

IRS e-file Signature Authorization for an Exempt Organization

Form 8879-EO

For calendar year 2019, or fiscal year beginning \_\_\_\_\_, 2019, and ending \_\_\_\_\_, 20\_\_\_\_

2019

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization

Employer identification number

MIDWAY USA FOUNDATION, INC.

26-1573088

Name and title of officer

RICHARD LEEPER PRESIDENT

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

Table with 5 rows (1a-5a) and 2 columns (b Total revenue, b Total tax, b Tax based on investment income, b Balance Due). Includes checkboxes and numerical values like 19,121,130.

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

[X] I authorize WILLIAMS-KEEPERS LLC to enter my PIN 73088. ERO firm name. Enter five numbers, but do not enter all zeros.

as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature \*\*\*\*\* THIS IS NOT A FILEABLE COPY \*\*\* Date

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

43202126847 Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature Date

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A** For the **2019** calendar year, or tax year beginning and ending

<b>B</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	<b>C</b> Name of organization <b>MIDWAY USA FOUNDATION, INC.</b>		<b>D</b> Employer identification number <b>26-1573088</b>
	Doing business as		<b>E</b> Telephone number <b>(573) 447-5957</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	<b>6001 W VAN HORN TAVERN RD</b>		<b>G</b> Gross receipts \$ <b>19,121,130.</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>COLUMBIA, MO 65203</b>		
<b>F</b> Name and address of principal officer: <b>RICHARD LEEPER</b> <b>SAME AS C ABOVE</b>		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶	

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ **WWW.MIDWAYUSAFUNDATION.ORG**

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: **2007** **M** State of legal domicile: **MO**

<b>Part I Summary</b>		Prior Year	Current Year
<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>WE HELP COMMUNITIES AND ORGANIZATIONS RAISE FUNDS TO SUPPORT THEIR HIGH SCHOOL, COLLEGE,</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>11</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>11</b>
	<b>5</b> Total number of individuals employed in calendar year 2019 (Part V, line 2a)	<b>5</b>	<b>13</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>11</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 39	<b>7b</b>	<b>-40,880.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>10,545,739.</b>	<b>13,840,253.</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>0.</b>	<b>0.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>5,628,795.</b>	<b>5,278,223.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>2,096.</b>	<b>2,654.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>16,176,630.</b>	<b>19,121,130.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>5,978,579.</b>	<b>6,657,848.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>908,265.</b>	<b>1,033,068.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>0.</b>	<b>0.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>167,198.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>1,068,287.</b>	<b>1,173,214.</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>7,955,131.</b>	<b>8,864,130.</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>8,221,499.</b>	<b>10,257,000.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> <b>137,371,069.</b>	<b>End of Year</b> <b>168,174,883.</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>123,352.</b>	<b>118,366.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>137,247,717.</b>	<b>168,056,517.</b>

**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.

<b>Sign Here</b>	Signature of officer	Date			
	<b>RICHARD LEEPER, PRESIDENT</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>NICK MESTRES</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN <b>P02077144</b>
	Firm's name ▶ <b>WILLIAMS-KEEPERS LLC</b>	Firm's EIN ▶ <b>43-1126847</b>		Phone no. <b>(573) 442-6171</b>	
	Firm's address ▶ <b>2005 WEST BROADWAY, SUITE 100</b> <b>COLUMBIA, MO 65203-</b>				

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 FOUNDATION PROVIDES FINANCIAL SUPPORT TO OTHER NONPROFIT ORGANIZATIONS WITH FUNDS DIRECTED SPECIFICALLY TO SUPPORT EDUCATIONAL PROGRAMS FOCUSING ON FIREARMS SAFETY, SKILL TRAINING FOR SHOOTING, HUNTING AND OUTDOOR ACTIVITIES. THE FOUNDATION EXPLICITLY DIRECTS ITS

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 \$ 8,169,188. including grants of \$ 6,657,848. ) (Revenue \$ 919. ) THE MIDWAY USA FOUNDATION SUPPORTS OVER 100,000 YOUTH ON ALMOST 3,000 SHOOTING TEAMS AS WELL AS THE COMMUNITIES THEY REPRESENT. THE FOUNDATION HELPS COMMUNITIES RAISE MONEY TO SUPPORT THEIR YOUTH SHOOTING SPORTS PROGRAMS THROUGH TEAM, AGENCY OR DONOR DESIGNATED ENDOWMENTS FOR STATE, REGIONAL AND NATIONAL YOUTH SHOOTING EDUCATIONAL ORGANIZATIONS. ENDOWMENTS ARE HELD AND INVESTED WITH MATCHING DOLLARS FROM THE FOUNDERS AND GRANTS ARE PAID EACH YEAR TO EVERY TEAM, AGENCY OR DONOR DESIGNATED ENDOWED ORGANIZATION THAT REQUESTS UP TO 5% OF THEIR RESPECTIVE ACCOUNT BALANCE. THE TEAMS MAY USE GRANT MONEY TO FURTHER THEIR EDUCATIONAL AND TRAINING MISSIONS IN YOUTH SHOOTING SPORTS.

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

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 8,169,188.

**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 <b>Section 501(c)(3) organizations.</b> 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
<b>22</b> 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
<b>23</b> 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
<b>24a</b> 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>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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>b</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
<b>26</b> 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
<b>27</b> 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
<b>28</b> 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):		
<b>a</b> 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>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> 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	
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> 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
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> 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
<b>33</b> 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
<b>34</b> 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
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</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> .....		
<b>36 Section 501(c)(3) organizations.</b> 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
<b>37</b> 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
<b>38</b> 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
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....		
<b>c</b> 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)

		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	<b>2a</b> 13		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	<b>7d</b>		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>	X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	X

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (11), 1b (11), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, CA, FL, GA, IL, HI, NH, KS, KY, MD, MA, MI
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. [X] Own website [X] Another's website [X] 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 GREGORY SCOTT REYNOLDS - 573-447-5992 6001 WEST VAN HORN TAVERN ROAD, SUITE C, COLUMBIA, MO 65203

**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) RICHARD LEEPER PRESIDENT	2.00	X		X				0.	0.	0.
(2) BRENDA POTTERFIELD SECRETARY/TREASURER	1.00	X		X				0.	0.	0.
(3) RONALD UTTERBACK VICE PRESIDENT	1.00	X		X				0.	0.	0.
(4) SARA POTTERFIELD DIRECTOR	1.00	X						0.	0.	0.
(5) TOM SCHAUWECKER DIRECTOR	1.00	X						0.	0.	0.
(6) LARRY POTTERFIELD DIRECTOR	1.00	X						0.	0.	0.
(7) JAMES DUNN DIRECTOR	1.00	X						0.	0.	0.
(8) RUSSELL POTTERFIELD DIRECTOR	1.00	X						0.	0.	0.
(9) ANA ENGLISH DIRECTOR	1.00	X						0.	0.	0.
(10) CYNDI FLANNIGAN DIRECTOR	1.00	X						0.	0.	0.
(11) JON M. MCGRATH DIRECTOR	1.00	X						0.	0.	0.
(12) G. SCOTT REYNOLDS EXECUTIVE DIRECTOR	40.00			X				116,213.	0.	2,726.



**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(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			
<b>1b Subtotal</b> .....							116,213.	0.	2,726.	
<b>c Total from continuation sheets to Part VII, Section A</b> .....							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b> .....							116,213.	0.	2,726.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

**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	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	13,840,253.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 2,526,319.				
	<b>h Total.</b> Add lines 1a-1f .....			13,840,253.			
<b>Program Service Revenue</b>	<b>2 a</b> _____	<b>Business Code</b>					
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue .....						
	<b>g Total.</b> Add lines 2a-2f .....						
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		4,833,303.			4,833,303.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real	919.			
			(ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>	0.				
	<b>c</b> Rental income or (loss)	<b>6c</b>	919.				
	<b>d</b> Net rental income or (loss) .....			919.	919.		
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities	444,920.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	0.				
	<b>c</b> Gain or (loss) .....	<b>7c</b>	444,920.				
	<b>d</b> Net gain or (loss) .....			444,920.		444,920.	
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
<b>b</b> Less: direct expenses .....	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>	<b>11 a</b> <u>TIMELY FILING ALLOWANCES</u>	<b>Business Code</b>	900099	1,735.		1,735.	
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....			1,735.			
<b>12 Total revenue.</b> See instructions .....			19,121,130.	919.	0.	5,279,958.	

**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	6,657,848.	6,657,848.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	118,939.	64,212.	40,458.	14,269.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	757,945.	409,193.	257,821.	90,931.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	21,688.	11,712.	7,373.	2,603.
<b>9</b> Other employee benefits .....	71,537.	38,630.	24,322.	8,585.
<b>10</b> Payroll taxes .....	62,959.	33,998.	21,406.	7,555.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	4,740.		4,740.	
<b>c</b> Accounting .....	46,034.		46,034.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....	729,676.	729,676.		
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	13,577.	7,330.	4,618.	1,629.
<b>12</b> Advertising and promotion .....	21,706.	11,721.	7,380.	2,605.
<b>13</b> Office expenses .....	30,136.	16,273.	10,247.	3,616.
<b>14</b> Information technology .....	93,541.	50,512.	31,804.	11,225.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	134,115.	72,423.	45,598.	16,094.
<b>17</b> Travel .....	31,147.	29,273.	1,874.	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	23,102.	12,475.	7,855.	2,772.
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	1,133.		1,133.	
<b>23</b> Insurance .....	7,127.	3,849.	2,423.	855.
<b>24</b> 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.)				
<b>a</b> MISCELLANEOUS	37,180.	20,063.	12,658.	4,459.
<b>b</b> _____				
<b>c</b> _____				
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25</b> Total functional expenses. Add lines 1 through 24e	8,864,130.	8,169,188.	527,744.	167,198.
<b>26</b> 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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	143,162.	<b>1</b>	162,742.
	<b>2</b> Savings and temporary cash investments .....	4,089,589.	<b>2</b>	7,113,822.
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....		<b>4</b>	
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	492,225.	<b>9</b>	265,990.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 30,771.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 23,407.	<b>10c</b> 0.	7,364.
	<b>11</b> Investments - publicly traded securities .....	14,072,026.	<b>11</b>	17,282,405.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	17,448,049.	<b>12</b>	18,752,297.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	101,126,018.	<b>13</b>	124,590,263.
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	137,371,069.	<b>16</b>	168,174,883.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	123,352.	<b>17</b>	118,366.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	123,352.	<b>26</b>	118,366.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	137,247,717.	<b>27</b>	164,309,936.
	<b>28</b> Net assets with donor restrictions .....		<b>28</b>	3,746,581.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	137,247,717.	<b>32</b>	168,056,517.
	<b>33</b> Total liabilities and net assets/fund balances .....	137,371,069.	<b>33</b>	168,174,883.

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	19,121,130.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	8,864,130.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	10,257,000.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	137,247,717.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	20,551,800.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	168,056,517.

**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
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2019**

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number <b>26-1573088</b>
--	---

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First five years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) .....	14	%
<b>15</b> Public support percentage from 2018 Schedule A, Part II, line 14 .....	15	%
<b>16a 33 1/3% support test - 2019.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 33 1/3% support test - 2018.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2019.</b> 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 <b>stop here.</b> 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>b 10% -facts-and-circumstances test - 2018.</b> 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 <b>stop here.</b> 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>18 Private foundation.</b> 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	17807820.	14852453.	26324716.	10545739.	13840253.	83370981.
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....	17807820.	14852453.	26324716.	10545739.	13840253.	83370981.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....	7736715.	5064070.	7353250.	5107363.	5226288.	30487686.
<b>b</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 .....						0.
<b>c</b> Add lines 7a and 7b .....	7736715.	5064070.	7353250.	5107363.	5226288.	30487686.
<b>8 Public support.</b> (Subtract line 7c from line 6.)						52883295.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>9</b> Amounts from line 6 .....	17807820.	14852453.	26324716.	10545739.	13840253.	83370981.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	1817049.	2483065.	2814059.	4174037.	4834222.	16122432.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....	1817049.	2483065.	2814059.	4174037.	4834222.	16122432.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	242.	261.	980.	1,077.	1,735.	4,295.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	19625111.	17335779.	29139755.	14720853.	18676210.	99497708.

**14 First five 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**

<b>15</b> Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) .....	15	53.15 %
<b>16</b> Public support percentage from 2018 Schedule A, Part III, line 15 .....	16	57.14 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) .....	17	16.20 %
<b>18</b> Investment income percentage from 2018 Schedule A, Part III, line 17 .....	18	12.04 %

**19a 33 1/3% support tests - 2019.** 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 - 2018.** 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> 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>		
<b>2</b> 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>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</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>		
<b>c</b> 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>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</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>		
<b>c</b> 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>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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>		
<b>7</b> 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>		
<b>8</b> 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>		
<b>9a</b> 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>b</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>		
<b>c</b> 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>		
<b>10a</b> 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 10b below.</i>		
<b>b</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
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <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 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>		
<b>2</b> 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
<b>1</b> 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
<b>1</b> 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?		
<b>2</b> 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>		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <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**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> 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>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <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>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>b</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.

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 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	<b>Distributable Amount.</b> 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)

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2019 from Section C, line 6	
<b>10</b> Line 8 amount divided by line 9 amount	

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2019</b>	<b>(iii) Distributable Amount for 2019</b>
<b>1</b> Distributable amount for 2019 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2019			
<b>a</b> From 2014			
<b>b</b> From 2015			
<b>c</b> From 2016			
<b>d</b> From 2017			
<b>e</b> From 2018			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2019 distributable amount			
<b>i</b> Carryover from 2014 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2019 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2019 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7 Excess distributions carryover to 2020.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2015			
<b>b</b> Excess from 2016			
<b>c</b> Excess from 2017			
<b>d</b> Excess from 2018			
<b>e</b> Excess from 2019			





**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Name of the organization

MIDWAY USA FOUNDATION, INC.

Employer identification number

26-1573088

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, 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  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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	<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 250px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px;"></div>	\$ <u>64,300.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<div style="background-color: black; width: 430px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 220px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 160px; height: 15px;"></div>	\$ <u>8,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<div style="background-color: black; width: 300px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 120px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px;"></div>	\$ <u>10,021.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<div style="background-color: black; width: 230px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 80px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 60px; height: 15px;"></div>	\$ <u>5,750.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<div style="background-color: black; width: 360px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 370px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 170px; height: 15px;"></div>	\$ <u>135,440.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<div style="background-color: black; width: 310px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 250px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 210px; height: 15px;"></div>	\$ <u>7,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
7	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 29,535.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 256,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 1,611,745.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
11	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,220.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
13	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 17,550.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 6,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 8,550.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 9,484.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
19	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 13,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,450.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 22,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
25	<div style="background-color: black; width: 200px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 200px; height: 15px;"></div>	\$ 9,061.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	<div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 250px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 200px; height: 15px;"></div>	\$ 6,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	<div style="background-color: black; width: 120px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 220px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px;"></div>	\$ 5,650.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	<div style="background-color: black; width: 300px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 200px; height: 15px;"></div>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	<div style="background-color: black; width: 400px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 250px; height: 15px;"></div>	\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	<div style="background-color: black; width: 300px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px;"></div>	\$ 14,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
31	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 982,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 23,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 6,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 6,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
37	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 15%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ 20,612.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 15%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ 5,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 10%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 12%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 22%; height: 15px;"></div>	\$ 56,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 15%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 30%; height: 15px;"></div>	\$ 101,473.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 15%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 15%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 15%; height: 15px;"></div>	\$ 6,180.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
43	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 16,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 8,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,573.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 3,613,467.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
48	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 11,773.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
49	<div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 20%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 20%;"></div>	\$ 5,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
50	<div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 20%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 20%;"></div>	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51	<div style="background-color: black; height: 15px; width: 25%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 25%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 35%;"></div>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
52	<div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 25%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 25%;"></div>	\$ 12,950.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
53	<div style="background-color: black; height: 15px; width: 25%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 45%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 30%;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
54	<div style="background-color: black; height: 15px; width: 35%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 25%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 20%;"></div>	\$ 5,080.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
55	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>6,900.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
56	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>65,620.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
57	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>166,756.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
58	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>45,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
59	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>74,036.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
60	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>7,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
61	<div style="background-color: black; width: 200px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 300px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px;"></div>	\$ <u>45,925.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
62	<div style="background-color: black; width: 300px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 250px; height: 15px;"></div>	\$ <u>22,150.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
63	<div style="background-color: black; width: 300px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px;"></div>	\$ <u>67,210.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
64	<div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 300px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px;"></div>	\$ <u>5,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
65	<div style="background-color: black; width: 400px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 50px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 200px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 200px; height: 15px;"></div>	\$ <u>75,042.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
66	<div style="background-color: black; width: 300px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px;"></div>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67	<div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 80%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 30%;"></div>	\$ 8,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
68	<div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 80%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 30%;"></div>	\$ 31,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
69	<div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 30%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 30%;"></div>	\$ 150,521.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
70	<div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 50%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 50%;"></div>	\$ 33,963.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
71	<div style="background-color: black; height: 15px; width: 30%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 20%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 60%;"></div>	\$ 9,620.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
72	<div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 70%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 40%;"></div>	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 13,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
74	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 62,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
75	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 6,550.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
76	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
77	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 5,900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
78	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 19,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
79	<div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
80	<div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px;"></div>	\$ 6,016.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
81	<div style="background-color: black; width: 350px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px;"></div>	\$ 35,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
82	<div style="background-color: black; width: 200px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 180px; height: 15px;"></div>	\$ 6,900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
83	<div style="background-color: black; width: 280px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 220px; height: 15px;"></div>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
84	<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px; display: inline-block;"></div> <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px; display: inline-block;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px; display: inline-block;"></div> <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px; display: inline-block;"></div>	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
85	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 32,383.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
86	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 16,760.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
87	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 19,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
88	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 801,973.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
89	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 13,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
90	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 6,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
91	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 15%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 30%; height: 15px;"></div>	\$ 19,525.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
92	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 12%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 25%; height: 15px;"></div>	\$ 252,455.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
93	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ 6,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
94	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 10%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
95	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 18%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 15%; height: 15px;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
96	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 10%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 25%; height: 15px;"></div>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
97	<div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px;"></div>	\$ 20,830.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
98	<div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
99	<div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px;"></div>	\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
100	<div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px;"></div>	\$ 21,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
101	<div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px;"></div>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
102	<div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px; margin-bottom: 5px;"></div> <div style="background-color:black; width:100%; height:15px;"></div>	\$ 94,230.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
103	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>2,565,100.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
104	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>7,650.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
105	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>8,250.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
106	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>7,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
107	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>6,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
108	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>28,700.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
109	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
110	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
111	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div>	\$ 52,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
112	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div>	\$ 37,020.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
113	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
114	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div>	\$ 7,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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**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
115	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 30%; height: 15px;"></div>	\$ 7,150.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
116	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
117	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 15%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 25%; height: 15px;"></div>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
118	<div style="background-color: black; width: 25%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 25%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ 13,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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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
10	STOCK INVESTMENTS _____ _____ _____	\$ <u>1,011,745.</u>	<u>12/31/19</u>
47	STOCK INVESTMENTS _____ _____ _____	\$ <u>1,513,467.</u>	<u>12/31/19</u>
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization  <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number  <b>26-1573088</b>
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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
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
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](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2019**  
**Open to Public Inspection**

Name of the organization **MIDWAY USA FOUNDATION, INC.** Employer identification number **26-1573088**

**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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

**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? | 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		30,771.	23,407.	7,364.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				7,364.

**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) ACCRUED INTEREST	66,245.	COST
(B) HEDGE FUND	18,686,052.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	18,752,297.	

**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) SECURITIES HEDGE FUNDS	30,217,594.	END-OF-YEAR MARKET VALUE
(2) TRADED SECURITIES	94,372,669.	END-OF-YEAR MARKET VALUE
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	124,590,263.	

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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.

<b>1</b> Total revenue, gains, and other support per audited financial statements .....		<b>1</b>	38,943,254.
<b>2</b> Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b> Net unrealized gains (losses) on investments .....	<b>2a</b>	20,551,800.	
<b>b</b> Donated services and use of facilities .....	<b>2b</b>		
<b>c</b> Recoveries of prior year grants .....	<b>2c</b>		
<b>d</b> Other (Describe in Part XIII.) .....	<b>2d</b>		
<b>e</b> Add lines <b>2a</b> through <b>2d</b> .....	<b>2e</b>		20,551,800.
<b>3</b> Subtract line <b>2e</b> from line <b>1</b> .....		<b>3</b>	18,391,454.
<b>4</b> Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>	729,676.	
<b>b</b> Other (Describe in Part XIII.) .....	<b>4b</b>		
<b>c</b> Add lines <b>4a</b> and <b>4b</b> .....	<b>4c</b>		729,676.
<b>5</b> Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) .....		<b>5</b>	19,121,130.

**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.

<b>1</b> Total expenses and losses per audited financial statements .....		<b>1</b>	8,134,454.
<b>2</b> Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b> Donated services and use of facilities .....	<b>2a</b>		
<b>b</b> Prior year adjustments .....	<b>2b</b>		
<b>c</b> Other losses .....	<b>2c</b>		
<b>d</b> Other (Describe in Part XIII.) .....	<b>2d</b>		
<b>e</b> Add lines <b>2a</b> through <b>2d</b> .....	<b>2e</b>		0.
<b>3</b> Subtract line <b>2e</b> from line <b>1</b> .....		<b>3</b>	8,134,454.
<b>4</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>	729,676.	
<b>b</b> Other (Describe in Part XIII.) .....	<b>4b</b>		
<b>c</b> Add lines <b>4a</b> and <b>4b</b> .....	<b>4c</b>		729,676.
<b>5</b> Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) .....		<b>5</b>	8,864,130.

**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.

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**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Name of the organization **MIDWAY USA FOUNDATION, INC.** Employer identification number **26-1573088**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
SCHOLASTIC SHOOTING SPORTS FOUNDATION INC - 5931 ROFT RD - SAN ANTONIO, TX 78253-9261	20-8484121	3	141,544.	5,991.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GOAL FOUNDATION INC 61 NICHOLAS ROAD FRAMINGHAM, MA 01701-3498	04-3095757	3	77,950.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WILD SHEEP FOUNDATION 412 PRONGHORN TRAIL BOZEMAN, MT 59718-6104	42-1109229	3	73,792.	1,248.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
YOUTH SHOOTING SPORTS ALLIANCE PO BOX 936 ELKHORN, NE 68022-0936	26-0551145	3	61,717.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MURRAY STATE UNIVERSITY 217 STEWART STADIUM MURRAY, KY 42071	61-1005783		51,090.	1,131.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
YOUTH TARGET FOUNDATION 130 TIMBERLEAF CT DOUBLE OAK, TX 75077-3076	33-1206460	3	50,038.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **271.**

**3** Enter total number of other organizations listed in the line 1 table **72.**

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

Schedule I (Form 990) (2019)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INDIANA YOUTH SHOOTING SPORTS FOUNDATION INC - 13800 MARILYN RD - NOBLESVILLE, IN 46060-7501	20-1492428 3		40,936.	6,617.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WYOMING STATE 4 H FOUNDATION 1000 E UNIVERSITY DEPT 3354 LARAMIE, WY 82071-2000	83-6004106 3		42,630.	3,036.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
HOUSTON SAFARI CLUB FOUNDATION 14811 SAINT MARYS LN STE 265 HOUSTON, TX 77079-2908	74-2177975 3		45,593.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
BHS DEMONS SHOOTING TEAM 7816 HUNTERS LANE BURLINGTON, WI 53105	46-4046924		43,823.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
IOWA SCTP 812 S 15TH ST OSKALOOSA, IA 52577-3516	20-5520926 3		41,984.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
AMATEUR TRAPSHOOTING ASSOCIATION PO BOX 519 SPARTA, IL 62286-0519	20-2118440 3		41,954.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
OUTDOORS TOMORROW FOUNDATION 1870 W COTTAGE HILL PKWY CELINA, TX 75009-5117	75-1761481 3		40,917.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ARKANSAS GAME & FISH FOUNDATION 2 NATURAL RESOURCES DR LITTLE ROCK, AR 72205-1572	71-0562360 3		37,135.	1,791.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MISSOURI YOUTH SPORT SHOOTING ALLIANCE - PO BOX 71 - IMPERIAL, MO 63052-0071	87-0808275 3		37,733.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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LINDENWOOD COLLEGE 209 S KINGSHIGHWAY ST SAINT CHARLES, MO 63301-1693	43-0652649 3		34,982.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ALASKA SCTP INC PO BOX 871272 WASILLA, AK 99687-1272	90-0635354 3		33,483.	1,345.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CLAY FEATHERS INC 26321 HIGHWAY 141 COON RAPIDS, IA 50058-7020	27-1316195 3		33,377.	217.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CREIGHTON PREPARATORY SCHOOL 500 WINDSOR DRIVE PAPILLION, NE 68046	47-0438012		29,741.	2,731.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GASTON YOUNG GUNS SHOOTING SPORTS PO BOX 1314 DALLAS, NC 28034-4314	80-0253909 3		31,160.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
FORT HAYS STATE UNIVERSITY 600 PARK ST HAYS, KS 67601-4099	48-1210777		28,067.	1,962.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CITADEL PISTOL CLUB 171 MOULTRIE ST. CHARLESTON, SC 29409	80-0769768		29,861.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
OSKALOOSA SHOOTING TEAM 812 SOUTH 15TH OSKALOOSA, IA 52577-1810	46-4260367		29,692.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
HILLSDALE COLLEGE 33 E COLLEGE ST HILLSDALE, MI 49242-1205	38-1374230 3		29,504.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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MU SHOOTING CLUB 213 ROTHWELL GYMNASIUM COLUMBIA, MO 65211	42-1680662		29,036.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
BETHEL UNIVERSITY 325 CHERRY AVE MC KENZIE, TN 38201-1769	62-0548913	3	25,622.	2,388.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SILVER STATE YOUTH SHOOTING PROGRAM - 394 FLORA DR - SPRING CREEK, NV 89815-5723	45-4986365	3	27,135.	725.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
RIO SALADO SPORTSMANS CLUB INC 3960 N USERY PASS RD MESA, AZ 85207-9702	23-7228745	4	23,954.	3,902.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CENTERBURG YOUTH SHOOTING SPORTS INC - 5519 TUCKER RD - CENTERBURG, OH 43011-9358	47-0953689	3	27,654.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PA YOUTH SHOOTING ASSOCIATION INC 326 VANYO RD BERLIN, PA 15530-8310	46-1072147	3	18,617.	8,854.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TEXAS STATE RIFLE ASSOCIATION FOUNDATION INC - PO BOX 90095 - AUSTIN, TX 78709-0095	26-4037053	3	27,243.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
OHIO STATE TRAPSHOOTING FOUNDATION INC - 927 OLD MCARTHUR RD - LOGAN, OH 43138-8740	31-1513510	3	25,127.	2,034.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
BUCKEYE OUTDOOR YOUTH EDUCATION AND SHOOTING CENTER INC - PO BOX 61 - DOYLESTOWN, OH 44230-0061	20-5960752	3	23,805.	2,322.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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GEORGIA COMPETITIVE SHOOTERS INC 1059 MANLEY ROAD GRIFFIN, GA 30223	38-3696125		26,076.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SOUTH CAROLINA YOUTH SHOOTING FOUNDATION - PO BOX 11802 - ROCK HILL, SC 29731-1802	26-3594743	3	25,444.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ARIZONA OUTDOOR SPORTS INC PO BOX 40102 MESA, AZ 85274-0102	26-2103623	3	21,952.	2,190.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
X COUNT INC 5301 MERCHANDISE DR FORT WAYNE, IN 46825-5139	45-4791946	3	20,017.	3,765.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PALMYRA SPORTSMENS ASSN INC 410 SPORTSMAN RD ANNVILLE, PA 17003-9508	23-7429888	3	21,151.	2,280.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MONTANA SCHOLASTIC CLAY TARGET PROGRAM - 33 BEARTOOTH WAY - LAUREL, MT 59044-8929	46-1014846	3	16,512.	5,951.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
USA SHOOTING 1 OLYMPIC PLZ BLDG 3 COLORADO SPGS, CO 80909-5746	84-1263863	3	22,384.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
OSU SPORT CLUB COUNCIL 101 COLVIN RESEARCH CENTER, OSU STILLWATER, OK 74078	73-1610917		21,409.	771.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WILLIAMS COUNTY SPORTSMANS EDUCATIONAL ASSOC - 1521 NEY WILLIAMS CENTER RD - BRYAN, OH 43506-9604	34-1861426	3	18,587.	3,288.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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UTAH SCHOLARSHIP CLAY TARGET PROGRAM - 638 S 810 W APT 307 - PLEASANT GRV, UT 84062-2295	90-0886830 3		19,632.	1,645.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PALMYRA SPORTSMENS ASSN INC 410 SPORTSMAN RD ANNVILLE, PA 17003-9508	23-7429888 3		18,165.	3,074.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CLEMSON UNIVERSITY 272-C LEHOTSKY HALL, CLEMSON UNIVERSITY - CLEMSON, SC 29634-0001	57-6000254		20,812.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MINUTEMAN SHARPSHOOTERS 6 M STREET NEWBURYPORT, MA 01950-0000	45-4350049		19,479.	1,270.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TAUNTON RIFLE AND PISTOL CLUB INC 430 E BRITANNIA ST TAUNTON, MA 02780-1553	23-7083791 4		20,717.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PARENT BOOSTERS USA INC 612 E BETHANY DR ALLEN, TX 75002-4050	46-3748275 3		20,614.	100.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UNION GROVE BRONCOS SHOOTING CLUB INC - 8220 GITTINGS RD - MT PLEASANT, WI 53406-2112	47-3550317 3		17,983.	2,234.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MONTANA SCHOLASTIC CLAY TARGET PROGRAM - 33 BEARTOOTH WAY - LAUREL, MT 59044-8929	46-1014846 3		15,463.	3,731.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF KENTUCKY TRAP AND SKEET TEAM - 119 UNIVERSITY AVE - LEXINGTON, KY 40503	26-3280207		19,034.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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PARENT BOOSTERS USA INC 1500 W ESPERANZA AVE MCALLEN, TX 78501-3208	82-0779050	3	18,835.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WATERFORD WOLVERINE SHOOTING TEAM INC - PO BOX 325 - WATERFORD, WI 53185-0325	47-2340836	3	18,595.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MICHIGAN SCHOLASTIC CLAY TARGET PROGRAM - 47664 BRENNAN DR - MACOMB, MI 48044-3074	20-2666400	3	14,450.	4,041.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GRACE COUGARS SHOTGUN TEAM 530 HIDE A WAY LN E HIDEAWAY, TX 75771-5242	46-1355753	3	17,875.	240.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GEORGIA YOUTH SHOOTING SPORTS FOUNDATION INC - 1059 MANLEY RD - GRIFFIN, GA 30223-6355	46-1456116	3	17,834.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
BEN AVERY CLAY CRUSHERS 17 E TANYA RD DESERT HILLS, AZ 85086-9217	45-5383343	3	17,779.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
CENTRAL FALCONS TRAP & SKEET 1043 N. PRAIRIE DRIVE SILVER LAKE, WI 53170	27-4978200		17,005.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
KINGS ACADEMY 1015 S EBENEZER RD FLORENCE, SC 29501-8008	57-0917737	3	16,681.	180.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TEXAS A&M FOUNDATION 401 GEORGE BUSH DR COLLEGE STA, TX 77840-2811	74-2245072	3	16,811.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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TRISTARR-YESS 616 STRATFORD AVE SWEETWATER, TN 37874-2341	81-4215508 3		16,755.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
NEW ENGLAND INTERNATIONAL JUNIOR SHOOTING SPORTS INC - 6 M STREET PLUM ISLAND - NEWBURYPORT, MA 01950-0000	45-0602316 3		15,935.	396.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
HOOSIER DADDYS SHOOTING SPORTS TEAM NONPROFIT CORPORATION - PO BOX 97 - FRANKLIN, IN 46131-0097	81-4540236 3		16,154.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF MAINE SYSTEM INC 5703 ALUMNI HALL STE 101 ORONO, ME 04469-5703	01-6000769 3		13,899.	1,778.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
HASTINGS HIGH SCHOOL TRAP TEAM 17810 POLK AVE HASTINGS, MN 55033	46-1465973		13,310.	2,255.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WOODLAND TRAP CLUB 164 SUMMIT BUTTE RD WOODLAND, WA 98674	46-0766197		15,560.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MONTANA SCHOLASTIC CLAY TARGET PROGRAM - 33 BEARTOOTH WAY - LAUREL, MT 59044-8929	46-1014846 3		15,485.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MARQUETTE UNIVERSITY HIGH SCHOOL 3401 W WISCONSIN AVE MILWAUKEE, WI 53208-3842	39-0806826 3		15,335.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
FORT MADISON COMMUNITY SCHOOL DISTRICT - 2001 AVENUE B - FORT MADISON, IA 52627-4245	42-6038970		15,273.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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NORTH CAROLINA YOUTH EDUCATION IN SHOOTING SPORTS - 4621 REEPSVILLE RD - VALE, NC 28168-9769	47-0983574 3		15,220.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MONTANA SCHOLASTIC CLAY TARGET PROGRAM - 33 BEARTOOTH WAY - LAUREL, MT 59044-8929	46-1014846 3		14,852.	270.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MONTANA 4-H FOUNDATION INC PO BOX 173580 BOZEMAN, MT 59717-3580	23-7051460 3		14,854.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
COLVILLE SHOOTING STARS 2140 MARBLE VALLEY BASIN RD ADDY, WA 99101-9657	37-1732642 3		14,025.	720.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SOUTHLAKE CARROLL TARGET PROGRAM 201 E CHAPEL DOWNS DR SOUTHLAKE, TX 76092-5103	47-4739303 3		8,273.	6,325.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SILVER STATE YOUTH SHOOTING SPORTS 394 FLORA DR SPRING CREEK, NV 89815-5723	45-4986365 3		14,179.	408.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ONE BOX YOUTH SPORTING PROGRAM 80515 RD 441 BROKEN BOW, NE 68822	81-0718123		14,464.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WSA YOUTH OUTDOOR FOUNDATION INC 595 WASHINGTON ST EAST WALPOLE, MA 02032-1338	30-0753432 3		14,135.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MID CAROLINA 4-H 1746 KENNERLY ROAD ORANGEBURG, SC 29115	46-2572303		14,021.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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NORTH SCOTT TRAP CLUB INC PO BOX 38 ELDRIDGE, IA 52748-0038	47-1789864 3		12,742.	1,156.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
IDAHO SCTP ASSOCIATION INC PO BOX 1373 HAYDEN, ID 83835-1373	45-5159921 3		13,815.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SCHOOL DISTRICT OF HUDSON 512 JACOBS LADDER CIRCLE HUDSON, WI 54016-1881	39-6002665		13,075.	678.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
JACKSONVILLE UNIVERSITY 2800 UNIVERSITY BLVD N JACKSONVILLE, FL 32211-3394	59-0624412 3		13,742.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WILMOT TRAP TEAM 8904 352ND AVENUE BURLINGTON, WI 53105	75-3229791		13,600.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MINNESOTA YOUTH SHOOTING SPORTS FOUNDATION - 11455 VIKING DRIVE - EDEN PRAIRIE, MN 55344-7251	46-3550642 3		13,570.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
KCCL ORANGE CRUSHERS PO BOX 397 ADA, MI 49301-0397	46-2128996 3		11,685.	1,847.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
VIRGINIA TECH FOUNDATION INC 902 PRICES FORK RD STE 4000 BLACKSBURG, VA 24060-3261	54-0721690 3		13,469.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
FIN FUR & FEATHER CLUB PO BOX 272 MILLIS, MA 02054-0272	22-2885172 7		13,446.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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TENNESSEE WILDLIFE RESOURCES FOUNDATION INC - 5000 LINBAR DRIVE - NASHVILLE, TN 37211-8205	62-1806324 3		13,418.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MASON-DIXON CLAY BUSTERS 213 PINE ST GLEN ROCK, PA 17327-8931	26-4439244 3		12,965.	396.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SCHREINER UNIVERSITY 2100 MEMORIAL BLVD KERRVILLE, TX 78028-5611	74-1193459 3		13,198.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
EMMANUEL COLLEGE PO BOX 129 FRANKLIN SPGS, GA 30639-0129	58-0633977 3		12,342.	725.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ALBIA HIGH SCHOOL CLAY TARGET PROGRAM - 2424 601ST TRL - ALBIA, IA 52531-8625	83-0544913 3		12,893.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
NM EAGLES C/O K PETERSON 56670 JEWELL RD SHELBY TOWNSHIP, MI 48315-0000	61-1670953 3		12,791.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
THE UNIVERSITY OF TENNESSEE 15 MT PELLA ROAD MARTIN, TN 38238	62-6001636		12,542.	240.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LINCOLN RIFLE CLUB AND JUNIOR DIVISION INC - PO BOX 582 - LINCOLN, CA 95648-0582	94-1641654 7		11,541.	1,205.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GATEWAY CLAYBUSTERS TWO WESTBURY DRIVE - BOTZ DEAL CO ST CHARLES, MO 63301-2558	20-8171985 3		12,739.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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TEXAS JUNIOR RIFLE TEAM INC 53 TIMBERCREEK CT LAKE JACKSON, TX 77566-4942	82-4797322 3		12,725.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
JEFFERSON SPORTSMENS CLUB PO BOX 104 JEFFERSON, WI 53549-0104	39-6109532 3		12,713.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
NORTHWEST OHIO OUTDOOR YOUTH EDUCATION - PO BOX 2 - FINDLAY, OH 45839-0002	45-4605979 3		12,635.	0.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
YOUTH TARGET FOUNDATION 130 TIMBERLEAF CT DOUBLE OAK, TX 75077-3076	33-1206460 3		12,548.	0.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF VERMONT AND STATE AGRICULTURAL COLLEGE - 85 S PROSPECT ST WATERMAN 237 - BURLINGTON, VT 05405-1704	03-0179440 3		12,508.	0.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
RED RIVER YOUTH TRAP SHOOTING CLUB 2102 GREAT NORTHERN DR N FARGO, ND 58102-3249	47-4625230 3		12,282.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SEATTLE GUN CLUB 26520 292ND AVE SE STE 3 RAVENSDALE, WA 98051-8633	91-0777611 3		11,855.	330.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
INDEPENDENT SCHOOL DISTRICT 332 2518 IVORY ST MORA, MN 55051	41-6001661		12,148.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MIDLAND UNIVERSITY 900 N CLARKSON ST FREMONT, NE 68025-4254	47-0376551 3		12,122.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKE OCONEE SHOTGUN TEAM P.O. BOX 280 RUTLEDGE, GA 30663	46-2446801		12,040.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PHEASANTS FOREVER INC 1783 BUERKLE CIR SAINT PAUL, MN 55110-5254	41-1429149	3	7,726.	4,228.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UTAH SCHOLARSHIP CLAY TARGET PROGRAM - 638 S 810 W APT 307 - PLEASANT GRV, UT 84062-2295	90-0886830	3	11,371.	480.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UTAH SCHOLARSHIP CLAY TARGET PROGRAM - 638 S 810 W APT 307 - PLEASANT GRV, UT 84062-2295	90-0886830	3	10,000.	1,581.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
DRIPPING SPRINGS HIGH SCHOOL SHOOTING TEAM BOOSTERS INC - 24905 RANCH ROAD 12 - DRIPPING SPGS, TX 78620-5540	82-1880066	3	11,486.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SOUTHEASTERN ILLINOIS COMMUNITY COLLEGE - 3575 COLLEGE RD - HARRISBURG, IL 62946-4925	37-0906582		11,372.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
CASTLEWOOD YOUTH SHOOTING CLUB 2964 SHAFFER ROAD NEW CASTLE, PA 16107	47-1063458		8,919.	2,450.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SCHOLASTIC SHOOTERS OF SOUTHEAST FLORIDA INC - 12399 NE 224TH ST - OKEECHOBEE, FL 34972-7729	27-4019608	3	11,328.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ANKENY SHOOTING SPORTS FOUNDATION PO BOX 1183 ANKENY, IA 50021-0974	47-1493677	3	9,132.	2,191.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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HARRIS COUNTY SCHOOL DISTRICT 8281 GA HWY 116 HAMILTON, GA 31811	58-6000260		11,303.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
CUMBERLAND COUNTY YOUTH SHOOTING SPORTS - PO BOX 4022 - CROSSVILLE, TN 38557-4022	81-0774278 3		11,248.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
KANSAS CITY CRUSHERS 16105 BARTON STREET OVERLAND PARK, KS 66221	46-2028706		11,160.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PARENT BOOSTER USA INC 5707 MORRISS RD FLOWER MOUND, TX 75028-3730	81-4123456 3		11,021.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
RABBIT CREEK SHOOTING PARK FOUNDATION - 3805B RICHARD EVELYN BYRD ST - ANCHORAGE, AK 99517-2346	82-4368236 3		11,000.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PURDUE UNIVERSITY 1281 WIN HENTSCHEL BLVD 1100 WEST LAFAYETTE, IN 47906-4182	35-6002041 3		10,942.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
INDEPENDENT SCHOOL DISTRICT 595 216 4TH STREET NW EAST GRAND FORKS, MN 56721	41-6003281		10,905.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ALEXANDRIA AREA HIGH SCHOOL TRAP TEAM - 439 THREE HAVENS DR NE - ALEXANDRIA, MN 56308	46-3955949		10,871.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
THE SHOTGUN TEAM AT THE UNIVERSITY OF ARIZONA - 7800 W OLD AJO HIGHWAY - TUCSON, AZ 85735	27-3339664		10,860.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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WALLA WALLA GUN CLUB INC PO BOX 133 WALLA WALLA, WA 99362-0003	91-6057755 7		10,713.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PRESCOTT BIRD BUSTER BOOSTER CLUB 13082 E DURANGO ST DEWEY, AZ 86327-7213	82-2606939 3		10,701.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ASSOCIATION OF GRADUATES OF THE US MILITARY ACADEM - 698 MILLS RD - WEST POINT, NY 10996-1611	14-1260763 3		10,671.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ARNOLD JUNIOR SHOOTERS INC 2454 PRAIRIE HOLLOW RD IMPERIAL, MO 63052-1452	06-1680781 3		6,107.	4,520.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ACUI COLLEGIATE CLAY TARGET PROGRAM - 120 W 7TH ST, SUITE 200 - BLOOMINGTON, IN 47404	81-4123273		10,523.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
GUN DEVIL SHOOTING SPORTS AT ARIZONA STATE UNIVERSITY INC - 5722 NORTH 21ST STREET - PHOENIX, AZ 85016	46-0788472		10,503.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
LEE SPORTSMEN ASSOCIATION PO BOX 175 LEE, MA 01238-0175	26-2691563 3		10,222.	270.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GATEWAY GUN CLUB YOUTH SHOOTERS 7 ELKS TRL SAINT CHARLES, MO 63303-3313	27-4693540 3		9,482.	871.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ARLINGTON-FAIRFAX CHAPTER INC IZAAK WALTON LEAGUE OF AMERICA - PO BOX 366 - CENTREVILLE, VA 20122-0366	54-6052591 3		6,767.	3,568.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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SPOKANE VALLEY VIPERS 6118 N WALL STREET SPOKANE, WA 99205	82-4564405		10,292.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SNOWSHOE GUN CLUB INC PO BOX 125 KENAI, AK 99611-0125	26-0612473	7	10,212.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PRATT COMMUNITY COLLEGE 348 NE SR 61 PRATT, KS 67124-8432	48-0699112		7,639.	2,477.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CULVER EDUCATIONAL FOUNDATION 1300 ACADEMY ROAD NO 159 CULVER, IN 46511-1291	35-0868071	3	10,000.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
CENTRAL CATHOLIC HIGH SCHOOL 1200 RUBY AVE GRAND ISLAND, NE 68803-3799	47-0425014	3	9,250.	725.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MONTANA SCHOLASTIC CLAY TARGET PROGRAM - 33 BEARTOOTH WAY - LAUREL, MT 59044-8929	46-1014846	3	9,438.	535.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
YUMA YOUNG GUNS 6749 E MISSION ST YUMA, AZ 85365-8899	46-3083270	3	8,199.	1,746.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CONNORS DEVELOPMENT FOUNDATION INC 700 COLLEGE RD WARNER, OK 74469-2204	73-1096349	3	8,600.	1,275.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
OZAUKEE SCHOLASTIC SHOOTING SPORTS INC - 9130 EDGE O WOODS DR - CEDARBURG, WI 53012-9349	27-5317137	3	9,815.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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ALASKA SCTP INC PO BOX 871272 WASILLA, AK 99687-1272	90-0635354 3		9,732.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TEAM HENGES PARENT CLUB 2740 ENGLISH RD PACIFIC, MO 63069-3801	26-4794108 3		9,712.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
FUDD DUSTERS SHOTGUN SPORTING TEAM 16470 E. TS AVENUE FULTON, MI 49052	45-4100169		7,856.	1,854.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
RHINELANDER HIGH SCHOOL TRAP TEAM 2253 MEMORIAL FOREST RD RHINELANDER, WI 54501-9492	81-4923676 3		2,066.	7,637.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MONTANA SCHOLASTIC CLAY TARGET PROGRAM - 33 BEARTOOTH WAY - LAUREL, MT 59044-8929	46-1014846 3		9,588.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
LOGAN-ROGERSVILLE R-VIII SCHOOL DISTRICT - 8225 E. FARM ROAD 174 - ROGERSVILLE, MO 65742-8461	44-6005281		7,703.	1,751.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
NORTHLAND PINES SCHOOL DISTRICT 1800 PLEASURE ISLAND RD EAGLE RIVER, WI 54521-8980	39-1173350		6,031.	3,369.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ALASKA SCTP INC PO BOX 871272 WASILLA, AK 99687-1272	90-0635354 3		9,391.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SCHS SHOOTING SPORTS CLUB 25 TICKLISH ROCK ROAD HUGHESVILLE, PA 17737	81-4149237		9,336.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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NORTHWEST COLLEGE FOUNDATION 231 WEST 6TH ST POWELL, WY 82435-1898	83-0211067	3	8,062.	1,159.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF WYOMING FOUNDATION 222 S 22ND ST LARAMIE, WY 82070-5204	83-0201971	3	8,882.	330.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
RILEY CONSERVATION CLUB INC 3348 ANTHONY LANE TERRE HAUTE, IN 47803	27-2023084		9,190.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MASON CITY HIGH SCHOOL TRAPSHOOTING TEAM - 17982 280TH STREET - MASON CITY, IA 50401	77-0596169		9,154.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
CENTRAL ARIZONA TARGET SHOOTING LLC - 12122 SOUTH TOLTEC BUTTES ROAD - ELOY, AZ 85131	20-3478402		8,381.	758.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
BEAVER DAM CONSERVATIONISTS INC PO BOX 99 BEAVER DAM, WI 53916-0099	39-1222554	4	9,060.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
POPLAR BLUFF R-I SCHOOL DISTRICT 1110 N. WESTWOOD POPLAR BLUFF, MO 63901	43-0792268		7,754.	1,260.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LEBANON COMMUNITY SCHOOLS 1700 S 5TH ST LEBANON, OR 97355-2504	93-1175526		7,499.	1,484.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PF RED RIVER VALLEY CHAPTER #527 1783 BUERKLE CIR SAINT PAUL, MN 55110-5254	41-1429149	3	0.	8,882.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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BOARD OF THE UNIVERSITY OF ALABAMA PO BOX 870142 TUSCALOOSA, AL 35487-0001	63-6001138 3		8,874.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TRI STATE GUN CLUB INC 1988 WHITE PLAINS ROAD MONTROSE, IA 52639	42-1375038		8,854.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MARTIN METHODIST COLLEGE 433 W MADISON ST PULASKI, TN 38478-2716	62-0483210 3		8,787.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PENNSYLVANIA RIFLE AND PISTOL ASSOCIATION - 213 LAWN RD - PALMYRA, PA 17078	25-1846167		727.	8,024.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
THE UNIVERSITY OF TENNESSEE 254 BREHM HALL MARTIN, TN 38238	62-6001636		8,741.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MISSISSIPPI STATE UNIVERSITY SHOOTING SPORTS CLUB - 32 CREELMAN STREET - MISSISSIPPI STATE UNIV, MS 39762	45-3581877		8,709.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
BOREALIS BULLSEYES SHOOTING CLUB INCORPORATED - 4010 WINCHESTER LOOP - ANCHORAGE, AK 99507-3992	81-4234523 3		7,654.	1,019.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PORTAGE YOUTH MARKSMANSHIP CLUB 205 ALLEN STREET PORTAGE, PA 15946	26-3160336		6,977.	1,613.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CURATORS OF THE UNIVERSITY OF MISSOURI - 218 HAVENER CTR 1346 N BISHOP - ROLLA, MO 65401	43-6003859		8,568.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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PELLA SHOOTERS CLUB 1243 180TH ST PELLA, IA 50219-8038	26-4583894 3		7,080.	1,483.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LAKES AREA YOUTH TRAP CLUB 1692 270TH AVE SPIRIT LAKE, IA 51360-6813	27-2361562 3		7,768.	725.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MACCRAY TRAP SHOOTING TEAM 5075 100TH AVE SE MAYNARD, MN 56260-8005	46-5501695 3		5,098.	3,312.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
STILLWATER AREA HIGH SCHOOL CLAY TARGET TEAM - 290 QUINMORE AVE N - LAKELAND, MN 55043-9650	83-2870320 3		8,368.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ARNOLD JUNIOR SHOOTERS SCHOLASTIC PISTOL PROGRAM INC - 5443 BUTLER HILL ESTATES DR - SAINT LOUIS, MO 63128-3723	80-0948576 3		8,362.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TEWKSBURY ROD & GUN CLUB INC 79 CHANDLER ST TEWKSBURY, MA 01876-1901	23-7451444 4		8,243.	100.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PINCKNEYVILLE SHOOTING SPORTS NFP 1104 S MAIN ST PINCKNEYVILLE, IL 62274-1779	47-4168186 3		7,703.	639.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CLAY BREAKERS CLUB 56428 160TH ST AUSTIN, MN 55912-5939	47-5152024 3		8,208.	100.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
VIRGINIA RIFLE AND PISTOL CLUB PO BOX 400510 CHARLOTTESVILLE, VA 22904-4510	57-1234351		8,301.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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NORCAL LONGSHOTS 41 HANCOCK DR ROSEVILLE, CA 95678-1123	27-0399691 3		5,936.	2,355.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SCHOOL DISTRICT 271 5530 N FOURTH STREET COEUR D'ALENE, ID 83815	82-6000811		8,289.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WALKER COUNTY BOARD OF EDUCATION 2478 HAPPY VALLEY ROAD ROSSVILLE, GA 30741	58-6000338		6,666.	1,583.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LOWELL HIGH SCHOOL SCTP TEAM 12024 4 MILE RD NE LOWELL, MI 49331-9743	46-2922444 3		7,509.	693.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UTAH SCHOLARSHIP CLAY TARGET PRGRAM - 638 S 810 W APT 307 - PLEASANT GRV, UT 84062-2295	90-0886830 3		6,205.	1,988.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TANASI SPORTS ASSOCIATION 2001 PIEDMONT ROAD NEW MARKET, TN 37820	82-3533666		7,657.	535.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SIBLEY-OCHEYEDAN SHOOTING GENERALS 622 4TH ST SIBLEY, IA 51249-1324	81-0774932 3		5,574.	2,617.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
EKU SKEET & TRAP TEAM 9249 ROYAL OAK DR ALEXANDRIA, KY 41001	83-3067132		8,162.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
HARTFORD CONSERVATION GUN CLUB INC 5999 HWY 60 EAST - PO BOX 270328 - HARTFORD, WI 53027-0328	39-1054479 4		8,130.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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ZION BENTON TOWNSHIP HIGH SCHOOL DISTRICT 126 - 3901 W 21ST STREET - ZION, IL 60099	36-6004902		8,091.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PARENT BOOSTER USA INC 945 CRESTVIEW DR COPPELL, TX 75019-6938	81-5149011 3		6,794.	1,285.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SAUK COUNTY YOUTH SHOOTING PROGRAM INC - E11102 SAUK PRAIRIE RD - PR DU SAC, WI 53578-9726	47-2867564 3		8,078.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TEXAS AGGIE CORPS OF CADETS ASSOCIATION - 1134 FINFEATHER RD - BRYAN, TX 77803-3823	75-2482454 3		8,077.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
COLORADO STATE UNIVERSITY 8027 CAMPUS DELIVERY FORT COLLINS, CO 80523	84-6000545		8,050.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
THE SKEET AND TRAP CLUB AT FLORIDA STATE - 1001 WEST SAINT AUGUSTINE STREET - TALLAHASSEE, FL 32306	90-0770158		8,001.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
JESSAMINE COUNTY HIGH SCHOOL TRAP TEAM CLUB - 1376 DANVILLE LOOP 1 ROAD - NICHOLASVILLE, KY 40356	81-5042503		6,976.	905.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ALASKA SCTP INC PO BOX 871272 WASILLA, AK 99687-1272	90-0635354 3		7,850.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF ARKANSAS - FAYETTEVILLE CAMPUS - 155 NORTH STADIUM HPER 225 - FAYETTEVILLE, AR 72701	71-6003252		7,843.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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YOUTH SHOOTING SPORTS ASSOCIATION 12919 78TH AVE W TAYLOR RIDGE, IL 61284-9670	30-0774569 3		5,831.	1,991.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
RICHLAND CREEK TOP GUNS 151 WOODHALL RD BATESBURG, SC 29006-8112	81-4296473 3		7,804.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
GREAT TRAIL MUSKETEERS INC 13320 LINCOLN ST MINERVA, OH 44657	34-1712597		7,218.	535.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TURKEY VALLEY TRAP SHOOTING TEAM PO BOX 136 ST LUCAS, IA 52166-0136	47-2072458 3		7,683.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
B G A F J R O T C PO BOX 1145 BATTLE GROUND, WA 98604-1145	91-1940371 3		7,651.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WAYZATA YOUTH CLAY TARGET CLUB 4955 PEONY LANE NORTH PLYMOUTH, MN 55446	46-4225267		7,645.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SCSC YOUTH PROGRAM 44W471 KESLINGER ROAD ELBURN, IL 60119	46-1328557		7,584.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TAMPA BAY CLAYS YOUTH PROGRAM INC 15615 SHOAL CREEK PL ODESSA, FL 33556-2878	46-1763779 3		7,553.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WALLA WALLA SCHOOL DISTRICT 140 800 ABBOTT RD WALLA WALLA, WA 99362-9336	91-6015450		7,469.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SMITHSON VALLEY AG BOOSTER CLUB PO BOX 196 BULVERDE, TX 78163-0196	86-1119213 3		6,573.	816.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CALIFORNIA JUNIOR CLAYBREAKERS 22859 BURBANK BLVD WOODLAND HLS, CA 91367-4310	20-5666832 3		7,385.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
HUMBOLDT HIGH SCHOOL WILDCAT TRAP CLUB - 1008 8TH AVE N - HUMBOLDT, IA 50548-1220	90-0421533 3		7,367.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
BRANSON TRAP TEAM 125 JONATHON CT BRANSON, MO 65616-9848	81-0806947 3		7,355.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
RUTHERFORD COUNTY SCHOOLS 641 US HIGHWAY 221 NORTH RUTHERFORDTON, NC 28139	56-6001107		7,317.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
AMES COLLEGIATE SHOOTING SPORTS 2720 NORTHRIDGE LN AMES, IA 50010-7164	46-1557360 3		7,253.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
GUN CLUB OF MANITOWOC COUNTY 3404 WILDWOOD DR MANITOWOC, WI 54220	39-6176333		5,242.	2,010.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ROCKY CREEK YOUTH CLAY DUSTERS 4035 INDIAN HILLS LN FORT MILL, SC 29707-7751	46-1561563 3		7,155.	91.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TRINITY UNIVERSITY 1 TRINITY PL SAN ANTONIO, TX 78212-4674	74-1109633 3		7,184.	0.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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OTTUMWA COMMUNITY SCHOOL DISTRICT 501 E 2ND ST OTTUMWA, IA 52501-3085	42-6037985		6,202.	976.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CLAY CRUSHERS INC 18520 TWILIGHT TRAIL EDEN PRAIRIE, MN 55346	46-1661470		7,134.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
FLORIDA 4-H CLUB FOUNDATION, INC. 1604 MCCARTY DRIVE NO 1040 GAINESVILLE, FL 32611-2074	59-1000186	3	7,120.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SOUTHEASTERN ILLINOIS COMMUNITY COLLEGE - 3575 COLLEGE ROAD - HARRISBURG, IL 62946	37-0906582		7,114.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
CLAYBUSTERS 417 W 35TH ST LORAIN, OH 44055-1143	46-2143905	3	4,924.	2,124.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
H A H S OUTDOOR SPORTSMAN SUPPORT CLUB INC - 1057 E 10TH ST - HAZLETON, PA 18201-3421	57-1172337	3	7,035.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WISCONSIN SCTP FOUNDATION INC 14027 WILMOT RD KENOSHA, WI 53142-7925	45-4972356	3	4,275.	2,753.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
THE UNIVERSITY OF TEXAS AT AUSTIN 2101 SPEEDWAY STOP D7500 AUSTIN, TX 78712	74-6000203		6,034.	888.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SHANKSVILLE-STONYCREEK SCHOOL DISTRICT - 1325 CORNERSTONE ROAD, PO BOX 128 - SHANKSVILLE, PA 15560-0128	23-7036120		6,898.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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PARENT BOOSTERS USA INC PO BOX 184 BERTRAM, TX 78605-0184	81-4317672	3	6,708.	100.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
KANSAS STATE UNIVERSITY 105 ANDERSON HALL MANHATTAN, KS 66506-0100	48-0771751	3	6,707.	91.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ANKENY SHOOTING SPORTS FOUNDATION PO BOX 1183 ANKENY, IA 50021-0974	47-1493677	3	6,793.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
DALEVILLE CITY BOARD OF EDUCATION 626 N DALEVILLE AVE DALEVILLE, AL 36322-2063	63-0499090		6,758.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ALTA-AURELIA COMMUNITY SCHOOL 127 640TH ST ALTA, IA 51002-1325	82-4226461		4,264.	2,472.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MUSTANG SHOOTING SPORTS 4429 E. FLOWER ST PHOENIX, AZ 85018	46-4006966		6,715.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
XAVIER CHARTER SCHOOL INC 1218 N COLLEGE RD W TWIN FALLS, ID 83301-5651	20-5009576	3	6,683.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
COTTAGE GROVE-EUGENE SPORTSMENS CLUB - 81078 N PACIFIC HIGHWAY - CRESWELL, OR 97426	93-0578065		6,667.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MAQUOKETA YOUTH TRAP CLUB INC 10575 50TH AVE BALDWIN, IA 52207-9604	47-4456978	3	6,628.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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AMERICAN LEGION POST 218 WASHINGTON - 1007 E 3RD ST - WASHINGTON, MO 63090-3203	43-6093547	19	4,830.	1,781.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
FARMINGTON TRAP TEAM 26290 CAMBODIA AVE FARMINGTON, MN 55024	45-5012114		5,041.	1,553.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ALTUS INDEPENDENT SCHOOL DISTRICT 1018 - 400 N PARK AVE - ALTUS, OK 73521-4000	73-0758817		6,314.	280.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
HAMILTON COUNTY YOUTH SPORTS FOUNDATION NONPROFIT CORPORATIO - 12460 SILVER BAY CIR - INDIANAPOLIS, IN 46236-9285	82-2019946	3	6,584.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
OREGON SCHOLASTIC CLAY TARGET PROGRAM INC - 669 STARVEOUT CREEK RD - AZALEA, OR 97410-9729	45-2997634	3	6,187.	396.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ROGUE VALLEY YOUNG GUNS 669 STARVEOUT CRK ROAD AZALEA, OR 97410	46-4258574		6,580.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
HURON POINTE SPORTSMENS ASSOCIATION - PO BOX 480587 - NEW HAVEN, MI 48048-0587	38-1796075	7	6,339.	240.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ROSEVILLE JOINT UNION HIGH SCHOOL DISTRICT - 1 GRIZZLY WAY - GRANITE BAY, CA 95746	94-6002478		5,576.	976.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
KINSLEY GUN CLUB INC 115 SUNNYSIDE DRIVE LEWIS, KS 67552	48-1127750		6,550.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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HOLYOKE REVOLVER CLUB INC PO BOX 543 HOLYOKE, MA 01041-0543	71-1023439 4		6,097.	438.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GREENE COUNTY FISH AND GAME ASSOCIATION INCORPORATED - PO BOX 64 - XENIA, OH 45385-0064	31-0709089 4		6,497.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
UPPER PENINSULA YOUTH SHOTGUN SPORTS ORGANIZATION - 8597 COUNTY 509 Y RD - RAPID RIVER, MI 49878-9459	27-5265141 3		5,539.	942.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
NORTHLAND SHOOTING SPORTS INC. 307 4TH ST NE ROSEAU, MN 56751-1810	83-2149399 3		4,521.	1,954.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
BLACK HILLS HIGH SCHOOL BOOSTER CLUB - 7741 LITTLEROCK RD SW - TUMWATER, WA 98512-7427	91-1869853 3		4,204.	2,266.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SIMPSON COLLEGE 701 N C ST INDIANOLA, IA 50125-1201	42-0680389 3		6,414.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ORANGEBURG PREPARATORY SCHOOLS INC 2651 NORTH RD ORANGEBURG, SC 29118-1824	57-0788617 3		6,379.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
VIRGINIA POLYTECHNIC INSTITUTE & STATE UNIVERSITY - 125 WAR MEMORIAL HALL - BLACKSBURG, VA 24061-0001	54-6001805		6,363.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SCHOOL DISTRICT R-III CAMDENTON PO BOX 1409 CAMDENTON, MO 65020-1409	44-6004944		6,358.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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BILLINGS TRAP CLUB PO BOX 50365 BILLINGS, MT 59105-0365	81-0303667	7	6,357.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY SYSTEM OF NEW HAMPSHIRE 5 CHENELL DR STE 301 CONCORD, NH 03301-8522	02-6000937	3	6,353.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MISSOURI STATE UNIVERSITY TRAP & SKEET TEAM - 901 SOUTH NATIONAL AVE - SPRINGFIELD, MO 65897	54-2074129		6,349.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MOUNT MICHAEL BENECDITINE SCHOOL 22520 MOUNT MICHAEL RD ELKHORN, NE 68022-3401	30-0299031	3	6,311.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WICHITA STATE UNIVERSITY SHOOTING SPORTS - HESKETT CENTER, BOX 0126, WSU, 1845 FAIRMOUNT - WICHITA, KS 67260-0126	46-4439188		6,258.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF DELAWARE 413 ACADEMY STREET ROOM 250 NEWARK, DE 19716-5304	51-6000297	3	6,255.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
BROOKLINE TOP SHOTS INC 326 STALLINGS ROAD NW MILLEDGEVILLE, GA 31061	81-0943517		6,191.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SOUTH GEORGIA YOUTH SHOOTING CLUB PO BOX 242 HARTSFIELD, GA 31756-0242	20-1211832	3	6,156.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MONTANA SCHOLASTIC CLAY TARGET PROGRAM - 33 BEARTOOTH WAY - LAUREL, MT 59044-8929	46-1014846	3	5,014.	1,140.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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WEST DEEP CREEK SHOOTING TEAM 5111 S. MENAUL COURT SPOKANE, WA 99224	90-0967720		6,130.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ALASKA SCTP INC PO BOX 871272 WASILLA, AK 99687-1272	90-0635354	3	6,129.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SOUTH HARDIN TRAP TEAM INC 202 E CHESTNUT HUBBARD, IA 50122-7782	46-3904638	3	6,127.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
USA YOUTH EDUCATION IN SHOOTING SPORTS - PO BOX 1022 - COLVILLE, WA 99114-5012	80-0833299	3	6,126.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TEXAS TRAIL RINGNECKS SHOOTERS PO BOX 661 PINE BLUFFS, WY 82082	46-2130953		5,131.	976.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CHISHOLM PUBLIC SCHOOLS 305 UTAH AVE ENID, OK 73701	73-6060649		4,728.	1,351.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
FUTURE FARMERS OF AMERICA AND ITS STATE ASSOCIATIONS & LOCAL - PO DRAWER 10 - GERONIMO, TX 78115-0000	20-3877150	3	6,065.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
LYNDON INSTITUTE PO BOX 127 LYNDON CENTER, VT 05850-0127	03-0182055	3	6,063.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
CANYON LAKE HIGH SCHOOL JROTC HAWK BN BOOSTER CLUB - 8555 FM 32 - FISCHER, TX 78623-2424	26-4588412	3	2,985.	3,073.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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CURATORS OF THE UNIVERSITY OF MISSOURI - 120 HIGHWAY 240 SPUR - ROCHEPORT, MO 65279	43-6003859		6,044.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
GLENVILLE-EMMONS SCHOOL DISTRICT 2886 - 230 5TH ST SE - GLENVILLE, MN 56036-8701	41-1909842		4,771.	1,258.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SMOKIN DRAGONS 324 G HASELWOOD ROAD SUMMERSVILLE, KY 42782	26-0731984		6,028.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TRAP & SKEET TEAM AT ERAU 600 S CLYDE MORRIS BLVD DAYTONA BEACH, FL 32114-3966	45-4321799		6,023.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ETOWAH VALLEY MAMBAS INC 5445 CORABELLS XING CUMMING, GA 30040	46-3741752		5,997.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
HASTINGS COLLEGE 710 N TURNER AVE HASTINGS, NE 68901-7696	47-0376525	3	5,973.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
HILLSBORO TRAP & SKEET CLUB PO BOX 1579 NORTH PLAINS, OR 97133-1579	93-6026527	4	5,866.	100.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MARIAN HIGH SCHOOL 7400 MILITARY AVE OMAHA, NE 68134	47-0526910		5,948.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WILLIAM BLOUNT SHOOTING TEAM 1115 MAPLE LN GREENBACK, TN 37742-3415	27-1059687	3	5,939.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

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LAKE COUNTRY ACTION SHOOTERS W 314 N8240 HWY 83 HARTLAND, WI 53029	47-2233200		5,926.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
MISSOURI 4-H FOUNDATION UM EXTENSTION 109 WHITTEN HALL COLUMBIA, MO 65211-0001	43-6044367	3	5,328.	576.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
THE UNIVERSITY OF TENNESSEE 1111 LAKE DRIVE DANDRIDGE, TN 37725	62-6001636		5,891.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TSSC CHARTER ACADEMY MIKE GUTIRREZ LITTLETON, CO 80128	45-3759931		5,880.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
THE CITADEL 171 MOULTRIE ST CHARLESTON, SC 29409-0002	57-6000217		5,873.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
THE UNIVERISTY OF TENNESSEE 254 BREHAM HALL MARTIN, TN 38238	62-6001636		5,818.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
NEW DIANA INDEPENDENT SCHOOL DISTRICT - 11826 HWY 154 EAST - DIANA, TX 75640	75-6003702		5,800.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
RF&GC CRUSHERS 17205 SE 144TH ST RENTON, WA 98059	90-0972346		5,786.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
PIERRE JUNIOR SHOOTING CLUB 125GROUSERD PIERRE, SD 57501	61-1593480		2,418.	3,355.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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DETROIT SPORTSMENS CONGRESS 49800 DEQUINDRE ROAD UTICA, MI 48317	38-0481208		4,774.	995.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
COEURDALENE SKEET AND TRAP CLUB INC - 1879 W MILES AVE - HAYDEN, ID 83835-4911	82-0449859	7	5,751.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
QUINCY SCHOOL DISTRICT 172 2847 SENECA CIRCLE QUINCY, IL 62301	37-6002416		5,746.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
CORRY ROD & GUN CLUB PO BOX 298 COLUMBUS, PA 16405-0298	25-1139669	4	5,147.	588.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GRIMES COUNTY 4-H SHOOTING SPORTS CLUB - 203 VETERANS MEMORIAL DR - NAVASOTA, TX 77868-8774	38-3916154	3	4,070.	1,631.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CLEMSON UNIVERSITY 272-C LEHOTSKY HALL CLEMSON, SC 29634	57-6000254		5,698.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
EMMETSBURG COMMUNITY SCHOOL DISTRICT - 2408 2ND STREET - EMMETSBURG, IA 50536	42-6001658		5,693.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
NORTHERN KENTUCKY SCHOLASTIC TRAP SHOOTING CLUB INC - 331MADDOXRD - ALEXANDRIA, KY 41001-0000	20-5124230	3	5,689.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
HALLSVILLE R-IV SCHOOL DISTRICT 421 HWY 124 E HALLSVILLE, MO 65255-9855	43-6005654		2,978.	2,681.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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MONTANA SCHOLASTIC CLAY TARGET PROGRAM - 33 BEARTOOTH WAY - LAUREL, MT 59044-8929	46-1014846 3		5,654.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
LUTHERAN HIGH NORTHEAST 2010NORTH37THST. NORFOLK, NE 68701	47-0792617		2,515.	3,132.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
BOISE STATE UNIVERSITY 1910 UNIVERSITY DR BOISE, ID 83725-0002	82-0290701		5,609.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
VIRGINIA RIFLE AND PISTOL CLUB PO BOX 400510, NEWCOMB HALL STATION - CHARLOTTESVILLE, VA 22904-0510	57-1234351		5,600.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
CLEMSON UNIVERSITY 272-C LEHOTSKY HALL CLEMSON, SC 29634	57-6000254		5,544.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TEXAS A&M FOUNDATION 401 GEORGE BUSH DR COLLEGE STA, TX 77840-2811	74-2245072 3		5,542.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ALASKA SCTP INC PO BOX 871272 WASILLA, AK 99687-1272	90-0635354 3		5,537.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
LYNDEN SHOTGUN CLUB 8823 WEIDKAMP ROAD LYNDEN, WA 98264-0000	42-1574069 3		4,703.	825.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
EDGEFIELD COUNTY SCHOOL DISTRICT 17 PAR DRIVE JOHNSTON, SC 29832	57-6000346		5,509.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEVILS THUMB SHOOTERS PO BOX 115 PETERSBURG, AK 99833-0115	83-2504162 3		4,040.	1,459.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
NEBRASKA 4-H FOUNDATION 110928 RIFLE SITE ROAD MITCHELL, NE 69357	26-0816361		5,494.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ASSOCIATION OF COLLEGE UNIONS INTL. - 1007 SAINT ANDREWS DR - MANSFIELD, TX 76063-2693	47-3620427 3		0.	5,492.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
DUBOIS RIFLE AND PISTOL CLUB PO BOX 207 DUBOIS, PA 15801	25-1834928		5,477.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
UTAH SCHOLARSHIP CLAY TARGET PROGRAM - 638 S 810 W APT 307 - PLEASANT GRV, UT 84062-2295	90-0886830 3		5,470.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SHELBYVILLE TRAP TEAM 3181 HIGHWAY 231 N SHELBYVILLE, TN 37160	61-1696624		4,487.	976.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LEDYARD SPORTSMEN CLUB INC 39 HUNTS BROOK ROAD QUAKER HILL, CT 06375	06-0932470		4,870.	588.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
JACKSONVILLE UNIVERSITY 2800 UNIVERSITY BLVD N JACKSONVILLE, FL 32211-3394	59-0624412 3		5,443.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
UTAH MILITARY ACADEMY 5120 S 1050 W RIVERDALE, UT 84405-3733	46-5071480 3		4,484.	958.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WA YOUTH EDUCATION IN SHOOTING SPORTS - 19904 SE 300TH ST - KENT, WA 98042-5924	80-0683649 3		5,437.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
RIO SALADO SPORTSMANS CLUB INC 3960 N USERY PASS RD MESA, AZ 85207-9702	23-7228745 4		5,433.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF NORTH GEORGIA FOUNDATION, INC. - PO BOX 1599 - DAHLONEGA, GA 30533-0027	23-7066297 3		5,420.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
OREGON 4-H FOUNDATION 1211 SE BAY BLVD NEWPORT, OR 97365-4227	93-6036649 3		5,399.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SPARTA HUNTING & FISHING CLUB P.O. BOX 264 SPARTA, MI 49345	26-0749495		5,391.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
THE OHIO STATE UNIVERSITY 1802 PRINCETON RD HAMILTON, OH 45011-4701	26-1414899 3		5,196.	180.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
BULLOCH ACADEMY INC 873 WESTSIDE RD STATESBORO, GA 30458-8601	58-1119726 3		5,349.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TUCSON TRAP AND SKEET CLUB 7800 W OLD AJO HWY TUCSON, AZ 85735-9479	86-6050639 3		5,341.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
FARMINGTON MUNICIPAL SCHOOLS DISTRICT 5 - 5700 COLLEGE BLVD - FARMINGTON, NM 87402-1773	85-6000130		4,661.	650.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL ILLINOIS PRECISION SHOOTING - 9151 POLARIS DR - BLOOMINGTON, IL 61705-9026	20-5293674 3		5,292.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
GEORGE MASON UNIVERSITY 4400 UNIVERSITY DR FAIRFAX, VA 22030-4444	54-0836354		5,281.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
VIRGINIA YOUTH SPORTS ASSOCIATION 10 STIRRUP CT HAMPTON, VA 23664-1756	47-4268184 3		5,277.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
IZAACK WALTON LEAGUE OF AMERICA PO BOX 123 ALGONA, IA 50511-0123	42-1213496 3		5,272.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
SITKA SPORTSMANS ASSOCIATION INC. PO BOX 3030 SITKA, AK 99835-3030	92-0096094 3		5,259.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
HARPER CREEK CLAY TARGET CLUB 10021 6 AND ONE HALF MILE ROAD CERESCO, MI 49033-0000	46-4040614 3		5,254.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ROCKY MOUNTAIN CLAY BUSTERS 16386 PRAIRIE FARM CIR PARKER, CO 80134	46-5133097		3,996.	1,246.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LAWRENCE COUNTY YOUNG GUNS 1121 GRAHAM AVENUE WEST PITTSBURG, PA 16160-0000	46-1224989 3		5,236.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
N2DUST SHOTGUN SPORTS 4613 GRAY RD KNOXVILLE, TN 37938-2502	47-1862875 3		5,224.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CANBY HIGH SCHOOL TRAP TEAM 2763 245TH ST CANBY, MN 56220	82-1537168		2,954.	2,233.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TEXAS 4-H 210 E LIVE OAK ST SEGUIN, TX 78155-6421	61-1766381 3		4,591.	588.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PIONEER SPORTSMENS CLUB PIC; PIONEER SPORTSMAN'S CLUB PLATTEVILLE, WI 53818	94-3442656		5,168.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
TEXAS YOUTH EDUCATION IN SHOOTING SPORTS - 2112 CHAPARRAL RD - AZLE, TX 76020-1854	47-1551236 3		5,150.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
VIRGINIA YOUTH SPORTS ASSOCIATION 10 STIRRUP CT HAMPTON, VA 23664-1756	47-4268184 3		5,137.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
ROCKY KNOLLERS YOUTH SHOOTING TEAM 621 WOODLAWN ROAD GREENWOOD, SC 29646	47-5651787		4,897.	240.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
FORT LEE DUSTERS OF VIRGINIA 1564 WHITE DOGWOOD TRAIL SUFFOLK, VA 23433	46-0758871		5,128.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
JONES COUNTY SCHOOL DISTRICT 37-3 PO BOX 401 MURDO, SD 57559	46-0347243		5,119.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
WARREN COUNTY CLAYBUSTERS 1222 SCOTTS CROSSING RD CORRY, PA 16407-4124	47-5035426 3		4,513.	588.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORRIS PUBLIC SCHOOLS TRAP CLUB 25211 S 68TH ST FIRTH, NE 68358-7598	81-2765269 3		4,802.	280.	CASH	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
FAIRFIELD SPORTSMENS ASSOCIATION 3943 TIMBERIDGE LN OKEANA, OH 45053-9332	31-0741929 7		5,061.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
FORT WORTH YOUTH SHOOTING FOUNDATION - 2112 CHAPARRAL RD - AZLE, TX 76020-1854	47-2571366 3		5,051.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS
BARBERS HILL 4H SHOOTING TEAM PO BOX 669 ANAHUAC, TX 77514-0669	82-2159949 3		5,017.	0.	CASH		TO FUND YOUTH SHOOTING SPORTS



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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

THE GRANT RECIPIENTS FILL OUT THE GRANT APPLICATION SHOWING THE PROPOSED  
 USE OF THE FUNDS AND SIGN THE CONSIDERATION AGREEMENT THAT STATES THEY  
 AGREE TO USE IT FOR OUR TAX EXEMPT PURPOSE AND THAT AGREEMENT INDICATES WE  
 CAN AT ANY TIME CONDUCT AN AUDIT TO VERIFY HOW THE FUNDS WERE EXPENDED.

**SCHEDULE L**  
**(Form 990 or 990-EZ)**

**Transactions With Interested Persons**

OMB No. 1545-0047

**2019**

Open To Public Inspection

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

MIDWAY USA FOUNDATION, INC.

Employer identification number

26-1573088

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ..... ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total ..... ▶ \$ \_\_\_\_\_

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
SUBSTANTIAL CONTRIBUTOR	35% CONTROLLED ENTI	91,837.	RENTAL OF O		X
SUBSTANTIAL CONTRIBUTOR	35% CONTROLLED ENTI	91,837.	RENTAL OF O		X

**Part V Supplemental Information.**

Provide additional information for responses to questions on Schedule L (see instructions).

**SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:**

(A) NAME OF PERSON: SUBSTANTIAL CONTRIBUTOR

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

35% CONTROLLED ENTITY

(D) DESCRIPTION OF TRANSACTION: RENTAL OF OFFICE SPACE AND JANITORIAL/IT PERSONNEL

(A) NAME OF PERSON: SUBSTANTIAL CONTRIBUTOR

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

35% CONTROLLED ENTITY

(D) DESCRIPTION OF TRANSACTION: RENTAL OF OFFICE SPACE AND JANITORIAL/IT PERSONNEL

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2019**

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](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **MIDWAY USA FOUNDATION, INC.** Employer identification number **26-1573088**

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	X	3	2,526,319.	READILY DETERMINABLE
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 ( )				
26 Other ( )				
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 IV, 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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

MIDWAY USA FOUNDATION, INC.

Employer identification number

26-1573088

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

AND/OR OTHER YOUTH SHOOTING TEAM AND RELATED ACTIVITIES. WE ALSO  
MANAGE DONOR DESIGNATED ENDOWED FUNDS FOR THESE COMMUNITIES AND  
ORGANIZATIONS.

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

MISSION FUNDING TOWARD YOUNG PEOPLE THROUGH COLLEGES, UNIVERSIITES,  
EDUCATIONAL INSTITUTIONS AND YOUTH ORGANIZATIONS THAT OFFER THIS TYPE  
OF TRAINING; WITH THE PURPOSE OF INSTILLING CONFIDENCE, DISCIPLINE AND  
LEADERSHIP SKILLS IN YOUTH. THE FOUNDATION ALSO MANAGES DONOR  
DESIGNATED ENDOWED FUNDS FOR SOME OF THESE ORGANIZATIONS.

FORM 990, PART VI, SECTION A, LINE 2:

SEVERAL MEMBERS OF THE BOARD OF DIRECTORS ARE FAMILY MEMBERS.

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

THE FORM 990 IS REVIEWED BY THE BOARD OF DIRECTORS PRIOR TO FILING.

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

THE FOUNDATION ANNUALLY REQUIRES BOARD MEMBERS TO SIGN AN AFFIRMATIVE  
STATEMENT REGARDING THEIR COMPLIANCE WITH THE FOUNDATION'S CONFLICT OF  
INTEREST POLICY AT THE FIRST BOARD MEETING OF EACH YEAR.

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

A SPECIAL BOARD COMMITTEE REVIEWED AND DOCUMENTED IN MINUTES THE COMPARABLE  
SALARY DATA THEY USED IN DETERMINING THE OFFICERS SALARIES AFTER

Name of the organization <b>MIDWAY USA FOUNDATION, INC.</b>	Employer identification number <b>26-1573088</b>
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VERIFICATION OF DATA BY INDEPENDENT PEOPLE.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, CA, FL, GA, IL, HI, NH, KS, KY, MD, MA, MI, MN, MS, NY, NM, NJ, ND, SC, TN, OR, PA, RI, WA, WV  
WI, ME, AR, NC, UT, VA

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

THE ORGANIZATION DOES MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST  
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AS  
PROVIDED BY LAW.

FORM 990, PART XII, LINE 2C

IN 2017, THE FOUNDATION ADDED AN AUDIT COMMITTEE THAT HAS TAKEN ON  
RESPONSIBILITY OF OVERSIGHT OF THE AUDIT AND COMMUNICATION FOR THE  
AUDIT REPORT TO THE FULL BOARD. NO CHANGES HAVE BEEN MADE TO THE  
PROCESS FROM THE PRIOR YEAR.

# Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

## 2019

For calendar year 2019 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury  
Internal Revenue Service

Open to Public Inspection for  
501(c)(3) Organizations Only

<p><b>A</b> <input type="checkbox"/> Check box if address changed</p> <p><b>B</b> Exempt under section  <input checked="" type="checkbox"/> 501(c)(3) )  <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)  <input type="checkbox"/> 408A <input type="checkbox"/> 530(a)  <input type="checkbox"/> 529(a)</p>	<p>Print or Type</p>	<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.)  <b>MIDWAY USA FOUNDATION, INC.</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.  <b>6001 W VAN HORN TAVERN RD, NO. STE C</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code  <b>COLUMBIA, MO 65203</b></p>	<p><b>D</b> Employer identification number (Employees' trust, see instructions.)  <b>26-1573088</b></p> <p><b>E</b> Unrelated business activity code (See instructions.)  <b>900099</b></p>
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**C** Book value of all assets at end of year: **168,174,883.**

**F** Group exemption number (See instructions.) ▶ \_\_\_\_\_

**G** Check organization type ▶  501(c) corporation  501(c) trust  401(a) trust  Other trust

**H** Enter the number of the organization's unrelated trades or businesses. ▶ **1** Describe the only (or first) unrelated trade or business here ▶ **PARTNERSHIP INCOME - SEE ATTACHED**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?  Yes  No  
 If "Yes," enter the name and identifying number of the parent corporation. ▶ \_\_\_\_\_

**J** The books are in care of ▶ **GREGORY SCOTT REYNOLDS** Telephone number ▶ **573-447-5992**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances	c Balance ▶	1c		
2 Cost of goods sold (Schedule A, line 7)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement)		5	-40,880.	STMT 1
6 Rent income (Schedule C)		6		-40,880.
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)		12		
13 <b>Total.</b> Combine lines 3 through 12		13	-40,880.	-40,880.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.)  
 (Deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	
19 Taxes and licenses	19	
20 Depreciation (attach Form 4562)	20	
21 Less depreciation claimed on Schedule A and elsewhere on return	21a	21b
22 Depletion	22	
23 Contributions to deferred compensation plans	23	
24 Employee benefit programs	24	
25 Excess exempt expenses (Schedule I)	25	
26 Excess readership costs (Schedule J)	26	
27 Other deductions (attach schedule)	27	
28 <b>Total deductions.</b> Add lines 14 through 27	28	0.
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-40,880.
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	30	SEE STATEMENT 2 0.
31 Unrelated business taxable income. Subtract line 30 from line 29	31	-40,880.



**Part III Total Unrelated Business Taxable Income**

32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	-40,880.
33	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules)	34	0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35	-40,880.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	-40,880.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000.
39	<b>Unrelated business taxable income.</b> Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37	39	-40,880.

**Part IV Tax Computation**

40	<b>Organizations Taxable as Corporations.</b> Multiply line 39 by 21% (0.21)	40	0.
41	<b>Trusts Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on the amount on line 39 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	41	
42	<b>Proxy tax.</b> See instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	<b>Tax on Noncompliant Facility Income.</b> See instructions	44	
45	<b>Total.</b> Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	0.

**Part V Tax and Payments**

46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a	
b	Other credits (see instructions)	46b	
c	General business credit. Attach Form 3800	46c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	46d	
e	<b>Total credits.</b> Add lines 46a through 46d	46e	
47	Subtract line 46e from line 45	47	0.
48	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	48	
49	<b>Total tax.</b> Add lines 47 and 48 (see instructions)	49	0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
51a	Payments: A 2018 overpayment credited to 2019	51a	
b	2019 estimated tax payments	51b	
c	Tax deposited with Form 8868	51c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	51d	
e	Backup withholding (see instructions)	51e	
f	Credit for small employer health insurance premiums (attach Form 8941)	51f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	51g	
52	<b>Total payments.</b> Add lines 51a through 51g	52	
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	53	
54	<b>Tax due.</b> If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55	<b>Overpayment.</b> If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	
56	Enter the amount of line 55 you want: <b>Credited to 2020 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	56	

**Part VI Statements Regarding Certain Activities and Other Information** (see instructions)

57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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 taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here**  
 Signature of officer: \_\_\_\_\_ Date: \_\_\_\_\_  
 Title: **PRESIDENT**

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

**Paid Preparer Use Only**  
 Print/Type preparer's name: **NICK MESTRES**  
 Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Check  if self-employed PTIN: **P02077144**  
 Firm's name: **WILLIAMS-KEEPERS LLC** Firm's EIN: **43-1126847**  
 Firm's address: **2005 WEST BROADWAY, SUITE 100 COLUMBIA, MO 65203-**  
 Phone no.: **(573) 442-6171**

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ► **N/A**

1	Inventory at beginning of year .....	1		6	Inventory at end of year .....	6			
2	Purchases .....	2		7	<b>Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2 .....	7			
3	Cost of labor .....	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? .....			Yes	No
4a	Additional section 263A costs (attach schedule) .....	4a							
b	Other costs (attach schedule) .....	4b							
5	<b>Total.</b> Add lines 1 through 4b .....	5							

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) .....

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ... 0.

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b> .....			Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 0.
<b>Total dividends-received deductions</b> included in column 8 .....			0.	0.

**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
<b>Totals</b>			0.	0.

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
<b>Totals</b>		0.		0.

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 25.
<b>Totals</b>		0.	0.			0.

**Schedule J - Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b> (carry to Part II, line (5))		0.	0.			0.

**Part II** **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b> .....	<b>0.</b>	<b>0.</b>				<b>0.</b>
<b>Totals, Part II (lines 1-5)</b> .....	Enter here and on page 1, Part I, line 11, col. (A). <b>0.</b>	Enter here and on page 1, Part I, line 11, col. (B). <b>0.</b>				Enter here and on page 1, Part II, line 26. <b>0.</b>

**Schedule K - Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14 .....			<b>0.</b>

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 1
DESCRIPTION		NET INCOME OR (LOSS)
UBIT FROM LIMITED PARTNERSHIPS - ORDINARY BUSINESS INCOME (LOSS)		-40,880.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5		-40,880.

FORM 990-T	NET OPERATING LOSS DEDUCTION			STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	56,143.	0.	56,143.	56,143.
NOL CARRYOVER AVAILABLE THIS YEAR			56,143.	56,143.

# Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>MIDWAY USA FOUNDATION, INC.</b>	Taxpayer identification number (TIN) <b>26-1573088</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>6001 W VAN HORN TAVERN RD, NO. STE C</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>COLUMBIA, MO 65203</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**GREGORY SCOTT REYNOLDS - 6001 WEST VAN HORN TAVERN ROAD,**

- The books are in the care of ▶ **SUITE C - COLUMBIA, MO 65203**  
Telephone No. ▶ **573-447-5992** Fax No. ▶ \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **NOVEMBER 16, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
▶  calendar year **2019** or  
▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

# 2019 TAX RETURN FILING INSTRUCTIONS

MISSOURI FORM MO-1120

## FOR THE YEAR ENDING

December 31, 2019

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**Prepared For:**

Midway USA Foundation Inc  
6001 W Van Horn Tavern Rd  
Columbia, MO 65203

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**Prepared By:**

Williams-Keepers LLC  
3220 West Edgewood, Suite E  
Jefferson City, MO 65109

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**To Be Signed and Dated By:**

The appropriate corporate officer(s).

---

**Amount of Tax:**

Total tax	\$	0
Less: payments and credits	\$	0
Plus: other amount	\$	0
Plus: interest and penalties	\$	0
No payment required	\$	

---

**Overpayment:**

Not applicable

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**Make Check Payable to:**

Not applicable

---

**Mail Tax Return and Check (if applicable) to:**

Missouri Department of Revenue  
P.O. Box 700  
Jefferson City, MO 65105-0700

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**Return Must be Mailed On or Before:**

Please mail as soon as possible.

---

**Special Instructions:**

MISSOURI DEPARTMENT OF  
**REVENUE**  
2019 Corporation Income Tax Return

Department Use Only  
(MM/DD/YY)

Missouri Tax  
I.D. Number

1	6	7	8	0	7	0	9

Missouri Corporation Income  
Tax Return for 2019

Beginning  
(MM/DD/YY)

0	1	0	1	1	9
---	---	---	---	---	---

Ending  
(MM/DD/YY)

1	2	3	1	1	9
---	---	---	---	---	---

Federal Employer  
I.D. Number

2	6	1	5	7	3	0	8	8
---	---	---	---	---	---	---	---	---

Charter  
Number

N	0	0	8	6	2	0	4	7		
---	---	---	---	---	---	---	---	---	--	--

Corporation  
Name

MIDWAY USA FOUNDATION INC

Address

6001 W VAN HORN TAVERN RD

City

COLUMBIA

State

MO

ZIP

65203



19111011019

Select this box if you have an approved federal extension. Attach a copy of the approved Federal Extension (Form 7004).

Select Applicable Boxes. Failure to select the address change box may result in mailings going to the last address on file.

- Consolidated MO Return   
  Consolidated Federal and Separate Missouri Return   
  Amended Return   
  Name Change  
 Address Change   
  Final Return and Close Corporation Income Tax Account   
  Bankruptcy   
  1120C   
 990T  
 All Missouri source income is from an interest(s) in a partnership(s)   
 Public Law 86-272

Computation of Income Tax

1.	Federal Taxable Income from Federal Form 1120, Line 30 .....	1	<40,880>	.00
2.	Corporation income tax from Missouri, or other states, their subdivisions, and District of Columbia deducted in determining federal taxable income .....	2		.00
3.	Missouri modifications - Additions (complete Page 3, Part 1) .....	3		.00
4.	Total additions - Add Lines 2 and 3 .....	4		.00
5.	Missouri modifications - Subtractions (complete Page 3, Part 2) .....	5		.00
6.	Balance - Line 1 plus Line 4 less Line 5 .....	6	<40,880>	.00
7.	Federal Income Tax - current year (complete Page 4, Part 3) .....	7		.00
8.	Taxable Income - all sources - Line 6 less Line 7 .....	8	<40,880>	.00
9.	Missouri Taxable Income - if all Missouri income, repeat Line 8. If not, complete <b>Form MO-MS</b> and enter apportionment method chosen and the applicable percentage below.			
	Method <input type="checkbox"/> Percent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Multiply Line 8 by the percentage .....	9	<40,880>	.00
10.	Missouri Dividends Deduction (see instructions before entering an amount) .....	10		.00
11.	Enterprise Zone or Rural Empowerment Zone Income Modification .....	11		.00
12.	Bring Jobs Home Deduction (see instructions before entering an amount) .....	12		.00
13.	Transportation Facilities Deductions:			
	<input type="checkbox"/> Port Cargo Expansion <input type="checkbox"/> International Trade Facility <input type="checkbox"/> Qualified Trade Activities	13		.00
14.	Missouri Taxable Income - Line 9 less Lines 10, 11, 12, and 13 .....	14	<40,880>	.00



Tax

15. Corporation income Tax - 6.25% of Line 14 ..... 15  0 .00

16. Recapture of Missouri Low Income Housing Credit (attach a copy of Federal Form 8611) (see instructions) ..... 16  0 .00

17. Total Tax - Add Lines 15 and 16 ..... 17  0 .00

Credits and Payments

18. Tax credits - (attach **Form MO-TC**) ..... 18  .00

19. Estimated tax payments (include approved overpayments applied from previous year) ..... 19  .00

20. Payments with **Form MO-7004** ..... 20  .00

21. Amended Return Only: Tax paid with (or after) the filing of the original return ..... 21  .00

22. Subtotal - Add Lines 18 through 21 ..... 22  .00

23. Amended Return Only: Overpayment, if any, as shown on original return or as later adjusted ..... 23  .00

24. Total - Line 22 less Line 23 ..... 24  .00

Refund or Tax Due

25. If Line 24 is more than Line 17, enter overpayment here ..... 25  .00

26. Amount remitted or amount of tax overpayment to be contributed to the funds listed below ..... 26  .00

Children's Trust Fund	Veterans Trust Fund	Elderly Home Delivered Meals Trust Fund	Missouri National Guard Trust Fund	Workers' Memorial Fund	Childhood Lead Testing Fund	Missouri Military Family Relief Fund	General Revenue Fund	Organ Donor Program Fund	Kansas City Regional Law Enforcement Memorial Fund	Soldiers Memorial Military Museum in St. Louis Fund	Additional Fund Code (See Instr.)	Additional Fund Code (See Instr.)
<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00

27. Overpayment to be applied to next filing period ..... 27  .00

28. Overpayment to be refunded - Line 25 less Lines 26 and 27 ..... Refund 28  .00

29. If Line 24 is less than Line 17, enter underpayment here ..... 29  .00

30. Enter the total of the below on Line 30 ..... 30  .00

Interest  .00 Penalty  .00 MO-2220  .00

31. Total Due - Add Lines 29 and 30 (U.S. funds only) ..... DOR Only  Total Due 31  .00

Signature

If you pay by check, you authorize the Department of Revenue to process the check electronically. Any returned check may be presented again electronically. Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.

Department Use Only  
 S  E  F

I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of his or her firm, or if internally prepared, any member of the internal staff. ....  Yes  No

Signature of Officer  Printed Name

Telephone Number  Date Signed (MM/DD/YY)

Preparer's Signature (Including Internal Preparer)  Preparer's FEIN, SSN, or PTIN **P 0 2 0 7 7 1 4 4**

Telephone Number  5 7 3 6 3 5 6 1 9 6 Date Signed (MM/DD/YY)



Part 1 - Missouri Modifications - Additions

1a. State and local bond interest (except Missouri)	1a		.00		
1b. Less: related expenses (omit if less than \$500). Enter Line 1a less Line 1b on Line 1	1b		.00	1	.00
2. Fiduciary and partnership adjustment (enter share of adjustment from Form MO-1041, Page 2, Part 1, Line 19 or Form MO-1065, Line 17)				2	.00
3. Net operating loss modification (Section 143.431.4, RSMo) (Do not enter NOL carryover)				3	.00
4. Donations claimed for the Food Pantry Tax Credit that were deducted from federal taxable income, Section 135.647, RSMo				4	.00
5. Total - Add Lines 1 through 4. Enter here and on Page 1, Line 3				5	.00

Part 2 - Missouri Modifications - Subtractions

1a. Interest from exempt federal obligations (must attach a detailed schedule)	1a		.00		
1b. Less: related expenses (omit if less than \$500). Enter Line 1a less Line 1b on Line 1	1b		.00	1	.00
2. Federally taxable - Missouri exempt obligations				2	.00
3. Agriculture Disaster Relief (Section 143.121.3(10), RSMo)				3	.00
4. Previously taxed income				4	.00
5. Amount of any state income tax refund included in federal taxable income				5	.00
6. Capital gain exclusion from the sale of low income housing project				6	.00
7. Fiduciary and partnership adjustment (enter share of adjustment from Form MO-1041, Page 2, Part 1, Line 20 or Form MO-1065, Line 18)				7	.00
8. Missouri depreciation basis adjustment (Section 143.121.3(7), RSMo)				8	.00
9. Subtraction Modification offsetting previous Addition Modification from a Net Operating Loss (NOL) deduction from an applicable year (Section 143.121.2(4), RSMo)				9	.00
10. Depreciation recovery on qualified property that is sold (Section 143.121.3(9), RSMo)				10	.00
11. Build America and Recovery Zone Bond Interest				11	.00
12. Missouri Public-Private Partnerships Transportation Act				12	.00
13. Total - Add Lines 1 through 12. Enter here and on Page 1, Line 5				13	.00



Consolidated Federal and Separate Missouri Return - See Instructions

Part 3 - Federal Income Tax - Current Year

1. Federal tax from Federal Form 1120, Schedule J, Line 11 .....	1		.00							
2. Foreign tax credit (from Federal Form 1120, Schedule J, Line 5a) .....	2		.00							
3. Federal income tax - add Lines 1 and 2; multiply the total by 50%; and enter here and on Page 1, Line 7 .....	3		.00							
Consolidated federal and separate Missouri returns must complete Lines 4-6										
4. Numerator (the amount of separate company federal taxable income) .....	4		.00							
5. Denominator (enter the total positive separate company federal taxable income) .....	5		.00							
6. Divide Line 4 by Line 5. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>0</td><td>0</td></tr></table> . <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>0</td><td>0</td><td>0</td></tr></table> Multiply by Line 3. Enter here and on Page 1, Line 7. (Consolidated federal and separate Missouri return filers must attach consolidated Federal Form 1120, Schedule J, and an income statement or summary of profit companies. If information is not sent, the federal income tax deduction may be reduced to zero.) .....	0	0	0	0	0	0	0	6		.00
0	0	0								
0	0	0	0							

Part 4 - Amended Reason

If this is an amended return, select one box indicating the reason. A separate Form MO-1120 must be filed for each reason.

- A. Missouri Correction Only     B. Federal Correction     C. Loss Carryback (Complete Part 5)
- D. Federal Tax Credit Carryback     E. IRS Audit (RAR)
- F. Missouri Tax Credit Carryback (Enter on Part 5, Line 1 the first year that the credit became available.)

Department Use Only    A     R     N     Department Use Only    

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Part 5 - Amended Return Loss Carryback or Federal Tax Credit Carryback

If this is an amended return and if a loss carryback, federal tax credit carryback or Missouri tax credit carryback is involved in this amended return, complete the following section. Consolidated federal and separate Missouri filers should report figures attributable to this separate Missouri return and attach a copy of the Federal Consolidated amended Form 1139 or Form 1120X showing the carryback or page 1 of the Federal Consolidated Form 1120 for the year of the loss to verify that only the separate company had the loss. Also, enclose a copy of the consolidated income statement for this year and the year of the loss. (If NOL, federal tax credit carryback or Missouri tax credit carryback, enter year that the credit first became available.)

		M   M   D   D   Y   Y							
1. Year of loss .....	1	<table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>							
2. Total net capital loss carryback .....	2		.00						
3. Total net operating loss carryback .....	3		.00						
4. Federal income tax adjustment - Consolidated federal and separate Missouri filers must attach computations .....	4		.00						

Mail To:

Balance Due:

Missouri Department of Revenue  
P.O. Box 3365  
Jefferson City, MO 65105-3365

Refund or No Amount Due:

Missouri Department of Revenue  
P.O. Box 700  
Jefferson City, MO 65105-0700

Phone: (573) 751-4541  
Fax: (573) 522-1721  
E-mail: [corporate@dor.mo.gov](mailto:corporate@dor.mo.gov)

Visit <http://dor.mo.gov/business/corporate/> for additional information.



1911041019

# Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

## 2019

For calendar year 2019 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury  
Internal Revenue Service

Open to Public Inspection for  
501(c)(3) Organizations Only

<b>A</b> <input type="checkbox"/> Check box if address changed	<b>B</b> Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type	Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.) <b>MIDWAY USA FOUNDATION, INC.</b> Number, street, and room or suite no. If a P.O. box, see instructions. <b>6001 W VAN HORN TAVERN RD, NO. STE C</b> City or town, state or province, country, and ZIP or foreign postal code <b>COLUMBIA, MO 65203</b>	<b>D</b> Employer identification number (Employees' trust, see instructions.) <b>26-1573088</b>  <b>E</b> Unrelated business activity code (See instructions.) <b>900099</b>
--	---	---------------------	--	--

<b>C</b> Book value of all assets at end of year <b>168,174,883.</b>	<b>F</b> Group exemption number (See instructions.) ▶	<b>G</b> Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust
---	---	--

**H** Enter the number of the organization's unrelated trades or businesses. ▶ 1 Describe the only (or first) unrelated trade or business here ▶ **PARTNERSHIP INCOME - SEE ATTACHED**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation. ▶

**J** The books are in care of ▶ **GREGORY SCOTT REYNOLDS** Telephone number ▶ **573-447-5992**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
<b>1a</b> Gross receipts or sales			
<b>b</b> Less returns and allowances			
<b>c</b> Balance	<b>1c</b>		
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c	<b>3</b>		
<b>4a</b> Capital gain net income (attach Schedule D)	<b>4a</b>		
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>		
<b>c</b> Capital loss deduction for trusts	<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)	<b>5</b> -40,880.	<b>STMT 1</b>	<b>-40,880.</b>
<b>6</b> Rent income (Schedule C)	<b>6</b>		
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	<b>8</b>		
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>		
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>		
<b>11</b> Advertising income (Schedule J)	<b>11</b>		
<b>12</b> Other income (See instructions; attach schedule)	<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12	<b>13</b> -40,880.		<b>-40,880.</b>

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.)  
(Deductions must be directly connected with the unrelated business income.)

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
<b>15</b> Salaries and wages	<b>15</b>	
<b>16</b> Repairs and maintenance	<b>16</b>	
<b>17</b> Bad debts	<b>17</b>	
<b>18</b> Interest (attach schedule) (see instructions)	<b>18</b>	
<b>19</b> Taxes and licenses	<b>19</b>	
<b>20</b> Depreciation (attach Form 4562)	<b>20</b>	
<b>21</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>21a</b>	<b>21b</b>
<b>22</b> Depletion	<b>22</b>	
<b>23</b> Contributions to deferred compensation plans	<b>23</b>	
<b>24</b> Employee benefit programs	<b>24</b>	
<b>25</b> Excess exempt expenses (Schedule I)	<b>25</b>	
<b>26</b> Excess readership costs (Schedule J)	<b>26</b>	
<b>27</b> Other deductions (attach schedule)	<b>27</b>	
<b>28 Total deductions.</b> Add lines 14 through 27	<b>28</b>	<b>0.</b>
<b>29</b> Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	<b>29</b>	<b>-40,880.</b>
<b>30</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	<b>30</b>	<b>0.</b>
<b>31</b> Unrelated business taxable income. Subtract line 30 from line 29	<b>31</b>	<b>-40,880.</b>

<b>Part III Total Unrelated Business Taxable Income</b>		
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32 -40,880.
33	Amounts paid for disallowed fringes	33
34	Charitable contributions (see instructions for limitation rules)	34 0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35 -40,880.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37 -40,880.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38 1,000.
39	<b>Unrelated business taxable income.</b> Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37	39 -40,880.

<b>Part IV Tax Computation</b>		
40	<b>Organizations Taxable as Corporations.</b> Multiply line 39 by 21% (0.21)	40 0.
41	<b>Trusts Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on the amount on line 39 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	41
42	<b>Proxy tax.</b> See instructions	42
43	Alternative minimum tax (trusts only)	43
44	<b>Tax on Noncompliant Facility Income.</b> See instructions	44
45	<b>Total.</b> Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45 0.

<b>Part V Tax and Payments</b>		
46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a
b	Other credits (see instructions)	46b
c	General business credit. Attach Form 3800	46c
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	46d
e	<b>Total credits.</b> Add lines 46a through 46d	46e
47	Subtract line 46e from line 45	47 0.
48	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	48
49	<b>Total tax.</b> Add lines 47 and 48 (see instructions)	49 0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50 0.
51a	Payments: A 2018 overpayment credited to 2019	51a
b	2019 estimated tax payments	51b
c	Tax deposited with Form 8868	51c
d	Foreign organizations: Tax paid or withheld at source (see instructions)	51d
e	Backup withholding (see instructions)	51e
f	Credit for small employer health insurance premiums (attach Form 8941)	51f
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	51g
52	<b>Total payments.</b> Add lines 51a through 51g	52
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	53
54	<b>Tax due.</b> If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54
55	<b>Overpayment.</b> If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55
56	Enter the amount of line 55 you want: <b>Credited to 2020 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	56

<b>Part VI Statements Regarding Certain Activities and Other Information</b> (see instructions)		
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes No <input type="checkbox"/> <input checked="" type="checkbox"/> X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.	<input type="checkbox"/> <input checked="" type="checkbox"/> X
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$	

**Sign Here** 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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: \_\_\_\_\_ Date: \_\_\_\_\_ Title: **PRESIDENT**

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

**Paid Preparer Use Only**

Print/Type preparer's name: **NICK MESTRES** Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check  if self-employed PTIN: **P02077144**

Firm's name: **WILLIAMS-KEEPERS LLC** Firm's EIN: **43-1126847**

Firm's address: **2005 WEST BROADWAY, SUITE 100 COLUMBIA, MO 65203-** Phone no. **(573) 442-6171**

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ► **N/A**

1	Inventory at beginning of year .....	1		6	Inventory at end of year .....	6			
2	Purchases .....	2			7	<b>Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2 .....	7		
3	Cost of labor .....	3			8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? .....		Yes	No
4a	Additional section 263A costs (attach schedule) .....	4a							
b	Other costs (attach schedule) .....	4b							
5	<b>Total.</b> Add lines 1 through 4b .....	5							

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) .....

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ... 0.

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b> .....			Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 0.
<b>Total dividends-received deductions</b> included in column 8 .....			0.	0.

**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
<b>Totals</b> .....			<b>0.</b>	<b>0.</b>

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
<b>Totals</b> .....		<b>0.</b>		<b>0.</b>

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 25.
<b>Totals</b> .....	<b>0.</b>	<b>0.</b>				<b>0.</b>

**Schedule J - Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b> (carry to Part II, line (5)) .....	<b>0.</b>	<b>0.</b>				<b>0.</b>

**Part II** **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b> .....	<b>0.</b>	<b>0.</b>				<b>0.</b>
<b>Totals, Part II (lines 1-5)</b> .....	Enter here and on page 1, Part I, line 11, col. (A). <b>0.</b>	Enter here and on page 1, Part I, line 11, col. (B). <b>0.</b>				Enter here and on page 1, Part II, line 26. <b>0.</b>

**Schedule K - Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14 .....			<b>0.</b>



FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 1
DESCRIPTION		NET INCOME OR (LOSS)
UBIT FROM LIMITED PARTNERSHIPS - ORDINARY BUSINESS INCOME (LOSS)		-40,880.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5		-40,880.

FORM 990-T	NET OPERATING LOSS DEDUCTION			STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	56,143.	0.	56,143.	56,143.
NOL CARRYOVER AVAILABLE THIS YEAR			56,143.	56,143.

# Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>MIDWAY USA FOUNDATION, INC.</b>	Taxpayer identification number (TIN) <b>26-1573088</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>6001 W VAN HORN TAVERN RD, NO. STE C</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>COLUMBIA, MO 65203</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**GREGORY SCOTT REYNOLDS - 6001 WEST VAN HORN TAVERN ROAD,**

- The books are in the care of ▶ **SUITE C - COLUMBIA, MO 65203**  
Telephone No. ▶ **573-447-5992** Fax No. ▶ \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **NOVEMBER 16, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
▶  calendar year **2019** or  
▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Midway USA Foundation, Inc.

Summary of UBI and Investment Partnership Carryforward Losses  
Form 990 -T

Tax Year: 2019

EIN: 26-1573088

PTP Partnership	Federal EIN	Ordinary Gains - Per Form K-1	PAL OFFSET	Net UBI	
Andeavor Logistics, LP	27-4151603	569	(53,427)	(52,858)	Final
Antero Midstream Partners, LP	46-4109058	8,922	(3,620)	5,302	Final
Buckeye Partners, LP	23-2432497	14,504	(10,751)	3,753	Final
DCP Midstream, LP	03-0567133	45,551	(33,064)	12,487	Final
Enable Midstream Partners, LP	72-1252419	18,758	(24,948)	(6,190)	Final
Energy Transfer, LP	30-0108820	3,782	(3,782)	-	
Enlink Midstream Partners, LP	16-1616605	32,497	(33,007)	(510)	Final
Enterprise Products Partners, LP	76-0568219	1,797	(1,797)	-	
EQM Midstream Partners, LP	37-1661577	1,513	(1,513)	-	
Genesis Energy, LP	76-0513049	25,155	(19,407)	5,748	Final
Magellan Midstream Partners, LP	73-1599053	8,806	(8,806)	-	
MPLX, LP	27-0005456	224	(224)	-	
NGL Energy Partners, LP	27-3427920	7,143	(18,685)	(11,542)	Final
Nustar Energy, LP	74-2956831	359	(359)	-	
Plains All American Pipeline, LP	76-0582150	8,508	(8,508)	-	
Shell Midstream Partners	46-5223743	4,747	(1,817)	2,930	
China-US Industrial Coop Partnership, LP	83-1021290	-	-	-	
Broad Street Real Estate Credit	98-1360807	-	-	-	
<b>Total UBI Income/(Loss) Per 990T</b>		<b>182,835</b>	<b>(223,715)</b>	<b>(40,880)</b>	

PTP Partnerships	Federal EIN	Prior Year Loss Carryforward	2019 Form K-1, Box 20V	PAL USED IN 2019	Carried Forward to 2019	
Andeavor Logistics, LP	27-4151603	(39,697)	(13,730)	53,427	-	Final
Antero Midstream Partners, LP	46-4109058	(3,635)	15	3,620	-	Final
Buckeye Partners, LP	23-2432497	(8,324)	(2,427)	10,751	-	Final
DCP Midstream, LP	03-0567133	(20,419)	(12,645)	33,064	-	Final
Enable Midstream Partners, LP	72-1252419	(10,905)	(14,043)	24,948	-	Final
Energy Transfer, LP	30-0108820	(83,159)	(42,704)	3,782	(122,081)	
Enlink Midstream Partners, LP	16-1616605	(32,213)	(794)	33,007	-	Final
Enterprise Products Partners, LP	76-0568219	(80,449)	(44,670)	1,797	(123,322)	
EQM Midstream Partners, LP	37-1661577	-	(4,179)	1,513	(2,666)	
Genesis Energy, LP	76-0513049	(6,939)	(12,468)	19,407	-	Final
Magellan Midstream Partners, LP	73-1599053	(10,261)	(12,003)	8,806	(13,458)	
MPLX, LP	27-0005456	(15,938)	(30,807)	224	(46,521)	
NGL Energy Partners, LP	27-3427920	(18,483)	(202)	18,685	-	Final
Nustar Energy, LP	74-2956831	(8,650)	(14,950)	359	(23,241)	
Plains All American Pipeline, LP	76-0582150	(30,418)	(30,015)	8,508	(51,925)	
Shell Midstream Partners	46-5223743	(1,615)	(202)	1,817	-	Final
<b>Non PTP Partnerships</b>		-	-	-	-	
China-US Industrial Coop Partnership, LP	83-1021290	-	-	-	-	
Broad Street Real Estate Credit	98-1360807	-	-	-	-	
<b>Total Passive Activity Losses Carried Forward to 2019</b>		<b>(371,105)</b>	<b>(235,824)</b>	<b>223,715</b>	<b>(383,214)</b>	