer "Yes" to Part VI, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employee, and highest compensated employees? If "Yes," complete Schedule J.         24       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was used after December 31, 2002? If "Yes," complete 3db drough 2dd and complete Schedule K. If "No," to tain 25a.       Zda         24       Did the organization meant any proceeds of tax-exempt bonds beyond a temporary parted exception?       Zda         25       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 1       Zda         26       Did the organization are sta as no behart of "issuer for bonds outstanding at any time during the year?       Zdd         26       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 1       Zda         26       Did the organization avare that it engaged in an wcreas benefit transaction with a disqualified person during the year? 1       Zda         27       Did the organization proper any of these persons? If "Yes," complete Schedule L, Part II       Zda         27       Did the organization party to a business transactor with or effect, director, tustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part II.	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former offices, directors, trustees, key employees, and highest compensated employees? If 'Yes, ' complete Schedule J.       23       X         24a       Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, if the 'Wes, '' the ''''''''''''''''''''''''''''''''		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
Schedule J       23       X         24a Did the organization haves 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 'Yas,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a       24a         25 Did the organization meantain an escrow account other than a refunding secrow at any time during the year to defease any tax-evempt bonds?       24d         26 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year?       24d         27 Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization sprace hear near the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year?       25a         25b Did the organization provide any of these presons? If 'Yes,' complete Schedule L, Part I       25a         26 Did the organization provide sprat or them assistance to any current or form 5016c, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of notemer of any of these presons? If 'Yes,' complete Schedule L, Part I       26         27       Did the organization provide sprat or these presons? If 'Yes,' complete Schedule L, Part I       27         28       Was the organization provide spresof an 'miny member of any of these presons? If 'Yes,'	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
24a       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule L, "If "No," or other e2sa       24b         2       bill the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b         2       bill the organization maintain an excrow account other than a refunding acrow at any time during the year?       24d         2       bill the organization maintain an excrow account other than a refunding acrow at any time during the year?       24d         2       bill the organization maintain an excrow account other than a refunding at any time during the year?       24d         2       bill the organization maintain an excreas benefit transaction with a disqualified person during the year?       25a         2       bill the organization avare that the angade in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27: if "Yes," complete Schedule L, Part I       25b         2       Did the organization avare the member of any of these persons? If "Yes," complete Schedule L, Part II       26         2       Did the organization avare the these persons? If "Yes," complete Schedule L, Part II       26         2       Did the organization avare the member of any of these persons? If "Yes," complete Schedule L, Part IV       28a		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
lat day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete     24a     X       Schedule K. If "No," go to line 25a     X     24b     24c       D bit the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax evempt bonds?     24d     24d       25     Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction bas and tax evempt bonds?     24d     25a       26     Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the thransaction has not been reported on any of the organization in prior Form 990 or 990-E27. If "Yes," complete Schedule L, Part I     25a     X       26     Did the organization invest any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial continutor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II     26     X       27     Did the organization are yor the condices, substantial continutor, or 35% controlled entity or dividual described in line 28a" If "Yes," complete Schedule L, Part III     26     X       27     Was the organization are pay and widescribed on any of these persons? If "Yes," complete Schedule L, Part III     26     X       28     Was the organization in cell to in line 28a? If "Yes," complete Schedule L, Part III			23	X	
Schedule K. If "No;" to to line 25a       24a       X         b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exempt bonds?       24b       24b         c Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exempt bonds?       24c       24b         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? (if "Yes," complete Schedule L, Part I       25a         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization are excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization prior Forms 900 or 990-E27. If "Yes," complete Schedule L, Part I       25a       X         25b       Did the organization are that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction neport any amount on Part X, line 5 or 22, tor receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization aparty to a business transaction with one of the following parties? (See the Schedule L, Part III)       27       X         28       Was the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule L, Part II       28a       X<	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
b       Dd the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24b         c       Dd the organization maintain an escrow account other than a refunding escrow at any time during the year to delease any tax exempt bonds?       24c         d       Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24d         25a       Section 601(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization are excess benefit transaction with a disqualified person in a prior year, and that the transaction bas not been reported on any of the organization organes point or ports 900 or 990-E27 // *res,* complete Schedule L, Part I       25a         25       Dd the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If *'kes,* complete Schedule L, Part II       26a       X         27       Was the organization provide a grant or other substancial contributor, or 35% controlled entity or family member of any of these persons? If *'kes,* complete Schedule L, Part IV, instructions for applicable fling thresholds, conditions, and exceptions):       27       X         28       A tamily member of any individual described in line 28a? If *'yes,* complete Schedule L, Part IV, instructions for explicable fling thresholds, conditions, and exceptions):       28a       X         29       Dd the organization equivation encore than \$25,000 in noncash con		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24c         d       Did the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?       25a         b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 900-E2?       If "Yes," complete Schedule L, Part I       25b       X         25 Did the organization avare that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction member of any of these persons? If "Yes," complete Schedule L, Part II       25b       X         26 Did the organization aparty to a business transaction with one of the following parties? (See the Schedule L, Part II       28       X         27 Did the organization aparty to a business transaction with one of the following parties? (See the Schedule L, Part II       28       X         28 Was the organization receive contributor or memolyce thereol or family member of any of these persons? If "Yes," complete Schedule L, Part II       28       X         29 Did the organization receive contributions of art, historical transaction secretores?       29       X		Schedule K. If "No," go to line 25a	24a		Х
any tax exempt bonds?     24c       d Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year?     24d       25a Section 501(c)(a), 501(c)(a), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization is prior Forms 990 or 990 E2? If "Yes," complete Schedule L, Part I     25a       X     Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II     26a     X       27     Did the organization provides grant or them assistance to any or three persons? If "Yes," complete Schedule L, Part II     27a     X       28     Was the organization provides thereol of rainly member of any of these persons? If "Yes," complete Schedule L, Part II     27a     X       29     Was the organization provides thereol of rainly member of any of these persons? If "Yes," complete Schedule L, Part II     27a     X       28     Was the organization provide thereol of rainly member of any of these persons? If "Yes," complete Schedule L, Part IV     28a     X       29     Did the organization self-extredue to frame officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV     28a     X       29     Did the organization			24b		
d Did the organization act as an "on behalf of "issue for bonds outstanding at any time during the year?       24d         25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>II"</i> "Yes," complete Schedule L, Part I       25a         b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 <i>II"</i> "Yes," complete Schedule L, Part I       25a       X.         27D Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>II "Yes," complete Schedule L, Part II</i> 26       X.         28 Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of any individual described in line 28a? <i>II "Yes," complete Schedule L, Part IV</i> 27       X         28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV)       28a       X         29 Did the organization receive more than \$25,000 in nonceash contributions? <i>II "Yes," complete Schedule L, Part IV</i> 28a       X         29 Did the organization receive more than \$25,000 in nonceash contributions? <i>II "Yes," complete Schedule N, Part I</i> 30 <td>С</td> <td></td> <td></td> <td></td> <td></td>	С				
25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a       X.         b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27. If "Yes," complete Schedule L, Part I       25b       X.         D Id the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27. If "Yes," complete Schedule L, Part I       25b       X.         21       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, agrant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       27       X         28       Was the organization avert than \$25,000 in noncesh contributions? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in noncesh contributions? If "Yes," complete Schedule N, Part I       30       X         20       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X <tr< td=""><td></td><td></td><td></td><td></td><td></td></tr<>					
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a       X         b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27? If "Yes," complete Schedule L, Part I       25b       X         27       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, carcator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         28       Ud the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, carcator or founder, substantial contributor, or a5% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       26       X         29       Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV.       28       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule L, Part IV       28       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       31       X         31       Did the organization receive ant			24d		
b       is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 (#'Yes,' complete Schedule L, Part I       25b       X         26       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of ramily member of any of these persons? If 'Yes,' complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part III)       28       X         29       X and the reganization receive more individuals and/or organizations described in line 28a or 28D? If 'Yes,' complete Schedule L, Part IV       28       X         29       Did the organization receive more than \$25,000 in noncash contributions? If 'Yes,' complete Schedule N, Part II       30       X         29       Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part II       31       X </td <td>25a</td> <td></td> <td></td> <td></td> <td>37</td>	25a				37
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? // fr "Yes," complete       25b       X         26       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? // fr "Yes," complete Schedule L, Part II       26       X         27       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? // fr "Yes," complete Schedule L, Part II       26       X         27       X       Was the organization apaty to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):       a       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // fr "Yes," complete Schedule L, Part IV       28a       X         28       DA family member or any individual described in line 28a? // "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive more than 525,000 in noncash contributions? // fr Yes," complete Schedule M       30       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contribution			25a		X
Schedule L, Part I       25b       X         26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):       a       a       a       a         29 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28a       X         29 Did the organization receive more than \$25,000 in noneash contributions? If "Yes," complete Schedule M       29       X         30 Did the organization receive contributions of art, historical treasures, or other similar assets? or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31 Did the organization receive ontrobubutons of art, historical treasures, or other similar assets? If "Yes," complete Schedule N, Part II       31       X         32 Did the organization sel, exchange, dispose of, or transfer mo	b				
26       Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.       27       X         28       Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV. instructions for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If       "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N, Part I       30       X         31       X       29       X       30       X         30       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N, Part I       31       X <td></td> <td></td> <td>0.51</td> <td></td> <td>v</td>			0.51		v
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> .       27       X         28       Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part II).       27       X         29       Mas the organization for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> .       28a       X         20       A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> .       28b       X         21       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> .       28a       X         22       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> .       30       X         33       Did the organization nealed to any tax exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part I</i> .       33	~	,	250		
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof), a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       27       X         28       Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV. instructions for applicable filing thresholds, conditions, and exceptions):       a current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         2 A damily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       X         2 A damily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28a       X         2 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.       29       X         3 Did the organization receive contributions of art, historical treasures, or other similar assets? If "Yes," complete Schedule N, Part I       31       X         3 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34 <td>26</td> <td></td> <td></td> <td></td> <td></td>	26				
<ul> <li>27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.</li> <li>28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV. instructions for applicable filing thresholds, conditions, and exceptions):</li> <li>a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.</li> <li>b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.</li> <li>c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.</li> <li>29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N, Part I.</li> <li>29 X</li> <li>20 Did the organization neceive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N, Part I.</li> <li>20 X</li> <li>21 Did the organization neceive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I.</li> <li>31 X</li> <li>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.</li> <li>33 X</li> <li>34 Was the organization nearest on taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</li> <li>33 Schedule N, Part II.</li> <li>34 Was the organization nearest on taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</li> <li>35a X</li> <li>35a X</li> <li>35a X</li> <li>35a X</li> <li>35a Section 501(c)(3) organizat</li></ul>					v
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.       27       X         28       Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV       28a       X         b       A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         c       A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV       28b       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M       20       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-37 If "Yes," complete Schedule R, Part I       31       X         34       Was the organization nealed to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and P	07		20		
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	21				
28       Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If       "Yes," complete Schedule L, Part IV       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       29       X         30       Did the organization neceive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         32       X       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       33       X         35a       Did the organization. SLIC(SI) (3)? If "Yes," complete Schedule R, Part V, line 2       35a       X         35a       Did the organization. SLIC(SI) (3)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         35a       Did the organization. SLIC the organiza			07		v
instructions for applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If       "Yes," complete Schedule L, Part IV       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       33       33       X         34       Was the organization neceive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       X       S5a       X       35b	20		21		- 23
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 28a       X         "Yes," complete Schedule L, Part IV       28a       X         b A tamily member of any individual described in line 28a? <i>If</i> "Yes," complete Schedule L, Part IV       28b       X         28b       X       28b       X         28c       X       28b       X         28b       X       28b       X         28c       X       28b       X         28c       X       28b       X         28b       X       28b       X         28b       Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule N, Part I       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part I       31       X         32       Did the organization neated to any tax-exempt or taxable entity? <i>If</i> "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       33       X         33       Did the organization neated to any tax-exempt or taxable entity? <i>If</i> "Yes," comple	20				
"Yes," complete Schedule L, Part IV       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         33       Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         34       Was the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       35a       X         35a       Did the organizations. Did the organization make any transfers to an exempt non-charitable related organiz	2				
b       A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV       28b       X         c       A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization or n100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I       32       X         33       Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       33       X         34       Was the organization acontrolled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," complete Schedule R, Part V, line 2       35a       X         35a       Did the organization conduct more than 5% of its activities through an entity that is not a related organization related organization f	a		282		x
c       A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? [f         "Yes," complete Schedule L, Part IV       28c         29       Did the organization receive more than \$25,000 in noncash contributions? [f "Yes," complete Schedule M       29         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? [f "Yes," complete Schedule M       30         31       Did the organization liquidate, terminate, or dissolve and cease operations? [f "Yes," complete Schedule N, Part I       31         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? [f "Yes," complete       32         33       Did the organization related to any tax-exempt or taxable entity? [f "Yes," complete Schedule R, Part I]       33       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organizations. Did the organization conduct more than 5% of its activities through an entity that is not a related organization?       35b       35a         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         35b       Did the organization conduct more than 3% of its activities through an entity that is not a related organization?       35a       X	h				
"Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         33       Did the organization neltity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       X       35b       35b       35b         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       36			200		
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<ul> <li>sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i></li> <li>Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and</i></li> <li><i>Part V, line 1</i></li> <li>Did the organization have a controlled entity within the meaning of section 512(b)(13)?</li> <li>If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i></li> <li>Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i></li> <li>Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i></li> <li>Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?</li> <li>Netter All Form 000 filem are required to complete Schedule C organization of the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?</li> </ul>	33				
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<ul> <li>within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i></li></ul>	35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
<ul> <li>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i></li></ul>	b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
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and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>			36		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	37				
Nate: All Form 000 files are required to complete Schedule O			37		X
Note: All Form 990 filers are required to complete Schedule O	38			.,	
	Dar	Note: All Form 990 filers are required to complete Schedule O	38	Х	
	rai				
Check if Schedule O contains a response or note to any line in this Part V		Uneck it Schedule U contains a response or note to any line in this Part V		<b>V</b>	
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       72       72	1-	Enter the number reported in box 3 of Form 1006 Enter $\Omega$ if not applicable $ 10 $ 72		Tes	INO
1a       72         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1b       0					
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming					
(gambling) winnings to prize winners?	Ū		1c	х	

Form	<u>990 (2023)</u> USA BOXING, INC. 84-160	4168	Р	age <b>5</b>
Par				0
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 3	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	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 on Schedule O	3b		
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 filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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?	<u>6a</u>		X X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			X X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			37
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	00		
a h	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? <b>Section 501(c)(7) organizations.</b> Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
11	Section 501(c)(12) organizations. Enter:	-		
a	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
~	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 15			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 15			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	-		
2		_		Х
•	officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			v
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b		12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а		15a	Х	
b		15b		Х
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
ieu	taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	Tou		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s		availat	
.0	for public inspection. Indicate how you made these available. Check all that apply.	. Grify)	avanal	
10		finer		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	innano	ial	
00	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records THE ORGANIZATION - 719-866-2300			
	1 OLYMPIC PLAZA, COLORADO SPRINGS, CO 80909			
00007		Earm	990	(2023)
332UO	6 12-21-23	1 0111		120201

Page **6** 84-1604168

USA BOXING, INC.

Form 990 (2				84-1604168	
Part VI	Governance, Management, a	and Disclosure. For eac	"Yes" response to lines 2 through	7b below, and for a "No" i	response

Form 990 (2		84-1604168	Page 7				
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highes	t Compensated					
	Employees, and Independent Contractors						
	Check if Schedule O contains a response or note to any line in this Part VII		X				
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees						
1a Comple	• Complete this table for all persons required to be listed. Depart componentian for the calendar year anding with an within the arganization's tax year						

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than c s both	ı an	(D) Reportable compensation from	(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) MICHAEL MCATEE	60.00									
EXECUTIVE DIRECTOR				Х				228,077.	0.	32,107.
(2) WILLIAM WALSH	60.00									
HEAD COACH					Х			190,000.	0.	24,300.
(3) MATTHEW JOHNSON	60.00									
HIGH PERFORMANCE DIRECTOR						X		157,688.	0.	23,568.
(4) TYSON LEE	5.00									
PRESIDENT		Х		Х				0.	0.	0.
(5) ELISE SEIGNOLLE	5.00									
TREASURER		Х		х				0.	0.	0.
(6) HECTOR COLON	5.00									
VICE CHAIR		Х		Х				0.	0.	0.
(7) ANGELICA COLANTUONI	5.00									
INDEPENDENT DIRECTOR		Х						0.	0.	0.
(8) CHRISTY HALBERT	5.00									
LBC DIRECTOR		Х						0.	0.	0.
(9) ERIC BULLER	5.00									
AFFILIATED GROUP MEMBER DIR		Х						0.	0.	0.
(10) JONATHAN PRIN	5.00									
GENERAL MEMBERSHIP DIRECTO		Х						0.	0.	0.
(11) EBONY HALIBURTON	5.00									
INDEPENDENT DIRECTOR		Х						0.	0.	0.
(12) CHRIS TROMBETTA	5.00									
INDEPENDENT DIRECTOR		Х						0.	0.	0.
(13) BRIAN CEBALLO	5.00									
ATHLETE DIRECTOR		Х						0.	0.	0.
(14) FRACHON CREWS-DEZURN	5.00									
ATHLETE DIRECTOR		Х						0.	0.	0.
(15) RAHIM GONZALES	5.00									
ATHLETE DIRECTOR		Х						0.	0.	0.
(16) OMARI JONES	5.00									
ATHLETE DIRECTOR		Х						0.	0.	0.
(17) DANIELLE PERKINS	5.00									
ATHLETE DIRECTOR		Х						0.	0.	0.

Form 990 (2023) USA BOXII	NG, INC.								84-1604	4168 Page	8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)	- <u></u>	
(A) Name and title	<b>(B)</b> Average hours per week	box	not c , unles	ss per	ition more rson i	than c s both r/trust	an	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)								organizations (W-2/1099-MISC/	compensation from the organization and related organizations	
(18) DARRYL SMITH	5.00	_	_	0	×	<u>+ 0</u>					_
INDEPENDENT DIRECTOR		X						0.	0.	. 0	•
											_
											_
										_	
											_
1b Subtotal								575,765.	0.		
c Total from continuation sheets to Part VI <u>d</u> Total (add lines 1b and 1c)								0.	0.		
2 Total number of individuals (including but n								· · ·		1 191913	<u> </u>
compensation from the organization											3
<b>3</b> Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s	-		•	•	-		Ŭ			Yes No 3 X	
4 For any individual listed on line 1a, is the su	im of reportable	e co	mpe	ensa	tion	and	oth	ner compensation from t	he organization	4 X	
<ul><li>and related organizations greater than \$150</li><li>5 Did any person listed on line 1a receive or a</li></ul>											
rendered to the organization? <i>If "Yes," corr</i> Section B. Independent Contractors	plete Schedule	e J fo	or su	ich į	oers	on .				5 X	<u> </u>
1 Complete this table for your five highest co		•							, ,	ation from	_
the organization. Report compensation for (A)	the calendar ye	ear e	endir	ig w	ith c	or wi	hin:	(B)		(C)	
Name and business	address						_	Description of s	services	Compensation	
939 DEEPWELL DR, BETHESDA	A, MD 20	81	7				_	HEALTH SERVI	CES	273,350	•
											_
											—
2 Total number of independent contractors (i	ncluding but pr	nt lin	niter	tot	thos	e lie	hed	above) who received m	ore than		
\$100.000 of compensation from the organi	•		met	0	1 105						

rm ar	990 (2 t VIII	2023) Statement			OXING,	I	NC.			84-1604	168	Pag
						nco	or note to any lin	e in this Part VIII				Г
		CHECK II SCHE		COIL	ans a respu	1150		(A)	(B)	(C)	(	 (D)
								Total revenue	Related or exempt	Unrelated	Revenue	
										business revenue		tax und
											sections	512 -
S	1 a	Federated campai	ians		1a							
Ī		Membership dues	•									
and Other Similar Amounts		•			·····							
An		Fundraising events										
ar	d	Related organizati	ions		1d		244,769.					
Ē	е	Government grant	ts (contr	ributi	ons) 1e							
ŝ	f	All other contribution	ns. aifts.	arant	ts. and							
Jer		similar amounts not		-		2.	924,465.					
ö							281,888.					
p	g	Noncash contributions in		lines 1	1a-1f <b>1g</b>	Þ		2 1 6 0 2 4				
ar	h	Total. Add lines 1a	a-1f				1	3,169,234.				
							Business Code					
	2 a	MEMBERSHI	P DU	ES			900099	5,051,051.	5,051,051.			
		NATIONAL	EVEN	י ידי	REVENU	E	711300	629,631.				
ue		MEDIA AGR				_	900099	150,000.				
Revenue					000000							
3ev	d	CORPORATE					900099	103,792.				
ш	е	OTHER PRO	GRAM	[ R.	EVENUE		900099	36,629.	36,629.			
	f	All other program	service	reve	nue							
								5,971,103.				
								5/5/1/1000				
	3	Investment income	•	•	-						20	
		other similar amou	unts)					39,559.			39	,55
	4	Income from invest	stment c	of tax	-exempt bo	nd p	roceeds					
	5	Royalties										
		,			(i) Rea		(ii) Personal					
	6 .	Oraca ranta		6.			()					
				6a								
	b	Less: rental expen	nses	6b								
	с	Rental income or (	(loss)	6c								
	d	Net rental income	or (loss)	)								
		Gross amount from		<i></i>	(i) Securi		(ii) Other					
	<i>i</i> u	assets other than inv		7-	827,53							
	_		,	<i>1</i> a	021,5							
	b	Less: cost or other										
		and sales expenses		7b	836,72							
	с	Gain or (loss)		7c	-9,19	91.						
		Net gain or (loss)						-9,191.			-9	,19
		Gross income from f										/ = -
	8 a											
		including \$										
		contributions repo	orted on	line	1c). See							
		Part IV, line 18				8a						
	b	Less: direct expen				8b		1				
		Net income or (los					·····					
	9 a	Gross income from				•						
		Part IV, line 19				9a						
	b	Less: direct expen	nses			9b						
		Net income or (los					-					
<b>.</b>						<u> </u>						
	iu a	Gross sales of inve				4	156 041					
		and allowances					156,041.					
	b	Less: cost of good	ds sold			10b	2,808.					
	с	Net income or (los	ss) from	sales	<u>s of i</u> nvento	ry	<u></u>	153,233.	153,233.			
		,					Business Code		-			
Ι.	44 -											
a 1	11 a											
neo	b											
enue												
evenue	С											
Revenue	c d											
Revenue		All other revenue <b>Total.</b> Add lines 1										

Form 990 (			BOXING,	
Part IX	Statement of	Functio	onal Expense	es

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

			U		
	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b,	Total expenses	Program service	Management and	Fundraising
7b,	8b, 9b, and 10b of Part VIII.	•	expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	79,370.	79,370.		
2	Grants and other assistance to domestic	-	-		
-		150,501.	150,501.		
•		130,301.	130,301.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	471,991.	274,517.	171,705.	25,769.
6					2077020
0	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$ ) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,807,535.	1,464,133.	180,374.	163,028.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	135,746.	87,729.	38,960.	9,057.
9	Other employee benefits	159,883.	115,155.	28,360.	<u>9,057.</u> 16,368.
	· · · · ·	180,031.	134,935.	29,170.	15,926.
10	Payroll taxes	TOO, ODT.	, , , , , , , , , , , , , , , , , ,	49,110.	IJ,940•
11	Fees for services (nonemployees):				
а	Management				
b	Legal	89,723.		89,723.	
	Accounting	17,775.		17,775.	
	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
	Investment management fees	10,525.		10,525.	
f		10,525.		10,525.	
g			FC2 1C0	100 000	10 001
	column (A), amount, list line 11g expenses on Sch 0.)	761,666.	563,168.	178,637.	<u>    19,861.</u> 7,511.
12	Advertising and promotion	7,551.		40.	7,511.
13	Office expenses	239,471.	196,312.	41,873.	1,286.
14	Information technology				
15	Royalties				
16	Occupancy	35,123.	4,901.	20,579.	9,643.
		1,756,423.	1,570,564.	143,924.	41,935.
17	Travel	1,750,425.	1,570,504.	115,5210	41,755.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				· · · •
19	Conferences, conventions, and meetings	8,999.	8,309.	250.	440.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,767.	10,767.		
23		919,406.	919,254.	152.	
	Other expenses. Itemize expenses not covered	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	1,72.0	
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а	DUES AND FEES	457,410.	425,856.	27,868.	3,686.
b	VIK DISTRIBUTION	243,343.	221,893.		21,450.
с	BACKGROUND SCREENING	236,597.	236,597.		
d	BOXING SUPPLIES AND EQU	202,560.	191,120.	1,012.	10,428.
	All other expenses	252,879.	220,384.	32,495.	, , ,
		8,235,275.	6,875,465.	1,013,422.	346,388.
25	Total functional expenses. Add lines 1 through 24e	0,433,413.	0,0/5,405.	, U_J, 444.	540,500.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					<b>000</b> (0000)

	XING,	INC.	
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		Check if Schedule O contains a response or not	te to an	v line in this Part X			
			<u></u>		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			80,306.	1	1,446,878.
	2	Savings and temporary cash investments		2,455,450.	2	2,569,945.	
	3	Pledges and grants receivable, net		19,560.	3	107,065.	
	4	Accounts receivable, net			48,622.	4	159,525.
	5	Loans and other receivables from any current o	r former	officer, director,			
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	se pers	ons		5	
	6	Loans and other receivables from other disquali					
		under section 4958(f)(1)), and persons described		6			
s	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			62,546.	8	53,625.
As	9				35,825.	9	253,730.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	54,112. 42,853.			
	b	Less: accumulated depreciation	22,025.	10c	11,259. 1,049,645.		
	11	Investments - publicly traded securities			957,969.	11	1,049,645.
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			41,264.	15	49,473.
	16	Total assets. Add lines 1 through 15 (must equ			3,723,567.	16	5,701,145.
	17	Accounts payable and accrued expenses	614,341.	17	1,005,233.		
	18	Grants payable		18	4 9 4 9 9 9 9		
	19	Deferred revenue	1,083,114.	19	1,348,282.		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete			21		
es	22	Loans and other payables to any current or forn					
iliti		trustee, key employee, creator or founder, subs					
Liabilities		controlled entity or family member of any of the		22			
	23	Secured mortgages and notes payable to unrela		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	,	· ·	467,771.	05	620,118.
		of Schedule D			2,165,226.	25	2,973,633.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, che	ock bor		4,103,220.	26	4,913,033.
ŝ		<b>.</b> ,	CK Her				
ů nce	27	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions			1,558,341.	27	2,727,512.
ala	27 28	Net assets with donor restrictions			1,550,541.	27	2,727,512.
Б	20	Organizations that do not follow FASB ASC 9				20	
Fun		and complete lines 29 through 33.	50, che				
P	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or ea				30	
Ass	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			1,558,341.	32	2,727,512.
Z	33	Total liabilities and net assets/fund balances			3,723,567.	33	5,701,145.
					-,-=-,,-		<u> </u>

Form 990 (2023)
Part X Balance Sheet

USA BOX

<u>5,701,145.</u> Form **990** (2023)

Form	990 (2023) USA BOXING, INC.	84-	1604168	Pad	_{ge} 12		
Pa	rt XI Reconciliation of Net Assets				4		
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,323	3,9	38.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,235	5,2	75.		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,088	3,6	63.		
4							
5	Net unrealized gains (losses) on investments	5	80	),5	08.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9							
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	2,727	7,5	12.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
	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 Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the						
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				L		

Form **990** (2023)

Department of the Treasury Internal Revenue Service

(Form 990)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2023
Open to Public Inspection

	Name	of the	organization	
--	------	--------	--------------	--

Name of	the organization		-					identification number		
<b>B</b> · ·		BOXING, INC						84-1604168		
Part I	Reason for Public (	Sharity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions	3.			
, Č	ization is not a private found		<b>e</b> .		,					
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4										
	city, and state:									
5										
	section 170(b)(1)(A)(iv). (Complete Part II.)									
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7	An organization that norma	-	ntial part of its support fr	om a gove	ernmental	unit or from th	e general p	public described in		
. —	section 170(b)(1)(A)(vi). (C									
8	A community trust describe									
9	An agricultural research org									
	or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of t	the college	or		
	university:									
10 X	An organization that norma									
	activities related to its exen									
	income and unrelated busin		(less section 511 tax) fro	m busines	ses acqui	red by the orga	anization a	itter June 30, 1975.		
	See section 509(a)(2). (Co	, ,	and the stand for a shift of the			$\mathbf{D}(\mathbf{x})(\mathbf{A})$				
11	An organization organized a									
12	An organization organized a									
	more publicly supported or	-						Sheck the box on		
• [	lines 12a through 12d that	• •					-	aivina		
a	_ Type I. A supporting orgative the supported organization	-		• • • •	-					
	organization. You must o			majonty o				ipporting		
b	<b>Type II.</b> A supporting org	-		ion with its	e sunnorte	d organization	(c) by bay	vina		
	control or management o									
	organization(s). You mus			anic perso		ntion of manag		Joned		
c	Type III functionally inte	•		in connect	ion with a	and functionall	v integrate	od with		
•	its supported organization						y integrate	a with,		
d	Type III non-functionally	.,.,	•				ed organiz	ration(s)		
u _	that is not functionally int						-			
	requirement (see instruct	<b>°</b>	<b>c</b>	•			an accordin			
e	Check this box if the orga	,	•				I. Type III			
	functionally integrated, or					.,.,	, . <b>, . , .</b>			
f Enter the number of supported organizations										
	vide the following informatior									
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of		(vi) Amount of other		
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in:	structions)	support (see instructions)		
Total										

	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources $\dots$						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	•	,			12	
13	First 5 years. If the Form 990 is for the	•					
<u> </u>	organization, check this box and sto						
	ction C. Computation of Public			(1)			
	Public support percentage for 2023 (					14	%
	Public support percentage from 2022 33 1/3% support test - 2023. If the					15	<u>%</u>
108	••	0		,		,	
Ь	stop here. The organization qualifies						
U.	<b>33 1/3% support test - 2022.</b> If the	-					
170	and stop here. The organization qua 10% -facts-and-circumstances test				0 13 162 or 16b		
174	and if the organization meets the fact	-					
	meets the facts-and-circumstances te			-	organization	-	
Ь	10% -facts-and-circumstances test	-		• • • •	•	17a and line 15 is	
ŭ	more, and if the organization meets the	-					
	organization meets the facts-and-circ				• •		
18	Private foundation. If the organizatio			-	• • • •		

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

(c) 2021

(b) 2020

(d) 2022

332022 12-21-23

(f) Total

Schedule A (Form 990) 2023

(e) 2023

## USA BOXING, INC.

(a) 2019

Schedule A (Form 990) 2023 Part II

Section A. Public Support

Calendar year (or fiscal year beginning in)

1 Gifts, grants, contributions, and membership fees received. (Do not USA BOXING, INC.

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support <u>(b)</u>2020 Calendar year (or fiscal year beginning in) (a) 2019 (c) 2021 (d) 2022 (e) 2023 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 1153419. 1513297. 2002400. 1624853. 3169234. 9463203. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 3177287. 4091393. 5332954. 6127144.23380085. organization's tax-exempt purpose 4651307. 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 4690584. 6093793. 6957807. 9296378.32843288. 5804726. 6 Total. Add lines 1 through 5 ..... 7a Amounts included on lines 1, 2, and 225. 375. 600. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the 117,042. amount on line 13 for the year 115,492. 63,283. 295,817. 296,417. c Add lines 7a and 7b 117,042. 115,717. 63,658. 32546871. Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 9 Amounts from line 6 5804726. 6093793. 9296378.32843288. 4690584. 6957807. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 30,013. 25,897. 54,138. 25,837. 39,559. 175,444. and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 30,013. 25,897. 54,138. 25,837. 39,559. 175,444. c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b. whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 5834739. 4716481. 6147931. 6983644. 9335937.33018732. **13** Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 98.57 % Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) 15 15 98.65 Public support percentage from 2022 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage .53 17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 % .55 18 Investment income percentage from 2022 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not .....X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization gualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Yes

No

## Part IV Supporting Organizations

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

## Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 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.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

	(Form 990) 2023		BOXING,	IN
Part IV	Supporting Org	anizations	(continued)	

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> <b>Part VI</b> <i>how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported</i>			

	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

### supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		

## Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) 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			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		

## Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the	e Integral Part Test during the year	(see instructions).
•			

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		The organization supported a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instruction <u>s).</u>
---	--	---------------------------------------------------	-------------------------	-----------------	---------------------	-----------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** 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? *If* "Yes" or "*No*" *provide details in* **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

No

Yes

	All other Type III non-functionally integrated supporting organizations mus	t complete	Sections A through E.	1
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate 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		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). See instructions.

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

Schedule A (Form 990) 2023

) 2023	USA	BOXING,	I
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1

NC. Schedule A (Form 990) Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

and 4c. 8 Breakdown of line 7: a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

7 Excess distributions carryover to 2024. Add lines 3j

_	dule A (Form 990) 2023 USA BOXING,I: tV Type III Non-Functionally Integrated 509	NC.	nizationa	84	<u>-1604168</u> Pa
		a)(s) Supporting Orga	mzations (continu	ued)	<b>•</b> • • •
	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe			1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	5	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
<u>6</u> 7	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ie organization is responsive			
0	(provide details in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
0	Line 8 amount divided by line 9 amount	(1)	(**)	10	()
ect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
b	Remainder. Subtract lines 4a and 4b from line 4.				
b c	Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if				
b c					

Schedule A (Form 990) 2023

USA BOXING, INC.

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10: Part II, line 17a or 17b: Part III, line 12:
	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section
	line 1: Part IV Section D lines 2 and 3: Part IV Section E lines 1c 2a 2d 3a and 3b: Part V line 1: Part V Section B line 1: Part V
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)

** PUBLIC DISCLOSURE COPY **

## **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

# 2023

Employer identification number

84-1604168

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

	USA	BOXING,	INC
Organization type (cheo	ck one):		

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

## **General Rule**

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

## **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set is the set in the set is the set in the set is the set is the set is the set is the set in the set is t

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

USA BO	DXING, INC.		84	-1604168
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	Il space is needed.	•	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributi	ons	(d) Type of contribution
1		\$1,097,8	<u>879.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ons	(d) Type of contribution
2		\$244,'	769.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ons	(d) Type of contribution
<u>3</u>		\$19,8	337.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ons	(d) Type of contribution
4		\$14,4	<u>184.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	(d) Type of contribution
5		\$247,5	567.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ons	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization

323452 12-26-23

Schedule I	B (Form 990) (2023)			Page <b>3</b>
Name of o	rganization		Employ	yer identification number
USA B	OXING, INC.		84	-1604168
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is neede	d.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
	BOXING EQUIPMENT	_		
3		-		
		\$19,8	37.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
	DIETARY/HEALTH AND NUTRITION	_		
4		- - \$\$14,4	84.	12/31/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
_	ATHLETIC APPAREL	_		
5		- - _ \$\$247,5	67.	12/31/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		- - - _ \$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		- - - _ \$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		- - - \$		

Name of or	rganization		Employer identification number			
USA BO	OXING, INC.		84-1604168			
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, cl Use duplicate copies of Part III if additional s	through (e) and the following line ent haritable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year http: For organizations r less for the year. (Enter this info. once.) \$			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of git				
-	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	Transferee's name, address, an	(e) Transfer of git	ift Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
-	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gi				
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee			

		Supplementa	al Einancial	Statomonte		OMB No. 15	545-0047
		Complete if the orga				204	<b>)</b> )
(Forn	n 990)	Part IV, line 6, 7, 8, 9, 10					23
	ment of the Treasury	A	ttach to Form 990.			Open to	
	Revenue Service	Go to www.irs.gov/Form99	U for instructions a	the latest informatio		Inspecti ployer identification	
Nam	e of the organizati	USA BOXING, INC.				84-16041	
Par	t I Organiza	ations Maintaining Donor Advise	d Funds or Othe	er Similar Funds or	Accour		
		n answered "Yes" on Form 990, Part IV, lin				I.	
			(a) Donor ac	lvised funds	<b>(b)</b> Fur	nds and other accou	ints
1	Total number at er	nd of year					
2		f contributions to (during year)					
3	Aggregate value o	f grants from (during year)					
4	Aggregate value a	t end of year					
5	Did the organizatio	on inform all donors and donor advisors in v	writing that the asset	s held in donor advised	funds		
	are the organizatio	on's property, subject to the organization's	exclusive legal contr	ol?		Yes	No No
6	Did the organization	on inform all grantees, donors, and donor a	dvisors in writing tha	t grant funds can be us	ed only		
	for charitable purp	ooses and not for the benefit of the donor o	r donor advisor, or fo	or any other purpose cor	nferring		
_	impermissible priv					Yes	No
Par	t II Conserv	ation Easements. Complete if the org	ganization answered	"Yes" on Form 990, Par	t IV, line 7		
1	Purpose(s) of cons	servation easements held by the organization	on (check all that app	oly).			
	Preservation	n of land for public use (for example, recrea	tion or education)	Preservation of a	historically	important land area	1
		of natural habitat		Preservation of a	certified hi	storic structure	
		n of open space					
2		through 2d if the organization held a qualif	ied conservation cor	tribution in the form of	a conserva		
	day of the tax year					Held at the End of th	e lax Year
а							
b	-			_			
c		vation easements on a certified historic stru			<u>2c</u>		
d		vation easements included on line 2c acqu					
•		ture listed in the National Register				L	
3		vation easements modified, transferred, rel	eased, extinguisned,	or terminated by the or	ganization	during the tax	
4	year		amont is leasted				
4 5		where property subject to conservation eas tion have a written policy regarding the per		naction bandling of			
5		orcement of the conservation easements it		pection, narioling of		Yes	No
6	,	r hours devoted to monitoring, inspecting,					
Ŭ				s, and emotoring conserv			Jui
7	Amount of expens	 es incurred in monitoring, inspecting, hand	lling of violations, an	d enforcing conservation	n easemen	ts during the year	
-				· · · · · · · · · · · · · · · · · ·			
8	Does each conser	vation easement reported on line 2d above	satisfy the requirem	ents of section 170(h)(4)	(B)(i)		
		)(4)(B)(ii)?				Yes	No No
9		be how the organization reports conservation					
	balance sheet, and	d include, if applicable, the text of the footn	note to the organizati	on's financial statement	s that deso	cribes the	
		ounting for conservation easements.	-				
Par	t III Organiza	ations Maintaining Collections of	Art, Historical	Treasures, or Othe	er Simila	r Assets.	
	Complete i	f the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its	revenue statement and	balance s	heet works	
	of art, historical tre	easures, or other similar assets held for pub	olic exhibition, educa	tion, or research in furth	erance of	public	
	service, provide in	Part XIII the text of the footnote to its finar	ncial statements that	describes these items.			
b	-	elected, as permitted under FASB ASC 95					
	art, historical treas	sures, or other similar assets held for public	exhibition, educatio	n, or research in further	ance of pu	blic service,	
	provide the followi	ing amounts relating to these items.					
		ded on Form 990, Part VIII, line 1				\$	
		ed in Form 990, Part X				\$	
2		received or held works of art, historical treat			ain, provide	e	
		unts required to be reported under FASB A					
а	Revenue included	on Form 990, Part VIII, line 1				\$	

b Assets included in Form 990, Part X
 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
 332051 09-28-23

Schedule D (Form 990) 2023

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Sche		ING, INC.						84-16	04168	Pag	_{je} 2
Par	t III Organizations Maintaining Co	ollections of Ar	t, Histo	orical Tre	easures, o	r Othe	r Simila	r Assets	(continu	ed)	
3	Using the organization's acquisition, accession	n, and other record	s, check	any of the	following that	t make si	ignificant	use of its			
	collection items (check all that apply).										
а	Public exhibition	c	1 🗌 I	Loan or exc	hange progra	am					
b	Scholarly research	e	, 🗌 (	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explair	n how the	ey further th	ne organizatio	on's exer	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit or	receive donations of	of art, his	torical treas	sures, or othe	er similar	assets		_		
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arrang		te if the o	organizatior	n answered ""	Yes" on	Form 990	, Part IV, li	ne 9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodia	•							7		
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	llowing ta	able:					<b>A</b>		
									Amount		
	Beginning balance										
	Additions during the year										
e	Distributions during the year										
T Oo	Ending balance Did the organization include an amount on Fo						<b>1f</b>		Yes		No
	If "Yes," explain the arrangement in Part XIII.							L	165	$\square$	NO
Par							0				
		(a) Current year		rior year	(c) Two yea			/ears back	(e) Four y	ears ba	ack
1a	Beginning of year balance	()		<b>,</b>					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g	, column (a	)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
с	Term endowment	6									
	The percentages on lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should	ıld equal 100%.									
3a	Are there endowment funds not in the posses	sion of the organiza	ation that	are held ar	nd administer	ed for th	ne		_		
	organization by:									′es I	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
	If "Yes" on line 3a(ii), are the related organization								3b		
	t VI Land. Buildings. and Equipme		wment fu	unds.							
Fai	t VI Land, Buildings, and Equipme Complete if the organization answered			lino 110 C	Soo Form 000	Dort V	lino 10				
			-					.	( ) > .		
	Description of property	(a) Cost or o basis (investr		. ,	t or other (other)		ccumulate		(d) Book	value	
1a	Land										
b	Buildings										
с	Leasehold improvements										
d	Equipment			4	1,762.		30,5	03.	11	,25	
-	Other				2,350.		12,3				<u>0.</u>
Tota	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	<u>X. line 10</u>	)c, column	<u>(B))</u>				11	,25	9.

Schedule D (Form 990) 2023

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
( <u>G)</u> ( <u>H)</u>			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 000 Dart IV line	11a Saa Form 000 Dart X lina 12	
			of yoor morket yolyo
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(7) (8)			
(9) Total (Calumn (h) must actual Form 000 Part V (inc. 15, and			
Total. (Column (b) must equal Form 990, Part X, line 15, col Part X Other Liabilities	. (B))		
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 000 Part V line 25	
(a) Description of lightlity	on i onn 330, Fait IV, Illie	TTE OF TH. SEE FORM 990, Part A, III e 23.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			E/4 001
(2) DUE TO USA BOXING FOUNDATI			544,991.
(3) REFUNDABLE ADVANCE	LON		
			25,655.
(4) FUNDS HELD IN TRUST FOR OT			23,778.
			23,778.
(4) FUNDS HELD IN TRUST FOR OT			23,778.
(4) FUNDS HELD IN TRUST FOR OT (5) LEASE LIABILITIES			23,778.
(4) FUNDS HELD IN TRUST FOR OT (5) LEASE LIABILITIES (6)			23,778.
(4) FUNDS HELD IN TRUST FOR OT (5) LEASE LIABILITIES (6) (7)			25,655. 23,778. 25,694. 620,118.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the z. organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

X

## 84-1604168 Page 3

### Schedule D (Form 990) 2023 USA BOXING, INC. Part VII Investments - Other Securities

Complete il the organization answered i es t	Complete in the organization answered Tes on roll 350, Fart W, line Th. See Form 350, Fart X, line T2.									
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value								
(1) Financial derivatives										
(2) Closely held equity interests										
(3) Other										
(A)										
(B)										
(C)										
(D)										
(E)										
(F)										
(G)										
(H)										

Sche	dule D (Form 990) 2023 USA BOXING, INC.			84-2	1604168	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With	Revenue per Re	turn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	9,457,	802.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	80,508.			
b	Donated services and use of facilities	2b	63,881.			
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e	144,	389.
3	Subtract line 2e from line 1			3	9,313,	413.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	10,525.			
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		525.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	9,323,	938.
Pa	t XII Reconciliation of Expenses per Audited Financial Statemer	nts With	n Expenses per F	Returi	า	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	8,288,	631.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	63,881.	_		
b	Prior year adjustments	2b				
С	Other losses	2c		-		
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		881.
3	Subtract line 2e from line 1			3	8,224,	750.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	10,525.	-		
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c		525.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	8,235,	275.
Pa	t XIII Supplemental Information					

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

## PART X, LINE 2:

THE CORPORATION QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION

501(C)(3) OF THE INTERNAL REVENUE CODE AND, ACCORDINGLY, IS NOT SUBJECT TO

FEDERAL INCOME TAX. ACCORDINGLY, NO INCOME TAX PROVISION HAS BEEN

RECORDED.

THE CORPORATION'S FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX,

IS SUBJECT TO EXAMINATION BY VARIOUS TAXING AUTHORITIES, GENERALLY FOR

THREE YEARS AFTER THE DATE IT WAS FILED. MANAGEMENT OF THE CORPORATION

BELIEVES THAT IT DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE

MATERIAL TO THE FINANCIAL STATEMENTS.

Part XIII Suppleme	ental Information (continued)		

(Form 990)		Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.							
Department of the Treasury Internal Revenue Service		Go to w	ww.irs.aov/Form	1990 for instructions and the latest i	nformation.		Open Inspe	to Public ction	
Name of the organization	1		WW. Bolgovi Chi			Employer		cation number	
								-	
USA BOXING, I	INC.			aide the United States		84-160	)416	8	
			ctivities Out	side the United States. Compl	ete if the organ	ization answ	ered "Y	es" on	
Form 990, P 1 For grantmakers.			maintain radar	ds to substantiate the amount of its gra	nto and other	agiotanog			
•		•		the selection criteria used to award the		-		Yes 🗌 No	
2 For grantmakers. United States.	Descri	ibe in Part V the	e organization's	procedures for monitoring the use of its	s grants and otl	ner assistanc	e outsi	de the	
3 Activities per Regio	on. (Th	e following Part		an be duplicated if additional space is r					
<b>(a)</b> Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	<ul> <li>(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)</li> </ul>	is a prog describe	vity listed in ( gram service specific typ (s) in the regi	, e	(f) Total expenditures for and investments in the region	
EUROPE (INCLUDING									
ICELAND & GREENLAND	))				PROVIDING S	UPPORT FOR	R		
- ALBANIA, ANDORRA,					ATHLETES TO	COMPETE :	IN		
AUSTRIA, BELGIUM		0	0	PROGRAM SERVICES	THE REGION.			191,212.	
SOUTH AMERICA -									
ARGENTINA, BOLIVIA,					PROVIDING S	UPPORT FOI	R		
BRAZIL, CHILE,					ATHLETES TO	COMPETE :	IN		
COLUMBIA, ECUADOR,		0	0	PROGRAM SERVICES	THE REGION.			72,878.	

Statement of Activities Outside the United States

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

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Schedule F (Form 990) 2023

264,090.

264,090.

Ο.

OMB No. 1545-0047

and 3b)

3 a Subtotal **b** Total from continuation

sheets to Part I c Totals (add lines 3a

SCHEDULE F (Form 990)

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

**3** Enter total number of other organizations or entities

USA BOXING, INC.

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

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

84-1604168

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023	USA BOXING,	INC.			84-1604168		
Part III Grants and Other Assist	tance to Individuals Outsi	de the United Sta	ates. Complete it	f the organization answered "Yes		IV, line 16.	
Part III can be duplicated (a) Type of grant or assistance	(b) Region	(c) Number of	(d) Amount of	(e) Manner of cash disbursement	(f) Amount of	(g) Description of noncash assistance	Т
(	(1)	recipients	cash grant	cash dispursement	noncash assistance	noncash assistance	
							T
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							T
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Schedule F (Form 990) 2023

Page 3

**(h)** Method of valuation (book, FMV, appraisal, other)

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

Schedule F (Form 990) 2023

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

PART I, LINE 2:

USA BOXING KEEPS ALL RECEIPTS AND INVOICES FOR EXPENSES INCURRED WHILE

TRAVELING OUTSIDE OF THE UNITED STATES. VARIOUS HIGH PERFORMANCE EVENTS

ARE HELD IN REGIONS OUTSIDE OF THE UNITED STATES.

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service Name of the organization	A BOXING, INC	Governments Complete if the organi Go to wy	Other Assistants, and Individual ization answered "Yes" Attach to Forn vw.irs.gov/Form990 for	<b>ls in the Ŭni</b> on Form 990, Pa n 990.	ted States rt IV, line 21 or 22.		OMB No. 1545-0047  2023  Open to Public Inspection  Employer identification number 84–1604168
	on Grants and Assistan						04 1004100
<ol> <li>Does the organization main criteria used to award the g</li> <li>Describe in Part IV the organization</li> </ol>	grants or assistance?	monitoring the use of	grant funds in the United	l States.			
	ssistance to Domestic O d more than \$5,000. Part				anization answered "Y	es" on Form 990, Part	IV, line 21, for any
<b>1 (a)</b> Name and address of o or government			on (d) Amount of	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
USA JUDO 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 8090	9 74-216	0691	21,370.	0.			PROGRAM ASSISTANCE
USA CURLING 2685 VIKINGS CIR, STE 210 EAGAN, MN 55121	36-606	6248	39,000.	٥.			PROGRAM ASSISTANCE
USA FENCING 210 USA CYCLING POINT SUI COLORADO SPRINGS, CO 8091		5952	19,000.	0.			PROGRAM ASSISTANCE
							3.
2 Enter total number of section	on 501(c)(3) and governme	ent organizations listed	i in the line 1 table				J•

3 Enter total number of other organizations listed in the line 1 table ......

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Schedule I (Form 990) 2023

Schedule I (Form 990) 2023

USA BOXING, INC.

84-1604168

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ATHLETE STIPENDS	12	30,500.	0.	CASH	
COACH STIPENDS	25	84,385.	0.	CASH	
SCHOLARSHIPS	14	32,000.		CASH	
		52,000.			
Deat IV Complemental Information Dravida the information					

**Part IV** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE CORPORATION REQUIRES RECIPIENTS TO QUALIFY FOR GRANTS OR ASSISTANCE

PRIOR TO RECEIVING FUNDS. SCHOLARSHIP CHECKS ARE WRITTEN TO UNIVERSITIES

FOR EDUCATION EXPENSES. HIGH PERFORMANCE ATHLETES REPORT TO HP DIRECTOR ON

VARIOUS REQUIREMENTS BEFORE BEING PAID MONTHLY. COACHES ARE PAID STIPENDS

AT CLOSE OF EVENT.

DURING 2022, THE CORPORATION PROVIDED \$24,343 IN MICRO-GRANTS TO LOCAL

## MEMBERS/CHAPTERS FOR EQUIPMENT.

SCH	EDULE J	Compensation Informati	ion	1	OMB No. 1	1545-004	47			
(For	m 990)	For certain Officers, Directors, Trustees, Key Employe			20	<b>7</b> 2	,			
		Compensated Employees Complete if the organization answered "Yes" on Form 99	0 Part IV line 23		20	ZJ	)			
Departr	nent of the Treasury	Attach to Form 990.	50, Fait IV, ine 23.		Open to		ic			
Internal	Revenue Service	Go to www.irs.gov/Form990 for instructions and the la	test information.		-	Inspection				
Name	e of the organizatior			Employer id			mber			
Dev		USA BOXING, INC.		84-1	60416	8				
Par		s Regarding Compensation								
	<b>.</b>			~~~		Yes	No			
		ate box(es) if the organization provided any of the following to or for a period		990,						
H L		line 1a. Complete Part III to provide any relevant information regarding t								
L	First-class or c		•							
L	Travel for com	panions Payments for busines Health or social club	•							
L										
L		spending account Personal services (su	ch as maid, chadned	ir, chei)						
<b>h</b> 1	f any of the boyce	on line 1a are checked, did the organization follow a written policy regar	ding payment or							
		rovision of all of the expenses described above? If "No," complete Part			1b					
		require substantiation prior to reimbursing or allowing expenses incurre								
	-	rs, including the CEO/Executive Director, regarding the items checked o	-		2					
·										
3	ndicate which, if an	y, of the following the organization used to establish the compensation	of the organization's							
		ctor. Check all that apply. Do not check any boxes for methods used by	-							
		ation of the CEO/Executive Director, but explain in Part III.								
	X Compensation		contract							
Ī		ompensation consultant Compensation survey								
Ī	Form 990 of other organizations       X       Approval by the board or compensation committee									
		5 <u> </u>								
4 [	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect	t to the filing							
C	organization or a re	ated organization:								
al	Receive a severanc	e payment or change-of-control payment?			. 4a		X			
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?			4b		X			
cF	Participate in or rec	eive payment from an equity-based compensation arrangement?			4c		X			
I	f "Yes" to any of lin	es 4a-c, list the persons and provide the applicable amounts for each ite	em in Part III.							
		)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.								
<b>5</b> F	For persons listed o	n Form 990, Part VII, Section A, line 1a, did the organization pay or acc	rue any compensatio	n						
	contingent on the re									
a	The organization?				. <u>5a</u>		X			
		ation?			. <b>5</b> b		X			
		r 5b, describe in Part III.								
		n Form 990, Part VII, Section A, line 1a, did the organization pay or acc	rue any compensatio	n						
	contingent on the n	5					37			
a	The organization?				. <u>6a</u>		X			
		ation?			. <u>6b</u>		X			
		r 6b, describe in Part III.								
	-	n Form 990, Part VII, Section A, line 1a, did the organization provide an			-	v				
		les 5 and 6? If "Yes," describe in Part III			. 7	X	<u> </u>			
		reported on Form 990, Part VII, paid or accrued pursuant to a contract t					x			
		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describ			8					
		d the organization also follow the rebuttable presumption procedure de								
-	Regulations section				. 9	n 000				
FOR P	aperwork Reducti	on Act Notice, see the Instructions for Form 990.		Schedu	le J (Forn	11 990	2023			

### 84-1604168

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MICHAEL MCATEE	(i)	228,077.	0.	0.	22,807.	9,300.	260,184.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) WILLIAM WALSH	(i)	190,000.	0.	0.	15,000.	9,300.	214,300.	0.
HEAD COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MATTHEW JOHNSON	(i)	157,688.	0.	0.	14,268.	9,300.	181,256.	0.
HIGH PERFORMANCE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

### PART I, LINE 7:

### ALL EMPLOYEES ARE ELIGIBLE FOR DISCRETIONARY BONUSES BASED UPON A VARIETY

### OF SUBJECTIVE CRITERIA. ANY BONUSES RECEIVED ARE REPORTED IN COLUMN B(II)

#### OF SCHEDULE J PART II.

### SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

2023 Open to Public Inspection

Employer identification number

84-1604168

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "	"Yes" on Form 990, Part IV, lines 29 or 30.
Attach to	Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the	organization
-------------	--------------

## USA BOXING, INC.

Pa	TI I Types of Property							
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d)</b> Method of de noncash contribu		ints	
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (ATHLETIC APPARE)	Х	1		FAIR MARKET			
26	Other (BOXING EQUIPMEN)	Х	1		FAIR MARKET			
27	Other ( <u>DIETARY/HEALTH</u> )	Х	1	14,483.	FAIR MARKET	VALU	E	
28	Other ( )							
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions				
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement 29				
						Ye	s	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of t		,					
	exempt purposes for the entire holding period?	•				30a		X
b	If "Yes." describe the arrangement in Part II.							

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
b If "Yes," describe in Part II.
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2023

31

32a

Х

Х

# Schedule M (Form 990) 2023 USA BOXING, INC.

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

SCHEDULE M, PART I, COLUMN (B):

## THE NUMBER IN COLUMN B IS THE NUMBER OF CONTRIBUTORS.

SCHEDULE O (Form 990) Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



84-1604168

USA BOXING, INC.

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

PROMOTION AND DEVELOPMENT OF AMATEUR BOXING IN THE UNITED STATES.

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

INSPIRE THE TIRELESS PURSUIT OF OLYMPIC GOLD AND ENABLE ATHLETES AND

COACHES TO ACHIEVE SUSTAINED COMPETITIVE EXCELLENCE. ADDITIONALLY, USA

BOXING ENDEAVORS TO TEACH ALL PARTICIPANTS THE CHARACTER, CONFIDENCE

AND FOCUS THEY NEED TO BECOME RESILIENT AND DIVERSE CHAMPIONS, BOTH IN

AND OUT OF THE RING.

FORM 990, PART VI, SECTION A, LINE 6:

USA BOXING, INC. IS A MEMBERSHIP ORGANIZATION. THE CATEGORIES OF

MEMBERSHIP ARE ATHLETE, COACH, OFFICIALS, PHYSICIAN, SUPPORTING, LIFE,

REGISTERED CLUBS, LOCAL BOXING COMMITTEES AND AFFILIATED ORGANIZATIONS.

FORM 990, PART VI, SECTION A, LINE 7A:

REPRESENTATIVES FROM AFFILIATED ORGANIZATIONS ELECT ONE DIRECTOR TO THE

BOARD OF DIRECTORS. THE PRESIDENTS OF THE LOCAL BOXING COMMITTEES ELECT

ONE DIRECTOR TO THE BOARD OF DIRECTORS. ELITE ATHLETES ELECT THE ATHLETE

REPRESENTATIVES TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ORGANIZATION DISTRIBUTES ITS FORM 990 BY EMAIL FOR REVIEW BY THE BOARD

OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION REQUIRES ALL BOARD MEMBERS AND EMPLOYEES TO ANNUALLY SIGN

A CONFLICT OF INTEREST STATEMENT AND DISCLOSE ANY POTENTIAL CONFLICTS.

THESE STATEMENTS ARE KEPT ON FILE AT THE NATIONAL OFFICE.

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD OF DIRECTORS DETERMINES THE EXECUTIVE DIRECTOR'S COMPENSATION

BASED ON THE CURRENT LOCAL JOB MARKET AND DOCUMENTS DECISIONS IN THE BOARD MINUTES.

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION'S TAX RETURNS ARE AVAILABLE ON ITS WEBSITE.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE.

FORM 990, PART VII, PAGE 7

BOARD MEMBERS MAY BE COMPENSATED FOR SERVICES PROVIDED TO THE

ORGANIZATION SUCH AS REFEREE FEES, ATHLETE STIPENDS OR INSTRUCTOR FEES.

THIS COMPENSATION IS DETERMINED BASED ON THE NORMAL PRACTICES OF THE

ORGANIZATION.

NO BOARD MEMBER IS COMPENSATED FOR THEIR SERVICE ON THE BOARD OF

### DIRECTORS.

FORM 990, PART XII, LINE 2C

THE PROCESS DID NOT CHANGE FROM THE PRIOR YEAR.

Schedule O (Form 990) 2023	Page 2
Name of the organization USA BOXING, INC.	Employer identification number $84 - 1604168$
JOAN DOATHO, THE.	04 1004100
<u> </u>	

332161 09-28-23 LHA

## **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Department of the Treasury Internal Revenue Service

SCHEDULE R (Form 990)

USA BOXING, INC.

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
	-				

# Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section	<b>(f)</b> Direct controlling entity		<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
UNITED STATES AMATEUR BOXING FOUNDATION -	INVESTMENT MANAGEMENT IN						
84-0976800, 1 OLYMPIC PLAZA, COLORADO	ORDER TO SUPPORT THE SPORT			509(A)(3)			
SPRINGS, CO 80909	OF BOXING	COLORADO	501(C)(3)	TYPE III			х
	-						
	-						
	-						

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



Employer identification number

84-1604168

Schedule R (Form 990) 2023

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

									1			
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j	)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	alloca	ortionate ations?	amount in box 20 of Schedule	Gene mana partr	ging her?	Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	No	
	-											
	-											
	-											
	1											
	1											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	Sec 512(t contr ent	(i) ction b)(13) rolled tity?
		country)						Yes	No
									<u> </u>
									<u> </u>

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s N
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
<b>b</b> Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)		X	
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)		X	Ŧ
Dividends from related organization(s)			
g Sale of assets to related organization(s)			
n Purchase of assets from related organization(s)	1h		
Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		+
c Lease of facilities, equipment, or other assets from related organization(s)	1k		I
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)			
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
Sharing of paid employees with related organization(s)			_
Reimbursement paid to related organization(s) for expenses			
Reimbursement paid by related organization(s) for expenses			_
Other transfer of cash or property to related organization(s)			
Other transfer of cash or property from related organization(s)	1s		

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) UNITED STATES AMATEUR BOXING FOUNDATION	С	244,769.	CASH
(2) UNITED STATES AMATEUR BOXING FOUNDATION	E	544,991.	FMV
<u>(3)</u>			
<u>(4)</u>			
<u>(5)</u>			
<u>(6)</u>			

## Schedule R (Form 990) 2023 USA BOXING, INC.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners s 501(c)(3 orgs.? Yes N	<b>(g)</b> Share of end-of-year assets	(r Disprotion allocat Yes	) opor- ate ions? <b>No</b>	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General o managin partner? Yes No	(k) Percentage ownership

Schedule R (Form 990) 2023

USA BOXING, INC.

 Schedule R (Form 990) 2023
 USA

 Part VII
 Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.