

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UNITED STATES BIATHLON ASSOCIATION Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 49 PINELAND DRIVE, SUITE 301 A City or town, state or province, country, and ZIP or foreign postal code NEW GLOUCESTER, ME 04260 F Name and address of principal officer: MATTHEW K COBB 49 PINELANE DRIVE 301A, NEW GLOUCESTER, ME	D Employer identification number 03-0279959 E Telephone number (207) 688-6500 G Gross receipts \$ 2,983,027. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.TEAMUSA.ORG/US-BIATHLON		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1980 M State of legal domicile: ME

Part I Summary

1	Briefly describe the organization's mission or most significant activities: NATIONAL GOVERNING BODY FOR THE OLYMPIC SPORT OF BIATHLON.		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	11
6	Total number of volunteers (estimate if necessary)	6	0
7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	1,429,953.	1,637,781.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,003,484.	1,283,036.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,923.	5,220.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-1,750.	56,990.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,435,610.	2,983,027.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	830,460.	884,593.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 200,155.	0.	0.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,638,253.	1,881,421.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,468,713.	2,766,014.
19	Revenue less expenses. Subtract line 18 from line 12	-33,103.	217,013.
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	578,505.	639,862.
22	Net assets or fund balances. Subtract line 21 from line 20	717,515.	560,255.
		-139,010.	79,607.

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 Here	Signature of officer MATTHEW K COBB, PRESIDENT & CEO Type or print name and title	Date _____			
Paid Preparer Use Only	Print/Type preparer's name JEREMY S. HANDLON	Preparer's signature JEREMY S. HANDLON	Date 02/07/22	Check if self-employed <input type="checkbox"/>	PTIN P01299398
	Firm's name ▶ MARCUM LLP	Firm's EIN ▶ 11-1986323			
	Firm's address ▶ 1 CANAL PLAZA, 4TH FLOOR PORTLAND, ME 04101		Phone no. (207) 352-7600		

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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 MISSION OF USBA IS TO ENCOURAGE, IMPROVE AND PROMOTE THE SPORT OF BIATHLON IN THE UNITED STATES; HELP U.S. BIATHLON ATHLETES ACHIEVE SUSTAINED COMPETITIVE EXCELLENCE IN OLYMPIC, WORLD CHAMPIONSHIP AND OTHER INTERNATIONAL COMPETITIONS IN BIATHLON; AND TO PROMOTE GREATER

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] 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 expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,812,461. including grants of \$) (Revenue \$ 1,287,947.) NATIONAL TEAM TRIALS, TRAINING AND COMPETITION THE US BIATHLON ASSOCIATION SERVES AS THE NATIONAL GOVERNING BODY FOR THE SPORT OF BIATHLON IN COMPLIANCE WITH THE TED STEVENS OLYMPIC AND AMATEUR SPORTS ACT AND THE CONSTITUTION AND BYLAWS OF THE US OLYMPIC COMMITTEE, AS SUCH, IT PROVIDES TRAINING AND SUPPORT FOR AMATEUR BIATHLETES TO PROGRESS AND COMPETE AT NATIONAL AND INTERNATIONAL TEAM TRIALS, TRAINING AND COMPETITION.

4b (Code:) (Expenses \$ 363,323. including grants of \$) (Revenue \$) ATHLETE DEVELOPMENT PROGRAMS THE US BIATHLON PROVIDES FUNDING AND SUPPORT FOR DEVELOPMENT PROGRAMS IN THE SPORT OF BIATHLON.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 2,175,784.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>		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 Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	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 assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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>If "Yes," complete Schedule L, Part I</i>		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-EZ? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		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 "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b 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>		
36 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>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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 O.		
	1a		13
b	Enter the number of voting members included on line 1a, above, who are independent		13
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
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?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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		X

Section 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?		X
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in 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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		X
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **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 only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **THE ORGANIZATION - 207-688-6500**
49 PINELAND DRIVE, NEW GLOUCESTER, ME 04260

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See 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 (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MATTHEW K COBB PRESIDENT & CEO	40.00					X	130,000.	0.	26,686.	
(2) BILL ALFOND CO-CHAIRMAN	1.00	X		X			0.	0.	0.	
(3) PHYLLIS JALBERT TREASURER	1.00	X		X			0.	0.	0.	
(4) ARTHUR STEGEN SECRETARY	1.00	X		X			0.	0.	0.	
(5) SEAN DOHERTY ATHLETE REPRESENTATIVE	1.00	X					0.	0.	0.	
(6) SARAH KONRAD DIRECTOR	1.00	X					0.	0.	0.	
(7) ROBERT HALL CO-CHAIRMAN	1.00	X		X			0.	0.	0.	
(8) SUSAN MILLER DIRECTOR	1.00	X					0.	0.	0.	
(9) JERRY BALTZELL DIRECTOR	1.00	X					0.	0.	0.	
(10) BRIAN NOYES DIRECTOR	1.00	X					0.	0.	0.	
(11) HARRY BRAKELEY DIRECTOR	1.00	X					0.	0.	0.	
(12) DEXTER PAINE DIRECTOR	1.00	X					0.	0.	0.	
(13) WILLIAM JAKE BROWN ATHLETE REPRESENTATIVE	1.00	X					0.	0.	0.	
(14) KELLY KJORLIEN ATHLETE REPRESENTATIVE	1.00	X					0.	0.	0.	

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	43,610.				
	c Fundraising events	1c					
	d Related organizations	1d	1,007,815.				
	e Government grants (contributions)	1e	141,605.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	444,751.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			1,637,781.			
Program Service Revenue	2 a <u>SPONSORSHIP AND MARKET</u>	Business Code	900099	652,788.	652,788.		
	b <u>DIRECT ATHLETE SUPPORT</u>		900099	630,248.	630,248.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			1,283,036.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			998.		998.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	4,222.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	0.				
c Gain or (loss)	7c	4,222.					
d Net gain or (loss)			4,222.		4,222.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a <u>CHANGE IN VALUE OF SPL</u>	Business Code	900099	49,311.		49,311.	
	b <u>CANCELLATION OF DEBT</u>		900099	3,727.	3,727.		
	c <u>FOREIGN CURRENCY GAIN/</u>		900099	2,768.		2,768.	
	d All other revenue		900099	1,184.	1,184.		
	e Total. Add lines 11a-11d			56,990.			
12 Total revenue. See instructions			2,983,027.	1,287,947.	0.	57,299.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
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	156,686.	47,006.	62,674.	47,006.
6 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	572,189.	434,430.	90,027.	47,732.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	101,664.	75,064.	17,118.	9,482.
10 Payroll taxes	54,054.	39,910.	9,102.	5,042.
11 Fees for services (nonemployees):				
a Management				
b Legal	13,343.		13,343.	
c Accounting	56,965.		56,965.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	252,163.	247,363.	4,800.	
12 Advertising and promotion	26,518.			26,518.
13 Office expenses	3,276.		3,276.	
14 Information technology				
15 Royalties				
16 Occupancy	27,716.		27,716.	
17 Travel	530,883.	466,376.	132.	64,375.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest	7,184.		7,184.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	15,581.	15,581.		
23 Insurance	53,389.		53,389.	
24 Other expenses. Itemize expenses not covered 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 O.)				
a SUPPLIES	613,930.	613,930.		
b ATHLETE ASSISTANCE	178,758.	178,758.		
c HEALTH MANAGEMENT SERVI	55,851.	55,851.		
d TELEPHONE AND INTERNET	15,488.		15,488.	
e All other expenses	30,376.	1,515.	28,861.	
25 Total functional expenses. Add lines 1 through 24e	2,766,014.	2,175,784.	390,075.	200,155.
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)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	56,493.	1	83,332.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	54,430.	3	45,125.
	4 Accounts receivable, net	109,081.	4	137,650.
	5 Loans and other receivables from 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	32,826.	8	13,884.
	9 Prepaid expenses and deferred charges	28,237.	9	19,035.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 296,654.		
	b Less: accumulated depreciation	10b 274,462.	10c	22,192.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	54,497.	12	61,321.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	208,012.	15	257,323.
16 Total assets. Add lines 1 through 15 (must equal line 33)	578,505.	16	639,862.	
Liabilities	17 Accounts payable and accrued expenses	161,158.	17	100,518.
	18 Grants payable		18	
	19 Deferred revenue	12,500.	19	12,500.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties	121,662.	23	64,709.
	24 Unsecured notes and loans payable to unrelated third parties	141,605.	24	132,650.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	280,590.	25	249,878.
	26 Total liabilities. Add lines 17 through 25	717,515.	26	560,255.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-347,763.	27	-176,317.
	28 Net assets with donor restrictions	208,753.	28	255,924.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	-139,010.	32	79,607.
	33 Total liabilities and net assets/fund balances	578,505.	33	639,862.

Part XI Reconciliation of Net Assets

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	2,983,027.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,766,014.
3	Revenue less expenses. Subtract line 2 from line 1	3	217,013.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-139,010.
5	Net unrealized gains (losses) on investments	5	1,604.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	79,607.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
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?
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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2020)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2148522.	2058067.	2207878.	1941727.	2268029.	10624223.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2148522.	2058067.	2207878.	1941727.	2268029.	10624223.
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)						353,262.
6 Public support. Subtract line 5 from line 4.						10270961.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	2148522.	2058067.	2207878.	1941727.	2268029.	10624223.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,707.	2,515.	1,096.	3,923.	5,220.	15,461.
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.)	28,506.	5,959.	787.	-1,750.	56,990.	90,492.
11 Total support. Add lines 7 through 10						10730176.
12 Gross receipts from related activities, etc. (see instructions)					12	1,916,137.
13 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	95.72 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	94.63 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not 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 organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
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

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. 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 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 - 2019. 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 qualifies 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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described in line 11a above?		
c A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section 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 "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove 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.</i>		
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? <i>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.</i>		

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)? <i>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).</i>		

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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
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? <i>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.</i>	Yes	No
b Did the activities described in 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? <i>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.</i>		
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? <i>If "Yes" or "No" provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	

Section 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	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	

Section 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	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

UNITED STATES BIATHLON ASSOCIATION

Employer identification number

03-0279959

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is 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

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 or 990-EZ), 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 ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

Name of organization UNITED STATES BIATHLON ASSOCIATION	Employer identification number 03-0279959
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	UNITED STATES OLYMPIC COMMITTEE ONE OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	\$ 985,815.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	ARIENS 655 WEST RYAN STREET BRILLION, WI 54110-1072	\$ 130,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	UNITED STATES SMALL BUSINESS ASSOCIATION 409 3RD ST. SW WASHINGTON, DC 20416	\$ 141,605.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED STATES BIATHLON ASSOCIATION	Employer identification number 03-0279959
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization UNITED STATES BIATHLON ASSOCIATION	Employer identification number 03-0279959
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(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, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization UNITED STATES BIATHLON ASSOCIATION Employer identification number 03-0279959

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, completion of lines 2a-2d, number of easements modified, states where located, monitoring policy, staff hours, expenses, and requirements of section 170(h)(4)(B)(i).

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures, and amounts for revenue and assets.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		296,654.	274,462.	22,192.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				22,192.

Part VII Investments - Other Securities.

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) UNITED STATES OLYMPIC		
(B) FOUNDATION	61,321.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	61,321.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

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) SECURITY DEPOSIT	1,399.
(2) BENEFICIAL INTEREST IN CHARITABLE REMAINDER UNITRUST	255,924.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	257,323.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CREDIT CARD PAYABLE	18,160.
(3) ACCRUED PAYROLL	2,855.
(4) PENSION PLAN PAYABLE	13,050.
(5) PRIZE MONEY PAYABLE	215,813.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	249,878.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 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 ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	2,984,631.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	1,604.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,604.
3	Subtract line 2e from line 1	3	2,983,027.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	2,983,027.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	2,766,014.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	2,766,014.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	2,766,014.

Part 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 ASSOCIATION BELIEVES IT HAS NO MATERIAL UNCERTAIN TAX POSITIONS AND ACCORDINGLY, DOES NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS.

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes 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 Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Schedule F (Form 990) 2020

Part V Supplemental Information

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

PART I, LINE 2:

THE UNITED STATES BIATHLON ASSOCIATION SERVES AS THE GOVERNING BODY AND OVERSEES THE USE OF GRANT FUNDS OUTSIDE THE UNITED STATES. THE USOC AUDITS THE USBA EVERY THREE YEARS. IN ADDITION, THE CEO MONITORS AND VERIFIES THE USE OF GRANTS RECEIVED.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2020

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED STATES BIATHLON ASSOCIATION

Employer identification number

03-0279959

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2020

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-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MATTHEW K COBB PRESIDENT & CEO	(i)	130,000.	0.	0.	0.	26,686.	156,686.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public Inspection

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 **UNITED STATES BIATHLON ASSOCIATION** Employer identification number **03-0279959**

Part I Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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 ▶ (<u>SKI EQUIPMENT</u>)	X	1	20,578 . COST	
26 Other ▶ (<u>USABLE EQUIPM</u>)	X	1	5,720 . COST	
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		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?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
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, describe in Part II.		

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

UNITED STATES BIATHLON ASSOCIATION

Employer identification number

03-0279959

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

UNDERSTANDING, TOLERANCE AND GOOD WILL BETWEEN INDIVIDUALS OF ALL
NATIONS.

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

THE MEMBERS ARE THE BOARD OF DIRECTORS

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

MEMBERS OF THE BOARD ASSESS THE GOVERNING BODY ANNUALLY AND HAVE THE POWER
TO APPOINT ONE OR MORE MEMBERS TO AT THEIR DISCRETION.

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

A COPY OF FORM 990 WAS PROVIDED TO THE GOVERNING BODY BEFORE FILING.

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

THE COMPENSATION COMMITTEE FOR THE BOARD OF DIRECTORS REVIEWS THE PRESIDENT
& CEO'S PERFORMANCE, AND OTHER SALARY DATA FROM SIMILAR ORGANIZATIONS WHEN
DETERMINING THE APPROPRIATE COMPENSATION LEVEL.

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

FORM 990 IS AVAILABLE UPON REQUEST

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

AVAILABLE UPON REQUEST

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **UNITED STATES BIATHLON ASSOCIATION** Employer identification number **03-0279959**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) 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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
UNITED STATES BIATHLON FOUNDATION - 27-3551544, 49 PINELAND DRIVE, STE 301A, NEW GLOUCESTER, ME 04260	TO PROMOTE THE OLYMPIC SPORT OF BIATHLON IN THE UNITED STATES.	MAINE	501(C)3	LINE 11			X

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 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?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) UNITED STATES BIATHLON FOUNDATION	N	1,000.	SQUARE FOOTAGE
(2) UNITED STATES BIATHLON FOUNDATION	O	4,000.	HOURS WORKED
(3) UNITED STATES BIATHLON FOUNDATION	L	4,000.	HOURS WORKED
(4)			
(5)			
(6)			

Part VII Supplemental Information

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

Multiple horizontal lines for supplemental information.

2020 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	ADMINISTRATIVE EQUIPMENT														
13	OFFICE FURNISHINGS	08/24/06	200DB	7.00		HY17	3,900.				3,900.	3,900.		0.	3,900.
14	PHONE LINES IN OFFICE	09/15/06	200DB	5.00		HY17	597.				597.	597.		0.	597.
15	CUSHION	09/28/06	200DB	7.00		HY17	168.				168.	168.		0.	168.
16	OFFICE FURNITURE	09/28/06	200DB	7.00		HY17	12,776.				12,776.	12,776.		0.	12,776.
17	FILEMAKER DATABASE	11/20/06	200DB	5.00		HY17	719.				719.	719.		0.	719.
26	FAX MACHINE	07/12/06	200DB	5.00		HY17	600.				600.	600.		0.	600.
28	OFFICE FURNISHINGS	11/15/07	200DB	7.00		HY17	750.				750.	750.		0.	750.
33	WIRELESS ROUTER AND HARDWARE	11/12/07	200DB	5.00		HY17	537.				537.	537.		0.	537.
45	DULEY MACBOOK	03/10/10	200DB	5.00		MC17	3,880.				3,880.	3,880.		0.	3,880.
46	LCD HD PROJECTOR	04/16/10	200DB	7.00		MC17	852.				852.	852.		0.	852.
51	APPLE COMPUTER	11/11/10	200DB	5.00		MC17	1,931.				1,931.	1,931.		0.	1,931.
52	APPLE COMPUTER	09/29/11	200DB	5.00		MC17	1,259.				1,259.	1,259.		0.	1,259.
53	APPLE IPAD	05/01/12	200DB	5.00		MC17	500.				500.	500.		0.	500.
57	ALGIS COMPUTER	02/13/13	200DB	5.00		HY17	1,220.				1,220.	1,220.		0.	1,220.
58	NEW COMPUTER FOR TEAM	02/24/13	200DB	5.00		HY17	1,006.				1,006.	1,006.		0.	1,006.
65	APPLE COMPUTER - MAX	12/02/16	200DB	5.00		MC17	2,076.				2,076.	1,752.		236.	1,988.
72	MACBOOK AIR - 13 INCH SILVER	03/24/20	200DB	5.00		MC17	1,808.				1,808.	271.		615.	886.

028111 04-01-20

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2020 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
73	APPLE MB PRO 16 COMPUTER - FEDE FONTANA	10/22/20	200DB	5.00	MC19E	2,844.				2,844.			711.	711.
	* 990 PAGE 10 TOTAL - ADMINISTRATIVE EQUIPMENT					37,423.				37,423.	32,718.		1,562.	34,280.
	PROGRAM EQUIPMENT													
3	VIDEO CAMERA	09/11/02	200DB	3.00	HY17	1,062.				1,062.	1,062.		0.	1,062.
4	SPOTTING SCOPE	01/01/04	200DB	5.00	HY17	2,098.				2,098.	2,098.		0.	2,098.
5	SHOOTING SIMULATOR	05/04/99	200DB	5.00	HY17	3,405.				3,405.	3,405.		0.	3,405.
6	SPOTTING SCOPE, TRIPOD	11/30/04	200DB	5.00	HY17	2,098.				2,098.	2,098.		0.	2,098.
7	LACTATE ANALYZER	04/13/05	200DB	5.00	HY17	1,097.				1,097.	1,097.		0.	1,097.
8	5 RADIOS W/ MICROPHONES	01/03/03	200DB	5.00	HY17	2,245.				2,245.	2,245.		0.	2,245.
9	2 IZHMASH BIATHLON	07/01/00	200DB	5.00	HY17	2,228.				2,228.	2,228.		0.	2,228.
10	HAND HELD TERMINALS	08/26/00	200DB	3.00	HY17	1,055.				1,055.	1,055.		0.	1,055.
11	SKI TESTING	01/10/01	200DB	5.00	HY17	2,000.				2,000.	2,000.		0.	2,000.
12	TRIGGER SYSTEMS	08/26/00	200DB	5.00	HY17	1,600.				1,600.	1,600.		0.	1,600.
18	SCAT SHOOTING SYSTEM - 5	07/20/06	200DB	5.00	HY17	5,920.				5,920.	5,920.		0.	5,920.
19	VIDEO CAMERA	09/15/06	200DB	5.00	HY17	392.				392.	392.		0.	392.
20	SHOOTING TRAINING SYSTEM	11/17/06	200DB	5.00	HY17	3,480.				3,480.	3,480.		0.	3,480.
21	TWO SCATT SYSTEMS	01/30/07	200DB	5.00	HY17	3,028.				3,028.	3,028.		0.	3,028.
22	RADIO	02/28/07	200DB	5.00	HY17	798.				798.	798.		0.	798.

028111 04-01-20

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
23	CAMERA	05/05/07	200DB	5.00		HY17	545.				545.	545.		0.	545.
24	RIFLE STOCK	06/28/07	200DB	5.00		HY17	522.				522.	522.		0.	522.
25	ALTUIUS FIREARMS	11/17/06	200DB	5.00		HY17	10,153.				10,153.	10,153.		0.	10,153.
27	VIDEO CAMERA	07/23/07	200DB	5.00		HY17	871.				871.	871.		0.	871.
29	RIFLE AND TARGET	04/02/07	200DB	5.00		HY17	1,851.				1,851.	1,851.		0.	1,851.
30	LARSEN RIFLE	07/07/07	200DB	5.00		HY17	2,079.				2,079.	2,079.		0.	2,079.
31	STRENGTH TRAINING MACHINE	08/14/07	200DB	5.00		HY17	1,768.				1,768.	1,768.		0.	1,768.
32	4 ANSCHUTZ RIFLES AND ACCESSORIES	08/07/07	200DB	5.00		HY17	13,632.				13,632.	13,632.		0.	13,632.
34	TIGER PRESSURE SYSTEM	10/15/07	200DB	5.00		HY17	1,432.				1,432.	1,432.		0.	1,432.
35	PANASONIC COMPUTER	10/18/07	200DB	5.00		HY17	3,329.				3,329.	3,329.		0.	3,329.
36	DARTFISH VIDEO ANALYSIS SOFTWARE	11/07/07	SL	3.00		HY16	1,990.				1,990.	1,990.		0.	1,990.
37	ON/OFF SVERIGE	12/29/07	200DB	5.00		HY17	505.				505.	505.		0.	505.
38	TIGER PRESSURE SYSTEM	12/16/08	200DB	5.00		HY17	1,560.				1,560.	1,560.		0.	1,560.
39	LASER	06/23/09	200DB	5.00		HY17	217.				217.	217.		0.	217.
40	RIFLE AND TARGET	07/09/08	200DB	7.00		HY17	702.				702.	702.		0.	702.
41	RIFLE AND TARGET	12/16/08	200DB	7.00		HY17	1,923.				1,923.	1,923.		0.	1,923.
43	RIFLE AND TARGET	08/24/09	200DB	5.00		MC17	11,876.				11,876.	11,876.		0.	11,876.
44	HORA RIFLE AND TARGET	05/17/10	200DB	5.00		MC17	8,652.				8,652.	8,652.		0.	8,652.

028111 04-01-20

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2020 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
47	ALTIUS BIATHLON RIFLE	07/30/10	200DB	5.00	MC17	2,782.				2,782.	2,782.		0.	2,782.
48	RIFLE TESTING	08/30/10	200DB	5.00	MC17	2,016.				2,016.	2,016.		0.	2,016.
49	RIFLE STOCK	08/31/11	200DB	5.00	MC17	2,191.				2,191.	2,191.		0.	2,191.
50	TWO WAY RADIOS	11/26/10	200DB	5.00	MC17	1,092.				1,092.	1,092.		0.	1,092.
54	ROLLER SKIS AND WHEELS	08/17/12	200DB	5.00	HY17	1,228.				1,228.	1,228.		0.	1,228.
55	2 WALKIE TALKIE RADIOS	11/29/12	200DB	5.00	HY17	760.				760.	760.		0.	760.
56	CATAPULT GPS SYSTEM	02/26/13	200DB	5.00	HY17	8,000.				8,000.	8,000.		0.	8,000.
60	APPLE COMPUTER	09/12/13	200DB	5.00	HY17	1,259.				1,259.	1,259.		0.	1,259.
61	WINTERSTEIGER TOOLS FOR US GRINDING MACHINE	10/02/13	200DB	5.00	HY17	1,995.				1,995.	1,995.		0.	1,995.
62	DESSCO GENERATOR FOR SKI GRINDING IN SOCHI	10/15/13	200DB	5.00	HY17	5,088.				5,088.	5,088.		0.	5,088.
63	6 TARGETS FOR LAKE PLACID	11/19/13	200DB	5.00	HY17	40,257.				40,257.	40,257.		0.	40,257.
64	LASER SHOOTING SYSTEM	08/12/15	200DB	5.00	HY17	1,618.				1,618.	1,525.		93.	1,618.
67	2 WALNUT SPRINT .22LR RIFLES	07/01/17	200DB	5.00	HY17	5,700.				5,700.	4,058.		657.	4,715.
68	AUSZAHLUNG GRINDING MACHINE	07/24/17	200DB	5.00	HY17	17,288.				17,288.	12,309.		1,992.	14,301.
69	WINTERSTEIGER GRINDING MACHINE	01/23/18	200DB	5.00	HY17	22,344.				22,344.	15,909.		2,574.	18,483.
70	2 ANSCHUTZ NS BIATHLON RIFLES	06/30/19	200DB	5.00	MC17	8,085.				8,085.	3,476.		1,844.	5,320.
71	4 ANSCHUTZ RIFLES AND ACCESSORIES	09/20/19	200DB	5.00	MC17	15,453.				15,453.	5,409.		4,018.	9,427.
	* 990 PAGE 10 TOTAL - PROGRAM EQUIPMENT					233,269.				233,269.	205,467.		11,178.	216,645.

2020 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	VEHICLES														
66	2017 VW GOLF	05/16/17	200DB	5.00		MC17	25,963.				25,963.	20,636.		2,841.	23,477.
	* 990 PAGE 10 TOTAL - VEHICLES						25,963.				25,963.	20,636.		2,841.	23,477.
	PARALYMPIC PROGRAM EQUIPMENT														
	* 990 PAGE 10 TOTAL - PARALYMPIC PROGRAM EQUIPMENT						0.				0.	0.		0.	0.
	* GRAND TOTAL 990 PAGE 10 DEPR						296,655.				296,655.	258,821.		15,581.	274,402.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						293,811.			0.	293,811.	258,821.			273,691.
	ACQUISITIONS						2,844.			0.	2,844.	0.			711.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						296,655.			0.	296,655.	258,821.			274,402.
	ENDING ACCUM DEPR											274,402.			
	ENDING BOOK VALUE											22,253.			

Depreciation and Amortization
(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

UNITED STATES BIATHLON ASSOCIATION

FORM 990 PAGE 10

03-0279959

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,040,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,590,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2020	17	14,870.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		<input type="checkbox"/>

Section B - Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property		2,844.	5 YRS.	MQ	200DB	711.
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
		/		27.5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	30-year	/		30 yrs.	MM	S/L	
d	40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	15,581.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost. Includes rows 25-29.

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table with 6 columns: (a) Vehicle, (b) Vehicle, (c) Vehicle, (d) Vehicle, (e) Vehicle, (f) Vehicle. Includes rows 30-36.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

Table with 2 columns: Yes, No. Includes rows 37-41.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows 42-44.

Statement of Specified Foreign Financial Assets

▶ Go to www.irs.gov/Form8938 for instructions and the latest information.

▶ Attach to your tax return.

For calendar year _____ or tax year beginning **07/01/20** and ending **06/30/21**.

If you have attached continuation statements, check here Number of continuation statements _____

1 Name(s) shown on return
UNITED STATES BIATHLON ASSOCIATION

2 Taxpayer identification number (TIN)
03-0279959

3 Type of filer
a Specified individual **b** Partnership **c** Corporation **d** Trust

4 If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust. (See instructions for definitions and what to do if you have more than one specified individual or specified person to list.)

a Name _____ **b** TIN _____

Part I Foreign Deposit and Custodial Accounts Summary

1 Number of deposit accounts (reported in Part V) **1**

2 Maximum value of all deposit accounts \$ **119,449.**

3 Number of custodial accounts (reported in Part V) **0**

4 Maximum value of all custodial accounts \$ **0**

5 Were any foreign deposit or custodial accounts closed during the tax year? Yes No

Part II Other Foreign Assets Summary

1 Number of foreign assets (reported in Part VI) **0**

2 Maximum value of all assets (reported in Part VI) \$ **0**

3 Were any foreign assets acquired or sold during the tax year? Yes No

Part III Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions)

(a) Asset category	(b) Tax item	(c) Amount reported on form or schedule	Where reported	
			(d) Form and line	(e) Schedule and line
1 Foreign deposit and custodial accounts	a Interest	\$		
	b Dividends	\$		
	c Royalties	\$		
	d Other income	\$		
	e Gains (losses)	\$		
	f Deductions	\$		
	g Credits	\$		
2 Other foreign assets	a Interest	\$		
	b Dividends	\$		
	c Royalties	\$		
	d Other income	\$		
	e Gains (losses)	\$		
	f Deductions	\$		
	g Credits	\$		

Part IV Excepted Specified Foreign Financial Assets (see instructions)

If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year.

1. Number of Forms 3520 _____ 2. Number of Forms 3520-A _____ 3. Number of Forms 5471 _____
 4. Number of Forms 8621 _____ 5. Number of Forms 8865 _____

Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary (see instructions)

If you have more than one account to report in Part V, attach a continuation statement for each additional account. See instructions.

1 Type of account Deposit Custodial

2 Account number or other designation
0040707770

3 Check all that apply **a** Account opened during tax year **b** Account closed during tax year
c Account jointly owned with spouse **d** No tax item reported in Part III with respect to this asset

4 Maximum value of account during tax year \$ **119,449.**

5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? Yes No

6 If you answered "Yes" to line 5, complete all that apply.

(a) Foreign currency in which account is maintained EUROPEAN UNION, EURO	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
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Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary

(see instructions) (continued)

7a Name of financial institution in which account is maintained KREISSPARKASSE TRAUNSTEIN-TROS	b Global Intermediary Identification Number (GIIN) (Optional)
8 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no. LUDWIG-THOMA-STR. 4	
9 City or town, state or province, and country (including postal code) TRAUNSTEIN GERMANY 83278	

Part VI Detailed Information for Each "Other Foreign Asset" Included in the Part II Summary (see instructions)

If you have more than one asset to report in Part VI, attach a continuation statement for each additional asset. See instructions.

1 Description of asset	2 Identifying number or other designation
3 Complete all that apply. See instructions for reporting of multiple acquisition or disposition dates.	
a Date asset acquired during tax year, if applicable _____	
b Date asset disposed of during tax year, if applicable _____	
c <input type="checkbox"/> Check if asset jointly owned with spouse	d <input type="checkbox"/> Check if no tax item reported in Part III with respect to this asset

4 Maximum value of asset during tax year (check box that applies)

a \$0 - \$50,000 **b** \$50,001 - \$100,000 **c** \$100,001 - \$150,000 **d** \$150,001 - \$200,000

e If more than \$200,000, list value _____ \$

5 Did you use a foreign currency exchange rate to convert the value of the asset into U.S. dollars? Yes No

6 If you answered "Yes" to line 5, complete all that apply.

(a) Foreign currency in which asset is denominated	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
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7 If asset reported on line 1 is stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.

a Name of foreign entity _____ **b** GIIN (Optional) _____

c Type of foreign entity **(1)** Partnership **(2)** Corporation **(3)** Trust **(4)** Estate

d Mailing address of foreign entity. Number, street, and room or suite no.

e City or town, state or province, and country (including postal code)

8 If asset reported on line 1 is not stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.

Note: If this asset has more than one issuer or counterparty, attach a continuation statement with the same information for each additional issuer or counterparty. See instructions.

a Name of issuer or counterparty _____

Check if information is for Issuer Counterparty

b Type of issuer or counterparty

(1) Individual **(2)** Partnership **(3)** Corporation **(4)** Trust **(5)** Estate

c Check if issuer or counterparty is a U.S. person Foreign person

d Mailing address of issuer or counterparty. Number, street, and room or suite no.

e City or town, state or province, and country (including postal code)

2020 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED STATES BIATHLON ASSOCIATION

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	ADMINISTRATIVE EQUIPMENT											
13	OFFICE FURNISHINGS	082406	200DB	7.00	17	3,900.			3,900.	3,900.		0.
14	PHONE LINES IN OFFICE	091506	200DB	5.00	17	597.			597.	597.		0.
15	CUSHION	092806	200DB	7.00	17	168.			168.	168.		0.
16	OFFICE FURNITURE	092806	200DB	7.00	17	12,776.			12,776.	12,776.		0.
17	FILEMAKER DATABASE	112006	200DB	5.00	17	719.			719.	719.		0.
26	FAX MACHINE	071206	200DB	5.00	17	600.			600.	600.		0.
28	OFFICE FURNISHINGS	111507	200DB	7.00	17	750.			750.	750.		0.
33	WIRELESS ROUTER AND HARDWARE	111207	200DB	5.00	17	537.			537.	537.		0.
45	DULEY MACBOOK	031010	200DB	5.00	17	3,880.			3,880.	3,880.		0.
46	LCD HD PROJECTOR	041610	200DB	7.00	17	852.			852.	852.		0.
51	APPLE COMPUTER	111110	200DB	5.00	17	1,931.			1,931.	1,931.		0.
52	APPLE COMPUTER	092911	200DB	5.00	17	1,259.			1,259.	1,259.		0.
53	APPLE IPAD	050112	200DB	5.00	17	500.			500.	500.		0.
57	ALGIS COMPUTER	021313	200DB	5.00	17	1,220.			1,220.	1,220.		0.
58	NEW COMPUTER FOR TEAM	022413	200DB	5.00	17	1,006.			1,006.	1,006.		0.
65	APPLE COMPUTER - MAX	120216	200DB	5.00	17	2,076.			2,076.	1,752.		236.
72	MACBOOK AIR - 13 INCH SILVER	032420	200DB	5.00	17	1,808.			1,808.	271.		615.

2020 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED STATES BIATHLON ASSOCIATION

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
73	APPLE MB PRO 16 COMPUTER - FEDE FON	102220	200DB	5.00	19B	2,844.			2,844.			711.
	* 990 PAGE 10 TOTAL - ADMINISTRATIVE EQ					37,423.		0.	37,423.	32,718.		1,562.
	PROGRAM EQUIPMENT											
3	VIDEO CAMERA	091102	200DB	3.00	17	1,062.			1,062.	1,062.		0.
4	SPOTTING SCOPE	010104	200DB	5.00	17	2,098.			2,098.	2,098.		0.
5	SHOOTING SIMULATOR	050499	200DB	5.00	17	3,405.			3,405.	3,405.		0.
6	SPOTTING SCOPE, TRIPOD	113004	200DB	5.00	17	2,098.			2,098.	2,098.		0.
7	LACTATE ANALYZER	041305	200DB	5.00	17	1,097.			1,097.	1,097.		0.
8	5 RADIOS W/ MICROPHONES	010303	200DB	5.00	17	2,245.			2,245.	2,245.		0.
9	2 IZHMASH BIATHLON	070100	200DB	5.00	17	2,228.			2,228.	2,228.		0.
10	HAND HELD TERMINALS	082600	200DB	3.00	17	1,055.			1,055.	1,055.		0.
11	SKI TESTING	011001	200DB	5.00	17	2,000.			2,000.	2,000.		0.
12	TRIGGER SYSTEMS	082600	200DB	5.00	17	1,600.			1,600.	1,600.		0.
18	SCAT SHOOTING SYSTEM - 5	072006	200DB	5.00	17	5,920.			5,920.	5,920.		0.
19	VIDEO CAMERA	091506	200DB	5.00	17	392.			392.	392.		0.
20	SHOOTING TRAINING SYSTEM	111706	200DB	5.00	17	3,480.			3,480.	3,480.		0.
21	TWO SCATT SYSTEMS	013007	200DB	5.00	17	3,028.			3,028.	3,028.		0.
22	RADIO	022807	200DB	5.00	17	798.			798.	798.		0.

2020 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED STATES BIATHLON ASSOCIATION

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
23	CAMERA	050507	200DB	5.00	17	545.			545.	545.		0.
24	RIFLE STOCK	062807	200DB	5.00	17	522.			522.	522.		0.
25	ALTUIUS FIREARMS	111706	200DB	5.00	17	10,153.			10,153.	10,153.		0.
27	VIDEO CAMERA	072307	200DB	5.00	17	871.			871.	871.		0.
29	RIFLE AND TARGET	040207	200DB	5.00	17	1,851.			1,851.	1,851.		0.
30	LARSEN RIFLE	070707	200DB	5.00	17	2,079.			2,079.	2,079.		0.
31	STRENGTH TRAINING MACHINE	081407	200DB	5.00	17	1,768.			1,768.	1,768.		0.
32	4 ANSCHUTZ RIFLES AND ACCESSORIES	080707	200DB	5.00	17	13,632.			13,632.	13,632.		0.
34	TIGER PRESSURE SYSTEM	101507	200DB	5.00	17	1,432.			1,432.	1,432.		0.
35	PANASONIC COMPUTER	101807	200DB	5.00	17	3,329.			3,329.	3,329.		0.
36	DARTFISH VIDEO ANALYSIS SOFTWARE	110707	SL	3.00	16	1,990.			1,990.	1,990.		0.
37	ON/OFF SVERIGE	122907	200DB	5.00	17	505.			505.	505.		0.
38	TIGER PRESSURE SYSTEM	121608	200DB	5.00	17	1,560.			1,560.	1,560.		0.
39	LASER	062309	200DB	5.00	17	217.			217.	217.		0.
40	RIFLE AND TARGET	070908	200DB	7.00	17	702.			702.	702.		0.
41	RIFLE AND TARGET	121608	200DB	7.00	17	1,923.			1,923.	1,923.		0.
43	RIFLE AND TARGET	082409	200DB	5.00	17	11,876.			11,876.	11,876.		0.
44	HORA RIFLE AND TARGET	051710	200DB	5.00	17	8,652.			8,652.	8,652.		0.

2020 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED STATES BIATHLON ASSOCIATION

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
47	ALTIUS BIATHLON RIFLE	073010	200DB	5.00	17	2,782.			2,782.	2,782.		0.
48	RIFLE TESTING	083010	200DB	5.00	17	2,016.			2,016.	2,016.		0.
49	RIFLE STOCK	083111	200DB	5.00	17	2,191.			2,191.	2,191.		0.
50	TWO WAY RADIOS	112610	200DB	5.00	17	1,092.			1,092.	1,092.		0.
54	ROLLER SKIS AND WHEELS	081712	200DB	5.00	17	1,228.			1,228.	1,228.		0.
55	2 WALKIE TALKIE RADIOS	112912	200DB	5.00	17	760.			760.	760.		0.
56	CATAPULT GPS SYSTEM	022613	200DB	5.00	17	8,000.			8,000.	8,000.		0.
60	APPLE COMPUTER	091213	200DB	5.00	17	1,259.			1,259.	1,259.		0.
61	WINTERSTEIGER TOOLS FOR US GRINDING MACHINE	100213	200DB	5.00	17	1,995.			1,995.	1,995.		0.
62	DESSCO GENERATOR FOR SKI GRINDING IN	101513	200DB	5.00	17	5,088.			5,088.	5,088.		0.
63	6 TARGETS FOR LAKE PLACID	111913	200DB	5.00	17	40,257.			40,257.	40,257.		0.
64	LASER SHOOTING SYSTEM	081215	200DB	5.00	17	1,618.			1,618.	1,525.		93.
67	2 WALNUT SPRINT .22LR RIFLES	070117	200DB	5.00	17	5,700.			5,700.	4,058.		657.
68	AUSZAHLUNG GRINDING MACHINE	072417	200DB	5.00	17	17,288.			17,288.	12,309.		1,992.
69	WINTERSTEIGER GRINDING MACHINE	012318	200DB	5.00	17	22,344.			22,344.	15,909.		2,574.
70	2 ANSCHUTZ NS BIATHLON RIFLES	063019	200DB	5.00	17	8,085.			8,085.	3,476.		1,844.
71	4 ANSCHUTZ RIFLES AND ACCESSORIES	092019	200DB	5.00	17	15,453.			15,453.	5,409.		4,018.
	* 990 PAGE 10 TOTAL - PROGRAM EQUIPMENT					233,269.		0.	233,269.	205,467.		11,178.

2020 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - UNITED STATES BIATHLON ASSOCIATION

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	VEHICLES											
66	2017 VW GOLF	051617	200DB	5.00	17	25,963.			25,963.	20,636.		2,841.
	* 990 PAGE 10 TOTAL - VEHICLES					25,963.		0.	25,963.	20,636.		2,841.
	PARALYMPIC PROGRAM EQUIPMENT											
	* 990 PAGE 10 TOTAL - PARALYMPIC PROGRA					0.		0.	0.	0.		0.
	* GRAND TOTAL 990 PAGE 10 DEPR					296,655.		0.	296,655.	258,821.		15,581.
	CURRENT YEAR ACTIVITY											
	BEGINNING BALANCE					293,811.		0.	293,811.	258,821.		
	ACQUISITIONS					2,844.		0.	2,844.	0.		
	DISPOSITIONS					0.		0.	0.	0.		
	ENDING BALANCE					296,655.		0.	296,655.	258,821.		

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

UNITED STATES BIATHLON ASSOCIATION

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	ADMINISTRATIVE EQUIPMENT								
13	OFFICE FURNISHINGS	082406	200DB	7.00	3,900.		3,900.	3,900.	0.
14	PHONE LINES IN OFFICE	091506	200DB	5.00	597.		597.	597.	0.
15	CUSHION	092806	200DB	7.00	168.		168.	168.	0.
16	OFFICE FURNITURE	092806	200DB	7.00	12,776.		12,776.	12,776.	0.
17	FILEMAKER DATABASE	112006	200DB	5.00	719.		719.	719.	0.
26	FAX MACHINE	071206	200DB	5.00	600.		600.	600.	0.
28	OFFICE FURNISHINGS	111507	200DB	7.00	750.		750.	750.	0.
33	WIRELESS ROUTER AND HARDWARE	111207	200DB	5.00	537.		537.	537.	0.
45	DULEY MACBOOK	031010	200DB	5.00	3,880.		3,880.	3,880.	0.
46	LCD HD PROJECTOR	041610	200DB	7.00	852.		852.	852.	0.
51	APPLE COMPUTER	111110	200DB	5.00	1,931.		1,931.	1,931.	0.
52	APPLE COMPUTER	092911	200DB	5.00	1,259.		1,259.	1,259.	0.
53	APPLE IPAD	050112	200DB	5.00	500.		500.	500.	0.
57	ALGIS COMPUTER	021313	200DB	5.00	1,220.		1,220.	1,220.	0.
58	NEW COMPUTER FOR TEAM	022413	200DB	5.00	1,006.		1,006.	1,006.	0.
65	APPLE COMPUTER - MAX	120216	200DB	5.00	2,076.		2,076.	1,988.	88.
72	MACBOOK AIR - 13 INCH SILVER	032420	200DB	5.00	1,808.		1,808.	886.	369.
73	APPLE MB PRO 16 COMPUTER - FEDE FONTANA	102220	200DB	5.00	2,844.		2,844.	711.	853.
	* 990 PAGE 10 TOTAL - ADMINISTRATIVE EQUIPMENT				37,423.		37,423.	34,280.	1,310.
	PROGRAM EQUIPMENT								
3	VIDEO CAMERA	091102	200DB	3.00	1,062.		1,062.	1,062.	0.
4	SPOTTING SCOPE	010104	200DB	5.00	2,098.		2,098.	2,098.	0.
5	SHOOTING SIMULATOR	050499	200DB	5.00	3,405.		3,405.	3,405.	0.
6	SPOTTING SCOPE, TRIPOD	113004	200DB	5.00	2,098.		2,098.	2,098.	0.
7	LACTATE ANALYZER	041305	200DB	5.00	1,097.		1,097.	1,097.	0.
8	5 RADIOS W/ MICROPHONES	010303	200DB	5.00	2,245.		2,245.	2,245.	0.
9	2 IZHMASH BIATHLON	070100	200DB	5.00	2,228.		2,228.	2,228.	0.
10	HAND HELD TERMINALS	082600	200DB	3.00	1,055.		1,055.	1,055.	0.
11	SKI TESTING	011001	200DB	5.00	2,000.		2,000.	2,000.	0.
12	TRIGGER SYSTEMS	082600	200DB	5.00	1,600.		1,600.	1,600.	0.
18	SCAT SHOOTING SYSTEM - 5	072006	200DB	5.00	5,920.		5,920.	5,920.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

UNITED STATES BIATHLON ASSOCIATION

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
19	VIDEO CAMERA	091506	200DB	5.00	392.		392.	392.	0.
20	SHOOTING TRAINING SYSTEM	111706	200DB	5.00	3,480.		3,480.	3,480.	0.
21	TWO SCATT SYSTEMS	013007	200DB	5.00	3,028.		3,028.	3,028.	0.
22	RADIO	022807	200DB	5.00	798.		798.	798.	0.
23	CAMERA	050507	200DB	5.00	545.		545.	545.	0.
24	RIFLE STOCK	062807	200DB	5.00	522.		522.	522.	0.
25	ALTUIUS FIREARMS	111706	200DB	5.00	10,153.		10,153.	10,153.	0.
27	VIDEO CAMERA	072307	200DB	5.00	871.		871.	871.	0.
29	RIFLE AND TARGET	040207	200DB	5.00	1,851.		1,851.	1,851.	0.
30	LARSEN RIFLE	070707	200DB	5.00	2,079.		2,079.	2,079.	0.
31	STRENGTH TRAINING MACHINE	081407	200DB	5.00	1,768.		1,768.	1,768.	0.
32	4 ANSCHUTZ RIFLES AND ACCESSORIES	080707	200DB	5.00	13,632.		13,632.	13,632.	0.
34	TIGER PRESSURE SYSTEM	101507	200DB	5.00	1,432.		1,432.	1,432.	0.
35	PANASONIC COMPUTER	101807	200DB	5.00	3,329.		3,329.	3,329.	0.
36	DARTFISH VIDEO ANALYSIS SOFTWARE	110707	SL	3.00	1,990.		1,990.	1,990.	0.
37	ON/OFF SVERIGE	122907	200DB	5.00	505.		505.	505.	0.
38	TIGER PRESSURE SYSTEM	121608	200DB	5.00	1,560.		1,560.	1,560.	0.
39	LASER	062309	200DB	5.00	217.		217.	217.	0.
40	RIFLE AND TARGET	070908	200DB	7.00	702.		702.	702.	0.
41	RIFLE AND TARGET	121608	200DB	7.00	1,923.		1,923.	1,923.	0.
43	RIFLE AND TARGET	082409	200DB	5.00	11,876.		11,876.	11,876.	0.
44	HORA RIFLE AND TARGET	051710	200DB	5.00	8,652.		8,652.	8,652.	0.
47	ALTIUS BIATHLON RIFLE	073010	200DB	5.00	2,782.		2,782.	2,782.	0.
48	RIFLE TESTING	083010	200DB	5.00	2,016.		2,016.	2,016.	0.
49	RIFLE STOCK	083111	200DB	5.00	2,191.		2,191.	2,191.	0.
50	TWO WAY RADIOS	112610	200DB	5.00	1,092.		1,092.	1,092.	0.
54	ROLLER SKIS AND WHEELS	081712	200DB	5.00	1,228.		1,228.	1,228.	0.
55	2 WALKIE TALKIE RADIOS	112912	200DB	5.00	760.		760.	760.	0.
56	CATAPULT GPS SYSTEM	022613	200DB	5.00	8,000.		8,000.	8,000.	0.
60	APPLE COMPUTER	091213	200DB	5.00	1,259.		1,259.	1,259.	0.
61	WINTERSTEIGER TOOLS FOR US GRINDING MACHINE	100213	200DB	5.00	1,995.		1,995.	1,995.	0.
62	DESSCO GENERATOR FOR SKI GRINDING IN SOCHI	101513	200DB	5.00	5,088.		5,088.	5,088.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2021 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

UNITED STATES BIATHLON ASSOCIATION

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
63	6 TARGETS FOR LAKE PLACID	111913	200DB	5.00	40,257.		40,257.	40,257.	0.
64	LASER SHOOTING SYSTEM	081215	200DB	5.00	1,618.		1,618.	1,618.	0.
67	2 WALNUT SPRINT .22LR RIFLES	070117	200DB	5.00	5,700.		5,700.	4,715.	657.
68	AUSZAHLUNG GRINDING MACHINE	072417	200DB	5.00	17,288.		17,288.	14,301.	1,991.
69	WINTERSTEIGER GRINDING MACHINE	012318	200DB	5.00	22,344.		22,344.	18,483.	2,574.
70	2 ANSCHUTZ NS BIATHLON RIFLES	063019	200DB	5.00	8,085.		8,085.	5,320.	1,106.
71	4 ANSCHUTZ RIFLES AND ACCESSORIES	092019	200DB	5.00	15,453.		15,453.	9,427.	2,410.
	* 990 PAGE 10 TOTAL - PROGRAM EQUIPMENT				233,269.		233,269.	216,645.	8,738.
	VEHICLES								
66	2017 VW GOLF	051617	200DB	5.00	25,963.		25,963.	23,477.	2,486.
	* 990 PAGE 10 TOTAL - VEHICLES				25,963.		25,963.	23,477.	2,486.
	PARALYMPIC PROGRAM EQUIPMENT								
	* GRAND TOTAL 990 PAGE 10 DEPR				296,655.		296,655.	274,402.	12,534.

(D) - Asset disposed

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