

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2022, or fiscal year beginning _____, 2022, and ending _____, 20__

2022

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

MIDWAY USA FOUNDATION, INC.

EIN or SSN

26-1573088

Name and title of officer or person subject to tax **RICHARD LEEPER
PRESIDENT**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, 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.

1a	Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1145,219,850.
2a	Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a	Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b
4a	Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b
5a	Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b
6a	Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b
7a	Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b
8a	Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b
9a	Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b
10a	Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2022 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 electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the 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 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 electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

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 tax year 2022 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 or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 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.

Signature of officer or person subject to tax

Date **11/8/23**

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.

43236726847

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return 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

11/7/2023

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2022)

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning _____, 2022, and ending _____, 20_____

2022

Department of the Treasury
Internal Revenue Service

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Name of filer

MIDWAY USA FOUNDATION, INC.

EIN or SSN

26-1573088

Name and title of officer or person subject to tax **RICHARD LEEPER
PRESIDENT**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, 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.

1a Form 990 check here	<input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b _____
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here	<input checked="" type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b 4,383.
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2022 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 electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the 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 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 electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

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 tax year 2022 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 or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 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.

Signature of officer or person subject to tax

Date

11/8/23

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.

43236726847

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return 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

11/7/2023

**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 for instructions and the latest information.

2022

Open to Public Inspection

A For the **2022** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization MIDWAY USA FOUNDATION, INC.		D Employer identification number 26-1573088
	Doing business as		E Telephone number (573) 447-5957
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	6001 W VAN HORN TAVERN RD	STE C	G Gross receipts \$ 68,932,730.
	City or town, state or province, country, and ZIP or foreign postal code COLUMBIA, MO 65203		
F Name and address of principal officer: RICHARD LEEPER SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions	

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

J Website: **WWW.MIDWAYUSAFFOUNDATION.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **2007** **M** State of legal domicile: **MO**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WE HELP COMMUNITIES AND ORGANIZATIONS RAISE FUNDS TO SUPPORT THEIR HIGH SCHOOL, COLLEGE,		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	16
	6 Total number of volunteers (estimate if necessary)	6	13
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	20,870.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	41,796,685.	35,600,389.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	20,539,890.	8,999,981.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	587,269.	619,480.
		62,923,844.	45,219,850.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,012,287.	9,346,436.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,332,129.	1,464,509.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	480,326.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,477,264.	1,779,655.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,821,680.	12,590,600.	
19 Revenue less expenses. Subtract line 18 from line 12	52,102,164.	32,629,250.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	269,929,204.	273,074,552.
	22 Net assets or fund balances. Subtract line 21 from line 20	183,835.	217,420.
		269,745,369.	272,857,132.

Part II Signature Block

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

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

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 \$ 11,418,473. including grants of \$ 9,346,436.) (Revenue \$) 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 11,418,473.

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> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 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> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 13		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, FL, GA, IL, HI, KS, KY, MD, ME
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
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 the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) G. SCOTT REYNOLDS EXECUTIVE DIRECTOR	40.00			X			195,780.	0.	5,839.	
(2) RICHARD LEEPER PRESIDENT	2.00	X		X			0.	0.	0.	
(3) SARA POTTERFIELD SECRETARY/TREASURER	1.00	X		X			0.	0.	0.	
(4) TOM SCHAUWECKER VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(5) LARRY POTTERFIELD DIRECTOR	1.00	X					0.	0.	0.	
(6) JAMES DUNN DIRECTOR	1.00	X					0.	0.	0.	
(7) ANA ENGLISH DIRECTOR	1.00	X					0.	0.	0.	
(8) CYNDI FLANNIGAN DIRECTOR	1.00	X					0.	0.	0.	
(9) SHELDON BENGE DIRECTOR	1.00	X					0.	0.	0.	
(10) NANCY BACON DIRECTOR	1.00	X					0.	0.	0.	
(11) NICOLE CAPOSSELA DIRECTOR	1.00	X					0.	0.	0.	
(12) AARON MAZER DIRECTOR	1.00	X					0.	0.	0.	
(13) JON ZINNEL DIRECTOR	1.00	X					0.	0.	0.	
(14) CHRIS AGNES DIRECTOR	1.00	X					0.	0.	0.	

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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
1b Subtotal							195,780.	0.	5,839.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							195,780.	0.	5,839.	

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 former 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
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e			
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	35,600,389.		
	g	Noncash contributions included in lines 1a-1f	1g	\$ 170,644.		
	h	Total. Add lines 1a-1f		35,600,389.		
Program Service Revenue	2 a	_____	Business Code			
	b	_____				
	c	_____				
	d	_____				
	e	_____				
	f	All other program service revenue				
	g	Total. Add lines 2a-2f				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		3,515,063.		3515063.
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6 a	Gross rents	(i) Real	638,792.		
			(ii) Personal			
	b	Less: rental expenses ...	6b	19,812.		
	c	Rental income or (loss)	6c	618,980.		
	d	Net rental income or (loss)		618,980.		618,980.
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	29,177,986.		
			(ii) Other			
	b	Less: cost or other basis and sales expenses	7b	23,693,068.		
	c	Gain or (loss)	7c	5,484,918.		
d	Net gain or (loss)		5,484,918.		5484918.	
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a				
		8b				
c	Net income or (loss) from fundraising events					
9 a	Gross income from gaming activities. See Part IV, line 19	9a				
		9b				
c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	10a				
		10b				
c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11 a	OTHER MISC INCOME	Business Code	900099	500.	500.
	b	_____				
	c	_____				
	d	All other revenue				
	e	Total. Add lines 11a-11d		500.		
12	Total revenue. See instructions		45,219,850.	0.	0.	9619461.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	9,346,436.	9,346,436.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	201,619.	107,402.	47,421.	46,796.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,018,246.	542,420.	239,491.	236,335.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	29,474.	15,701.	6,932.	6,841.
9 Other employee benefits	131,007.	69,787.	30,813.	30,407.
10 Payroll taxes	84,163.	44,834.	19,795.	19,534.
11 Fees for services (nonemployees):				
a Management				
b Legal	7,900.		7,900.	
c Accounting	28,600.		28,600.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	969,624.	969,624.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	18,744.	7,854.	7,468.	3,422.
12 Advertising and promotion	44,154.	23,521.	10,385.	10,248.
13 Office expenses	64,375.	34,293.	15,141.	14,941.
14 Information technology	179,824.	95,792.	42,295.	41,737.
15 Royalties				
16 Occupancy	26,768.	5,459.	18,931.	2,378.
17 Travel	135,368.	72,110.	31,839.	31,419.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	95,662.	50,959.	22,500.	22,203.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	148,036.		148,036.	
23 Insurance	8,538.	4,548.	2,008.	1,982.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a CREDIT CARD FEES	33,051.	17,606.	7,774.	7,671.
b EMPLOYMENT EXPENSE	14,978.	7,979.	3,523.	3,476.
c STATE RENEWAL FEES	3,163.	1,685.	744.	734.
d MISC EXPENSE	463.	463.		
e All other expenses	407.		205.	202.
25 Total functional expenses. Add lines 1 through 24e	12,590,600.	11,418,473.	691,801.	480,326.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,281,961.	1	3,040,668.
	2 Savings and temporary cash investments	14,639,558.	2	10,567,078.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	65,538.	4	68,772.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	349,903.	8	
	9 Prepaid expenses and deferred charges	176,335.	9	552,125.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,008,497.		
	b Less: accumulated depreciation	10b 298,904.		
	11 Investments - publicly traded securities	7,857,629.	10c	7,709,593.
	12 Investments - other securities. See Part IV, line 11	20,104,481.	11	15,775,726.
	13 Investments - program-related. See Part IV, line 11	25,206,378.	12	25,113,589.
	14 Intangible assets	199,247,421.	13	210,247,001.
	15 Other assets. See Part IV, line 11		14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	269,929,204.	15		
17 Accounts payable and accrued expenses	183,835.	16	273,074,552.	
18 Grants payable		17	217,420.	
19 Deferred revenue		18		
20 Tax-exempt bond liabilities		19		
21 Escrow or custodial account liability. Complete Part IV of Schedule D		20		
22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		21		
23 Secured mortgages and notes payable to unrelated third parties		22		
24 Unsecured notes and loans payable to unrelated third parties		23		
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		24		
26 Total liabilities. Add lines 17 through 25	183,835.	25		
27 Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.		26	183,835.	
28 Net assets without donor restrictions	250,403,578.	27	236,270,516.	
29 Net assets with donor restrictions	19,341,791.	28	36,586,616.	
30 Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
31 Capital stock or trust principal, or current funds		29		
32 Paid-in or capital surplus, or land, building, or equipment fund		30		
33 Retained earnings, endowment, accumulated income, or other funds		31		
34 Total net assets or fund balances	269,745,369.	32	272,857,132.	
35 Total liabilities and net assets/fund balances	269,929,204.	33	273,074,552.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	45,219,850.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,590,600.
3	Revenue less expenses. Subtract line 2 from line 1	3	32,629,250.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	269,745,369.
5	Net unrealized gains (losses) on investments	5	-29,517,487.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	272,857,132.

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 on 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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

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

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

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

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).)
- 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 on 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

(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		
Total						

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10545739.	13840253.	22223982.	41780845.	35600389.	123991208
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	10545739.	13840253.	22223982.	41780845.	35600389.	123991208
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	5107363.	5226288.	8219790.	8302960.	210,288.	27066689.
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.
c Add lines 7a and 7b	5107363.	5226288.	8219790.	8302960.	210,288.	27066689.
8 Public support. (Subtract line 7c from line 6.)						96924519.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6	10545739.	13840253.	22223982.	41780845.	35600389.	123991208
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4174037.	4834222.	2584276.	5602184.	4153855.	21348574.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	4174037.	4834222.	2584276.	5602184.	4153855.	21348574.
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,077.	1,735.	1,332.	838.	500.	5,482.
13 Total support. (Add lines 9, 10c, 11, and 12.)	14720853.	18676210.	24809590.	47383867.	39754744.	145345264

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	66.69 %
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	59.75 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	14.69 %
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	14.85 %

19a 33 1/3% support tests - 2022. 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 - 2021. 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 on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
1		
2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
3b			

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

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), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

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

Schedule B (Form 990) (2022)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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: 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>31,341,440.</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: 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>377,625.</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: 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>200,000.</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: 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>196,928.</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: 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>137,550.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	<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>122,570.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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; 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: 60%;"></div>	\$ <u>110,675.</u>	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; 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: 60%;"></div>	\$ <u>92,585.</u>	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; 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: 60%;"></div>	\$ <u>84,770.</u>	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; 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: 60%;"></div>	\$ <u>68,315.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<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: 60%;"></div>	\$ <u>65,000.</u>	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; 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: 60%;"></div>	\$ <u>61,407.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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>	\$ 59,025.	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>	\$ 56,250.	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>	\$ 54,989.	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>	\$ 54,670.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" 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>	\$ 52,485.	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>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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: 15%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 18%; height: 15px;"></div>	\$ 48,742.	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: 20%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ 43,786.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" 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: 22%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ 41,465.	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: 13%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 18%; height: 15px;"></div>	\$ 40,000.	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: 12%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 28%; height: 15px;"></div>	\$ 32,852.	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: 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: 25%; height: 15px;"></div>	\$ 32,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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: 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>	\$ 31,890.	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: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 60%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 25%; height: 15px;"></div>	\$ 31,000.	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: 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>	\$ 30,000.	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: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 60%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 25%; height: 15px;"></div>	\$ 28,750.	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: 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>	\$ 26,048.	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: 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: 25%; height: 15px;"></div>	\$ 25,315.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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: 80%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 30%; height: 15px;"></div>	\$ 23,460.	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: 25%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 30%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 40%; height: 15px;"></div>	\$ 22,049.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
33	<div style="background-color: black; width: 20%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 40%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 50%; height: 15px;"></div>	\$ 20,000.	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: 60%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 40%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 30%; height: 15px;"></div>	\$ 20,000.	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: 30%; 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: 50%; height: 15px;"></div>	\$ 19,907.	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: 70%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 40%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 30%; height: 15px;"></div>	\$ 19,900.	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
37	<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;"></div> <div style="background-color: black; width: 200px; height: 15px;"></div>	\$ 19,525.	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: 150px; 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>	\$ 17,299.	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: 250px; 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: 100px; height: 15px;"></div>	\$ 16,820.	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: 100px; 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>	\$ 16,601.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
41	<div style="background-color: black; width: 100px; 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: 100px; height: 15px;"></div>	\$ 16,357.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
42	<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: 100px; height: 15px;"></div>	\$ 16,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	<div style="background-color: black; width: 100%; height: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em;"></div>	\$ 15,300.	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: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em;"></div>	\$ 15,000.	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: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em;"></div>	\$ 14,837.	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: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em;"></div>	\$ 14,700.	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: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em;"></div>	\$ 14,129.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	<div style="background-color: black; width: 100%; height: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 1.2em;"></div>	\$ 12,707.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	<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: 25%; height: 15px;"></div>	\$ 12,630.	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; width: 15%; 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: 30%; height: 15px;"></div>	\$ 12,344.	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; width: 35%; 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>	\$ 12,030.	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; width: 30%; 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: 30%; height: 15px;"></div>	\$ 12,000.	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; width: 20%; 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: 25%; height: 15px;"></div>	\$ 12,000.	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; width: 45%; 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>	\$ 12,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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: 250px; 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: 350px; height: 15px;"></div>	\$ 11,985.	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: 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: 200px; height: 15px;"></div>	\$ 11,700.	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: 400px; 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: 250px; height: 15px;"></div>	\$ 11,645.	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: 350px; 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>	\$ 11,637.	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: 200px; 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: 300px; height: 15px;"></div>	\$ 11,435.	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: 250px; 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>	\$ 11,009.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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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: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 240px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 250px; height: 15px;"></div>	\$ 10,800.	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: 290px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 190px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 210px; height: 15px;"></div>	\$ 10,647.	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: 140px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 270px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 220px; height: 15px;"></div>	\$ 10,391.	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: 190px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 110px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 250px; height: 15px;"></div>	\$ 10,288.	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: 410px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 240px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 240px; height: 15px;"></div>	\$ 10,175.	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: 320px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 160px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 240px; height: 15px;"></div>	\$ 10,155.	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
67	<div style="background-color: black; width: 100px; 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: 250px; height: 15px;"></div>	\$ 10,079.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
68	<div style="background-color: black; width: 130px; 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: 220px; height: 15px;"></div>	\$ 10,010.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
69	<div style="background-color: black; width: 360px; 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: 220px; height: 15px;"></div>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
70	<div style="background-color: black; width: 140px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 230px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 200px; height: 15px;"></div>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
71	<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 210px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 200px; height: 15px;"></div>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
72	<div style="background-color: black; width: 440px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 110px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 300px; height: 15px;"></div>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
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>	\$ 10,000.	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>	\$ 10,000.	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>	\$ 10,000.	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>	\$ 10,000.	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>	\$ 10,000.	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>	\$ 9,979.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
79	<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>9,703.</u>	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: 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>9,600.</u>	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: 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>9,500.</u>	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: 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>9,300.</u>	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: 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>8,590.</u>	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: 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>8,544.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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>	\$ <u>8,427.</u>	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>	\$ <u>8,395.</u>	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>	\$ <u>8,335.</u>	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>	\$ <u>8,263.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" 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>	\$ <u>8,128.</u>	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>	\$ <u>8,025.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
91	<div style="background-color:black; width:150px; 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:240px; 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.)
92	<div style="background-color:black; width:150px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:210px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:250px; 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.)
93	<div style="background-color:black; width:230px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:170px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:180px; height:15px;"></div>	\$ <u>8,000.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
94	<div style="background-color:black; width:440px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:210px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:210px; height:15px;"></div>	\$ <u>7,845.</u>	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:130px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:290px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:270px; height:15px;"></div>	\$ <u>7,711.</u>	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:400px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:110px; height:15px; margin-bottom:5px;"></div> <div style="background-color:black; width:240px; height:15px;"></div>	\$ <u>7,695.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
97	<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: 150px; height: 15px;"></div>	\$ <u>7,670.</u>	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: 350px; 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: 150px; 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.)
99	<div style="background-color: black; width: 250px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 280px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 150px; 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.)
100	<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>	\$ <u>7,500.</u>	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: 300px; 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: 250px; height: 15px;"></div>	\$ <u>7,355.</u>	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: 300px; 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: 250px; height: 15px;"></div>	\$ <u>7,220.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
103	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 80%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 60%; height: 15px;"></div>	\$ <u>7,202.</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: 20%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 60%; height: 15px;"></div>	\$ <u>7,200.</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: 80%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 60%; height: 15px;"></div>	\$ <u>7,155.</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: 80%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 60%; 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: 20%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 60%; 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.)
108	<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: 60%; 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 MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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: 15%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 20%; height: 15px;"></div>	\$ <u>6,920.</u>	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: 15%; 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: 25%; height: 15px;"></div>	\$ <u>6,836.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
111	<div style="background-color: black; width: 35%; 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: 25%; height: 15px;"></div>	\$ <u>6,575.</u>	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: 15%; 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: 15%; height: 15px;"></div>	\$ <u>6,462.</u>	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: 40%; 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: 15%; height: 15px;"></div>	\$ <u>6,400.</u>	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: 35%; 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>	\$ <u>6,350.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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	[REDACTED] [REDACTED] [REDACTED]	\$ 6,345.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
116	[REDACTED] [REDACTED] [REDACTED]	\$ 6,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
117	[REDACTED] [REDACTED] [REDACTED]	\$ 6,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
118	[REDACTED] [REDACTED] [REDACTED]	\$ 6,185.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
119	[REDACTED] [REDACTED] [REDACTED]	\$ 6,132.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
120	[REDACTED] [REDACTED] [REDACTED]	\$ 6,107.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
121	<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.)
122	<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.)
123	<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>5,950.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
124	<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>5,938.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
125	<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>5,910.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
126	<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>5,800.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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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
127	<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>	\$ 5,685.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
128	<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>	\$ 5,560.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
129	<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>	\$ 5,560.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
130	<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>	\$ 5,536.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
131	<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>	\$ 5,526.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
132	<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.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
133	[REDACTED] [REDACTED] [REDACTED]	\$ 5,430.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
134	TEAM [REDACTED] [REDACTED]	\$ 5,393.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
135	[REDACTED] [REDACTED] [REDACTED]	\$ 5,248.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
136	[REDACTED] [REDACTED] [REDACTED]	\$ 5,194.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
137	[REDACTED] [REDACTED] [REDACTED]	\$ 5,144.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
138	[REDACTED] [REDACTED] [REDACTED]	\$ 5,144.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
139	<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;"></div> <div style="background-color: black; width: 120px; height: 15px;"></div>	\$ <u>5,144.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
140	<div style="background-color: black; width: 100px; 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>5,144.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
141	<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: 150px; height: 15px;"></div>	\$ <u>5,144.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
142	<div style="background-color: black; width: 100px; 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>	\$ <u>5,144.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
143	<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;"></div> <div style="background-color: black; width: 150px; height: 15px;"></div>	\$ <u>5,103.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
144	<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: 150px; height: 15px;"></div>	\$ <u>5,050.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
145	<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>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
146	<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>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
147	<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>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
148	<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>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
149	<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>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
150	<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>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
151	<div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 170px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 195px; height: 15px;"></div>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
152	<div style="background-color: black; width: 175px; 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: 255px; height: 15px;"></div>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
153	<div style="background-color: black; width: 255px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 175px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 185px; height: 15px;"></div>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
154	<div style="background-color: black; width: 405px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 175px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 315px; height: 15px;"></div>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
155	<div style="background-color: black; width: 415px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 275px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 210px; height: 15px;"></div>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
156	<div style="background-color: black; width: 185px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 175px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 240px; height: 15px;"></div>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
157	<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.)
158	<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.)
159	<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.)
160	<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.)
161	<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.)
162	<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 MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
163	<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: 230px; height: 15px;"></div>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
5	ADVERTISING SERVICES	\$ 137,550.	06/16/22
6	FUNDRAISING PRODUCTS	\$ 122,570.	02/09/22
16	FUNDRAISING PRODUCTS	\$ 30,670.	07/27/22
20	FUNDRAISING PRODUCTS	\$ 43,786.	05/17/22
32	FUNDRAISING PRODUCTS	\$ 22,049.	02/07/22
40	FUNDRAISING PRODUCTS	\$ 15,516.	03/07/22

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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
41	FUNDRAISING PRODUCTS _____ _____ _____	\$ 16,357.	04/01/22
67	FUNDRAISING PRODUCTS _____ _____ _____	\$ 10,079.	02/18/22
68	FUNDRAISING PRODUCTS _____ _____ _____	\$ 10,010.	07/28/22
88	FUNDRAISING PRODUCTS _____ _____ _____	\$ 8,263.	07/19/22
93	FUNDRAISING PRODUCTS _____ _____ _____	\$ 8,000.	05/09/22
110	FUNDRAISING PRODUCTS _____ _____ _____	\$ 3,750.	09/29/22

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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
120	FUNDRAISING PRODUCTS _____ _____ _____	\$ 6,107.	02/04/22
124	FUNDRAISING PRODUCTS _____ _____ _____	\$ 5,938.	09/22/22
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

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.

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, and monitoring expenses.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include whether art collections are reported and amounts of revenue and assets included.

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

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

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

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

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,658,760.		1,658,760.
b Buildings		6,341,240.	294,231.	6,047,009.
c Leasehold improvements				
d Equipment		8,497.	4,673.	3,824.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				7,709,593.

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	114,970.	COST
(B) HEDGE FUND	24,998,619.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	25,113,589.	

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	86,071,921.	END-OF-YEAR MARKET VALUE
(2) TRADED SECURITIES	124,175,080.	END-OF-YEAR MARKET VALUE
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	210,247,001.	

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)	
Total. (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)	
Total. (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.

1	Total revenue, gains, and other support per audited financial statements		1	15,004,597.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-29,517,487.	
b	Donated services and use of facilities	2b	288,379.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	-29,229,108.
3	Subtract line 2e from line 1		3	44,233,705.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	969,624.	
b	Other (Describe in Part XIII.)	4b	16,521.	
c	Add lines 4a and 4b		4c	986,145.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	45,219,850.

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

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

1	Total expenses and losses per audited financial statements		1	11,892,834.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	288,379.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	288,379.
3	Subtract line 2e from line 1		3	11,604,455.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	969,624.	
b	Other (Describe in Part XIII.)	4b	16,521.	
c	Add lines 4a and 4b		4c	986,145.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	12,590,600.

Part XIII Supplemental Information.

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

PART XI, LINE 4B - OTHER ADJUSTMENTS:

PROPERTY TAX INCLUDED IN OTHER INCOME 16,521.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PROPERTY TAX INCLUDED IN OTHER INCOME 16,521.

**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 for the latest information.

OMB No. 1545-0047

2022

**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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
MURRAY STATE UNIVERSITY 217 STEWART STADIUM MURRAY, KY 42071	61-1005783		56,981.	0.			TO FUND YOUTH SHOOTING SPORTS
BHS DEMONS SHOOTING TEAM 7816 HUNTERS LANE BURLINGTON, WI 53105	46-4046924		55,683.	0.			TO FUND YOUTH SHOOTING SPORTS
WEST KENTUCKY SMOKING GUNS ASSOCIATION - 1380 US HIGHWAY 60 W - LEDBETTER, KY 42058	88-0942926		50,000.	0.			TO FUND YOUTH SHOOTING SPORTS
CLEMSON UNIVERSITY 272-C LEHOTSKY HALL CLEMSON, SC 29634	57-6000254		43,037.	0.			TO FUND YOUTH SHOOTING SPORTS
GEORGIA COMPETITIVE SHOOTERS INC 1059 MANLEY ROAD GRIFFIN, GA 30223	38-3696125		38,442.	0.			TO FUND YOUTH SHOOTING SPORTS
RUBY MOUNTAIN CLAY BREAKERS 394 S FLORA DR SPRING CREEK, NV 89815	83-2456704		34,165.	3,627.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **251.**

3 Enter total number of other organizations listed in the line 1 table **188.**

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

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALTA-AURELIA COMMUNITY SCHOOL 127 640TH ST ALTA, IA 51002-1325	82-4226461		36,981.	673.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
JONES COUNTY SCHOOL DISTRICT 37-3 PO BOX 401 MURDO, SD 57559	46-0347243		36,651.	760.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
JEFFERSON COUNTY SCHOOL DISTRICT NO. 509J - 445 SE BUFF STREET - MADRAS, OR 97741	93-6000537		37,386.	0.			TO FUND YOUTH SHOOTING SPORTS
NORTH DAKOTA SHOOTING SPORTS ASSOCIATION - 14926 25TH ST SE - AMENIA, ND 58004	45-0398671		30,618.	5,774.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
THE UNIVERISTY OF TENNESSEE 254 BREHAM HALL MARTIN, TN 38238	62-6001636		36,222.	0.			TO FUND YOUTH SHOOTING SPORTS
CITADEL PISTOL CLUB 171 MOULTRIE ST. CHARLESTON, SC 29409	80-0769768		33,901.	1,260.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CREIGHTON PREPARATORY SCHOOL 500 WINDSOR DRIVE PAPILLION, NE 68046	47-0438012		34,619.	0.			TO FUND YOUTH SHOOTING SPORTS
FORT HAYS STATE UNIVERSITY 600 PARK ST HAYS, KS 67601-4099	48-1210777		31,865.	915.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
OSKALOOSA SHOOTING TEAM 812 SOUTH 15TH OSKALOOSA, IA 52577-1810	46-4260367		32,716.	0.			TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LINCOLN RIFLE CLUB AND JUNIOR DIVISION INC - P.O. BOX 582 - LINCOLN, CA 95648	94-1641654		32,507.	0.			TO FUND YOUTH SHOOTING SPORTS
MU SHOOTING CLUB 213 ROTHWELL GYMNASIUM COLUMBIA, MO 65211	42-1680662		32,393.	0.			TO FUND YOUTH SHOOTING SPORTS
OSU SPORT CLUB COUNCIL 101 COLVIN RESEARCH CENTER, OSU STILLWATER, OK 74078	73-1610917		25,871.	2,629.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SCHOOL DISTRICT OF OCONEE COUNTY 4701 NORTH HIGHWAY II WALHALLA, SC 29696	57-6000392		25,688.	150.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MINUTEMAN SHARPSHOOTERS 6 M STREET NEWBURYPORT, MA 01950-0000	45-4350049		24,530.	1,099.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GALLATIN VALLEY SHARP SHOOTERS 1645 NELSON ROAD BOZEMAN, MT 59718	37-1805473		23,080.	0.			TO FUND YOUTH SHOOTING SPORTS
PIONEER SPORTSMENS CLUB 1 UNIVERSITY PLAZA PLATTEVILLE, WI 53818-3001	94-3442656		22,895.	0.			TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF KENTUCKY TRAP AND SKEET TEAM - 3800 NICHOLASVILLE RD - LEXINGTON, KY 40503	26-3280207		21,847.	0.			TO FUND YOUTH SHOOTING SPORTS
SOUTHEASTERN ILLINOIS COMMUNITY COLLEGE - 3575 COLLEGE ROAD - HARRISBURG, IL 62946	37-0906582		21,570.	0.			TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MID CAROLINA 4-H 1746 KENNERLY ROAD ORANGEBURG, SC 29115	46-2572303		21,352.	0.			TO FUND YOUTH SHOOTING SPORTS
ONE BOX YOUTH SPORTING PROGRAM 80515 RD 441 BROKEN BOW, NE 68822	81-0718123		21,340.	0.			TO FUND YOUTH SHOOTING SPORTS
SILVER STATE YOUTH SHOOTING SPORTS 394 FLORA DR SPRING CREEK, NV 89815	45-4986365		18,968.	2,049.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
FORT MADISON COMMUNITY SCHOOL DISTRICT - 2001 AVENUE B - FORT MADISON, IA 52627-4245	42-6038970		20,942.	0.			TO FUND YOUTH SHOOTING SPORTS
DETROIT SPORTSMENS CONGRESS 49800 DEQUINDRE ROAD UTICA, MI 48317	38-0481208		20,410.	0.			TO FUND YOUTH SHOOTING SPORTS
MORA PUBLIC SCHOOL DISTRICT 332 2518 IVORY ST MORA, MN 55051	41-6001661		19,594.	0.			TO FUND YOUTH SHOOTING SPORTS
HARRIS COUNTY SCHOOL DISTRICT 8281 HWY 116 HAMILTON, GA 31811	58-6000260		19,119.	0.			TO FUND YOUTH SHOOTING SPORTS
ACUI COLLEGIATE CLAY TARGET PROGRAM - 120 W 7TH ST, SUITE 200 - BLOOMINGTON, IN 47404	81-4123273		18,423.	0.			TO FUND YOUTH SHOOTING SPORTS
VIRGINIA RIFLE AND PISTOL CLUB PO BOX 400510 CHARLOTTESVILLE, VA 22904-4510	57-1234351		18,333.	0.			TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INDEPENDENT SCHOOL DISTRICT 595 216 4TH STREET NW EAST GRAND FORKS, MN 56721	41-6003281		17,819.	0.			TO FUND YOUTH SHOOTING SPORTS
CASTLEWOOD YOUTH SHOOTING CLUB 2964 SHAFFER ROAD NEW CASTLE, PA 16107	47-1063458		14,942.	2,708.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ALEXANDRIA AREA HIGH SCHOOL TRAP TEAM - 439 THREE HAVENS DR NE - ALEXANDRIA, MN 56308	46-3955949		15,652.	1,409.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
IDA PUBLIC SCHOOL DISTRICT 3145 PRAIRIE STREET IDA, MI 48140	38-6002800		16,505.	0.			TO FUND YOUTH SHOOTING SPORTS
LEBANON COMMUNITY SCHOOLS 1700 S 5TH ST LEBANON, OR 97355-2504	93-1175526		10,672.	5,814.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
HASTINGS HIGH SCHOOL TRAP TEAM 200 GENERAL SIEBEN DR HASTINGS, MN 55033	46-1465973		15,770.	0.			TO FUND YOUTH SHOOTING SPORTS
STILLWATER AREA HIGH SCHOOL CLAY TARGET TEAM - 290 QUINMORE AVE N - LAKELAND, MN 55043	83-2870320		12,157.	3,119.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WALKER COUNTY BOARD OF EDUCATION 100 RAMBLER DR LA FAYETTE, GA 30728-6288	58-6000338		13,264.	1,998.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
STEVENS POINT AREA SCHOOL DISTRICT 1201 N POINT DR STEVENS POINT, WI 54481-1114	39-6004667		15,135.	0.			TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCSC YOUTH PROGRAM 127 QUEENSBURY PLACE NE POPLAR GRIVE, IL 61065	46-1328557		9,020.	6,098.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LAKE OCONEE SHOTGUN TEAM P.O. BOX 280 RUTLEDGE, GA 30663	46-2446801		14,881.	0.			TO FUND YOUTH SHOOTING SPORTS
COEUR D'ALENE SCHOOL DISTRICT 271 5530 N FOURTH STREET COEUR D'ALENE, ID 83815	82-6000811		14,863.	0.			TO FUND YOUTH SHOOTING SPORTS
TRI STATE GUN CLUB INC 1988 WHITE PLAINS ROAD MONTROSE, IA 52639	42-1375038		13,495.	0.			TO FUND YOUTH SHOOTING SPORTS
NSC GOLDEN BBS 1245 DEERE PARK LANE DEERFIELD, IL 60015	85-4099896		13,425.	0.			TO FUND YOUTH SHOOTING SPORTS
CENTRAL ARIZONA TARGET SHOOTING LLC - 1664 E FLORENCE BLVD, STE 4-414 - CASA GRANDE, AZ 85122	20-3478402		13,087.	0.			TO FUND YOUTH SHOOTING SPORTS
THE SHOTGUN TEAM AT THE UNIVERSITY OF ARIZONA - 7800 W OLD AJO HIGHWAY - TUCSON, AZ 85735	27-3339664		12,685.	0.			TO FUND YOUTH SHOOTING SPORTS
ATTICA CONSOLIDATED SCHOOL CORPORATION - 1800 E TWIN LAKES RD - HILLSBORO, IN 47949	35-1071685		10,767.	1,727.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TANASI SPORTS ASSOCIATION 2816 MARY EMILY LN KNOXVILLE, TN 37924	82-3533666		11,459.	600.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GUN DEVIL SHOOTING SPORTS AT ARIZONA STATE UNIVERSITY INC - 5722 NORTH 21ST STREET - PHOENIX, AZ 85016	46-0788472		11,971.	0.			TO FUND YOUTH SHOOTING SPORTS
SPOKANE VALLEY VIPERS 11769 EAST HWY 54 ATHOL, ID 83801	82-4564405		11,695.	0.			TO FUND YOUTH SHOOTING SPORTS
THE UNIVERSITY OF TEXAS AT AUSTIN 2101 SPEEDWAY STOP D7500 AUSTIN, TX 78712	74-6000203		11,491.	0.			TO FUND YOUTH SHOOTING SPORTS
ZION BENTON TOWNSHIP HIGH SCHOOL DISTRICT 126 - 3901 W 21ST STREET - ZION, IL 60099	36-6004902		11,269.	0.			TO FUND YOUTH SHOOTING SPORTS
WILLIAMSBURG COMMUNITY SCHOOL DISTRICT - 810 WEST WALNUT STREET - WILLIAMSBURG, IA 52361	42-6039258		11,166.	0.			TO FUND YOUTH SHOOTING SPORTS
GREAT TRAIL MUSKETEERS INC 3033 LEISURE ROAD MINERVA, OH 44657	34-1712597		11,125.	0.			TO FUND YOUTH SHOOTING SPORTS
WICHITA STATE UNIVERSITY SHOOTING SPORTS - HESKETT CENTER, BOX 0126, WSU, 1845 FAIRMOUNT - WICHITA, KS 67260-0126	46-4439188		10,668.	0.			TO FUND YOUTH SHOOTING SPORTS
RILEY CONSERVATION CLUB INC 3348 ANTHONY LANE TERRE HAUTE, IN 47803	27-2023084		10,549.	0.			TO FUND YOUTH SHOOTING SPORTS
MASON CITY HIGH SCHOOL TRAPSHOOTING TEAM - 17982 280TH STREET - MASON CITY, IA 50401	77-0596169		10,523.	0.			TO FUND YOUTH SHOOTING SPORTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHS SHOOTING SPORTS CLUB 25 TICKLISH ROCK ROAD HUGHESVILLE, PA 17737	81-4149237		10,355.	0.			TO FUND YOUTH SHOOTING SPORTS
WALLA WALLA SCHOOL DISTRICT 140 800 ABBOTT RD WALLA WALLA, WA 99362-9336	91-6015450		10,332.	0.			TO FUND YOUTH SHOOTING SPORTS
LOGAN-ROGERSVILLE R-VIII SCHOOL DISTRICT - 8225 E. FARM ROAD 174 - ROGERSVILLE, MO 65742-8461	44-6005281		9,783.	523.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
BOSSIER PARISH SCHOOL BOARD 210 E MCKINLEY HAUGHTON, LA 71037	72-6000185		10,186.	0.			TO FUND YOUTH SHOOTING SPORTS
NORTHEAST KINGDOM SKEET CLUB INC 92 QUEEN ELIZABETH FARM LANE SUTTON, VT 05867	03-0316744		9,963.	0.			TO FUND YOUTH SHOOTING SPORTS
POPLAR BLUFF R-I SCHOOL DISTRICT 1110 N. WESTWOOD POPLAR BLUFF, MO 63901	43-0792268		9,864.	0.			TO FUND YOUTH SHOOTING SPORTS
SHANKSVILLE-STONYCREEK SCHOOL DISTRICT - 1325 CORNERSTONE ROAD, PO BOX 128 - SHANKSVILLE, PA 15560-0128	23-7036120		9,797.	0.			TO FUND YOUTH SHOOTING SPORTS
COLORADO STATE UNIVERSITY 8027 CAMPUS DELIVERY FORT COLLINS, CO 80523	84-6000545		9,794.	0.			TO FUND YOUTH SHOOTING SPORTS
ROGUE VALLEY YOUNG GUNS 669 STARVEOUT CRK ROAD AZALEA, OR 97410	46-4258574		9,725.	0.			TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JESSAMINE COUNTY HIGH SCHOOL TRAP TEAM CLUB - 1376 DANVILLE LOOP 1 ROAD - NICHOLASVILLE, KY 40356	81-5042503		9,632.	0.			TO FUND YOUTH SHOOTING SPORTS
MICHIGAN STATE SHOOTING SPORTS CLUB - 7534 OLD RIVER TRAIL - LANSING, MI 48917	47-5583249		5,158.	4,410.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
HARTFORD CONSERVATION GUN CLUB YOUTH SHOOTING TEAM - 6000 EAST SUMNER - HARTFORD, WI 53027	83-4671610		9,557.	0.			TO FUND YOUTH SHOOTING SPORTS
INDEPENDENT SCHOOL DISTRICT NO 284 4955 PEONY LANE NORTH PLYMOUTH, MN 55446	41-6001464		9,510.	0.			TO FUND YOUTH SHOOTING SPORTS
INDIAN HILLS COMMUNITY COLLEGE 721 NORTH 1ST STREET CENTERVILLE, IA 52544	42-0923689		9,480.	0.			TO FUND YOUTH SHOOTING SPORTS
FARMINGTON TRAP TEAM 26290 CAMBODIA AVE FARMINGTON, MN 55024	45-5012114		8,020.	1,316.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CANBY HIGH SCHOOL TRAP TEAM 2763 245TH ST CANBY, MN 56220	82-1537168		5,797.	3,490.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
FARMINGTON MUNICIPAL SCHOOLS DISTRICT 5 - 5700 COLLEGE BLVD - FARMINGTON, NM 87402-1773	85-6000130		8,355.	850.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
DES MOINES AREA CLAY CRUSHERS 450 NE PLUM AVE EARLHAM, IA 50072	38-4070168		9,162.	0.			TO FUND YOUTH SHOOTING SPORTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGIA COLLEGE CLAY TARGET CLUB CBX 012 GEORGIA COLLEGE MILLEDGEVILLE, GA 31061	82-2654014		9,161.	0.			TO FUND YOUTH SHOOTING SPORTS
CRESWELL CLAY TARGET SPORTS 81078 N PACIFIC HIGHWAY CRESWELL, OR 97426	93-0578065		9,021.	0.			TO FUND YOUTH SHOOTING SPORTS
ROSEAU COUNTY INDEPENDENCE SCHOOL DISTRICT 690 - PO BOX 43 - WARROAD, MN 56763	41-6003720		8,993.	0.			TO FUND YOUTH SHOOTING SPORTS
THE SKEET AND TRAP CLUB AT FLORIDA STATE - 1001 WEST SAINT AUGUSTINE STREET - TALLAHASSEE, FL 32306	90-0770158		8,827.	0.			TO FUND YOUTH SHOOTING SPORTS
PORTAGE YOUTH MARKSMANSHIP CLUB 205 ALLEN STREET PORTAGE, PA 15946	26-3160336		8,657.	0.			TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF ARKANSAS - FAYETTEVILLE CAMPUS - 155 NORTH STADIUM HPER 225 - FAYETTEVILLE, AR 72701	71-6003252		8,614.	0.			TO FUND YOUTH SHOOTING SPORTS
RUTHERFORD COUNTY SCHOOLS 641 US HIGHWAY 221 NORTH RUTHERFORDTON, NC 28139	56-6001107		8,537.	0.			TO FUND YOUTH SHOOTING SPORTS
NORTHLAND PINES SCHOOL DISTRICT 1800 PLEASURE ISLAND RD EAGLE RIVER, WI 54521-8980	39-1173350		8,455.	0.			TO FUND YOUTH SHOOTING SPORTS
FOND DU LAC SCHOOL DISTRICT 801 CAMPUS DR FOND DU LAC, WI 54935-1600	39-1411371		8,416.	0.			TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLAY CRUSHERS INC 18520 TWILIGHT TRAIL EDEN PRAIRIE, MN 55346	46-1661470		8,358.	0.			TO FUND YOUTH SHOOTING SPORTS
ARLINGTON RIFLE AND PISTOL CLUB PO BOX 69 SIMPSONVILLE, MD 21150	33-1194771		4,643.	3,689.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
KINSLEY GUN CLUB INC 115 SUNNYSIDE DRIVE LEWIS, KS 67552	48-1127750		8,296.	0.			TO FUND YOUTH SHOOTING SPORTS
RF&GC CRUSHERS 17205 SE 144TH ST RENTON, WA 98059	90-0972346		8,158.	0.			TO FUND YOUTH SHOOTING SPORTS
DALEVILLE CITY BOARD OF EDUCATION 626 N DALEVILLE AVE DALEVILLE, AL 36322-2063	63-0499090		8,134.	0.			TO FUND YOUTH SHOOTING SPORTS
OTTUMWA COMMUNITY SCHOOL DISTRICT 501 E 2ND ST OTTUMWA, IA 52501-3085	42-6037985		8,125.	0.			TO FUND YOUTH SHOOTING SPORTS
POCAHONTAS AREA COMMUNITY SCHOOL 202 1ST AVENUE SW POCAHONTAS, IA 50574-1505	42-6003251		7,923.	0.			TO FUND YOUTH SHOOTING SPORTS
DUBOIS RIFLE AND PISTOL CLUB PO BOX 207 DUBOIS, PA 15801	25-1834928		7,909.	0.			TO FUND YOUTH SHOOTING SPORTS
GLENVILLE-EMMONS SCHOOL DISTRICT 2886 - 62702 150TH ST - ALDEN, MN 56009	41-1909842		6,407.	1,500.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

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CHESTER COUNTY SCHOOL DISTRICT 3971 LEWISVILLE HIGH SCHOOL RD RICHBURG, SC 29729-9029	57-6000333		7,901.	0.			TO FUND YOUTH SHOOTING SPORTS
ALBUQUERQUE PUBLIC SCHOOLS 7801 WILSHIRE AVE NE ALBUQUERQUE, NM 87122-2807	85-6000101		7,879.	0.			TO FUND YOUTH SHOOTING SPORTS
MID-AMERICA SHOTGUN SHOOTING ACADEMY LLC - 120 HIGHWAY 240 SPUR - ROCHEPORT, MO 65279	84-1833328		7,836.	0.			TO FUND YOUTH SHOOTING SPORTS
SMITHSON VALLEY AG BOOSTER CLUB 218 W. VISTA RIDGE SAN ANTONIO, TX 78260	86-1119213		7,831.	0.			TO FUND YOUTH SHOOTING SPORTS
MUSTANG SHOOTING SPORTS 4429 E. FLOWER ST PHOENIX, AZ 85018	46-4006966		7,698.	0.			TO FUND YOUTH SHOOTING SPORTS
SOUTHWESTERN COMMUNITY COLLEGE 1501 W TOWNLINE ST CRESTON, IA 50801-1042	42-0927778		7,611.	0.			TO FUND YOUTH SHOOTING SPORTS
PROWLER CLAY TARGET ASSOCIATION 13007 130TH ST NW THIEF RIVER FALLS, MN 56701	30-0893758		7,600.	0.			TO FUND YOUTH SHOOTING SPORTS
UCM TRAP AND SKEET CLUB 505 CHRISTOPHER ST WARRENSBURG, MO 64093	46-1105439		7,490.	0.			TO FUND YOUTH SHOOTING SPORTS
ALTUS INDEPENDENT SCHOOL DISTRICT 1018 - 400 N PARK AVE - ALTUS, OK 73521-4000	73-0758817		7,298.	150.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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THE CITADEL 171 MOULTRIE ST CHARLESTON, SC 29409-0002	57-6000217		7,448.	0.			TO FUND YOUTH SHOOTING SPORTS
VIRGINIA POLYTECHNIC INSTITUTE & STATE UNIVERSITY - 125 WAR MEMORIAL HALL - BLACKSBURG, VA 24061-0001	54-6001805		7,378.	0.			TO FUND YOUTH SHOOTING SPORTS
CHISHOLM PUBLIC SCHOOLS 305 UTAH AVE ENID, OK 73701	73-6060649		6,317.	1,009.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SCHOOL DISTRICT OF KETTLE MORAIN S51W30856 OLD VILLAGE ROAD MUKWONAGO, WI 53149	39-1024329		7,317.	0.			TO FUND YOUTH SHOOTING SPORTS
OSHKOSH AREA SCHOOL DISTRICT 375 NORTH EAGLE STREET OSHKOSH, WI 54902	39-1414354		5,808.	1,300.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SCHOOL DISTRICT R-III CAMDENTON PO BOX 1409 CAMDENTON, MO 65020-1409	44-6004944		6,983.	0.			TO FUND YOUTH SHOOTING SPORTS
ADA-BORUP-WEST INDEPENDENT SCHOOL DISTRICT #2910 - 604 WEST THORPE AVE - ADA, MN 56510	87-0925576		6,955.	0.			TO FUND YOUTH SHOOTING SPORTS
CEDAR COUNTY 4-H COUNTY COUNCIL 15685 EAST 1120 ROAD STOCKTON, MO 65785	43-1243553		5,431.	1,505.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LAKE COUNTRY ACTION SHOOTERS W 314 N8240 HWY 83 HARTLAND, WI 53029	47-2233200		6,900.	0.			TO FUND YOUTH SHOOTING SPORTS

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WEST DEEP CREEK SHOOTING TEAM 5111 S. MENAUL COURT SPOKANE, WA 99224	90-0967720		6,880.	0.			TO FUND YOUTH SHOOTING SPORTS
MARIAN HIGH SCHOOL 7400 MILITARY AVE OMAHA, NE 68134	47-0526910		6,861.	0.			TO FUND YOUTH SHOOTING SPORTS
CENTRAL PENN CRUSHERS 75 QUARRY RD WELLSVILLE, PA 17365	47-1490770		4,846.	1,972.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SMOKIN DRAGONS 324 G HASELWOOD ROAD SUMMERSVILLE, KY 42782	26-0731984		6,746.	0.			TO FUND YOUTH SHOOTING SPORTS
SUTTER UNION HIGH SCHOOL DISTRICT PO BOX 498 SUTTER, CA 95982	68-0376588		6,730.	0.			TO FUND YOUTH SHOOTING SPORTS
RUMFORD HUNTING AND FISHING CLUB INC - 165 PROVIDENCE ST - REHOBOTH, MA 02769	04-3110771		6,700.	0.			TO FUND YOUTH SHOOTING SPORTS
QUINCY SCHOOL DISTRICT 172 2847 SENECA CIRCLE QUINCY, IL 62301	37-6002416		6,628.	0.			TO FUND YOUTH SHOOTING SPORTS
LEDYARD SPORTSMEN CLUB INC 39 HUNTS BROOK ROAD QUAKER HILL, CT 06375	06-0932470		6,624.	0.			TO FUND YOUTH SHOOTING SPORTS
SHELBYVILLE TRAP TEAM 3181 HIGHWAY 231 N SHELBYVILLE, TN 37160	61-1696624		6,282.	300.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

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CHILLICOTHE R-II SCHOOL DISTRICT 1200 FAIR STREET CHILLICOTHE, MO 64601	44-6002151		3,045.	3,402.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PEORIA SCHOOL DISTRICT 150 6301 N UNIVERSITY ST PEORIA, IL 61614-3453	37-6001759		6,437.	0.			TO FUND YOUTH SHOOTING SPORTS
GUN CLUB OF MANITOWOC COUNTY PO BOX 201 MANITOWOC, WI 54220	39-6176333		6,426.	0.			TO FUND YOUTH SHOOTING SPORTS
NEW DIANA INDEPENDENT SCHOOL DISTRICT - 11826 HWY 154 EAST - DIANA, TX 75640	75-6003702		6,353.	0.			TO FUND YOUTH SHOOTING SPORTS
ROSEVILLE JOINT UNION HIGH SCHOOL DISTRICT - 1 GRIZZLY WAY - GRANITE BAY, CA 95746	94-6002478		6,301.	0.			TO FUND YOUTH SHOOTING SPORTS
MARION COMMUNITY SCHOOLS 750W 26TH ST MARION, IN 46953	35-6002617		5,008.	1,150.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
FAMILY SHOOTING CENTERS INC 2750 LIMESTONE ST. COPLAY, PA 18037	23-3036363		6,153.	0.			TO FUND YOUTH SHOOTING SPORTS
EL PASO COUNTY SCHOOL DISTRICT 8 900 JIMMY CAMP RD FOUNTAIN, CO 80817-4190	84-6008041		6,115.	0.			TO FUND YOUTH SHOOTING SPORTS
ROCKY KNOLLERS YOUTH SHOOTING TEAM 621 WOODLAWN ROAD GREENWOOD, SC 29646	47-5651787		6,061.	0.			TO FUND YOUTH SHOOTING SPORTS

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WESTERN NEBRASKA TRAP 4-H CLUB 110928 RIFLE SITE ROAD MITCHELL, NE 69357	26-0816361		6,017.	0.			TO FUND YOUTH SHOOTING SPORTS
GEORGE MASON UNIVERSITY 4400 UNIVERSITY DR FAIRFAX, VA 22030-4444	54-0836354		5,946.	0.			TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF IDAHO TRAP TEAM 875 PERIMETER DRIVE MOSCOW, ID 83844-1230	26-1184978		5,532.	400.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WORTHINGTON HIGH SCHOOL TRAP TEAM 1437 MINNESOTA DRIVE WORTHINGTON, MN 56187	80-0963123		5,919.	0.			TO FUND YOUTH SHOOTING SPORTS
FORT LEE DUSTERS OF VIRGINIA 1564 WHITE DOGWOOD TRAIL SUFFOLK, VA 23433	46-0758871		5,847.	0.			TO FUND YOUTH SHOOTING SPORTS
PEWITT FFA P.O. BOX 1106 OMAHA, TX 75571	75-6003150		4,487.	1,230.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MARSHALL PUBLIC SCHOOLS FFA SHOOTING TEAM - 900 W VEST ST - MARSHALL, MO 65340-1668	44-6001427		5,656.	0.			TO FUND YOUTH SHOOTING SPORTS
IOWA CENTRAL COMMUNITY COLLEGE ONE TRITON CIRCLE FORT DODGE, IA 50501	41-0906391		5,644.	0.			TO FUND YOUTH SHOOTING SPORTS
MASSACHUSETTS JUNIOR PISTOL TEAM 1651 MAIN STREET CONCORD, MA 01742	46-1295070		5,633.	0.			TO FUND YOUTH SHOOTING SPORTS

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IKE'S YOUNG GUNS 2629 S. 200E KOKOMO, IN 46902	86-2467177		5,568.	0.			TO FUND YOUTH SHOOTING SPORTS
NDSU MARKSMANSHIP CLUB PO BOX 6050 FARGO, ND 58108-6050	80-0558017		5,518.	0.			TO FUND YOUTH SHOOTING SPORTS
PENNSYLVANIA RIFLE AND PISTOL ASSOCIATION - 3 BOGAR LANE - MIFFLINBURG, PA 17844	25-1846167		5,462.	0.			TO FUND YOUTH SHOOTING SPORTS
FOREST CITY GUN CLUB INC 9203 FERGUSON AVENUE SAVANNAH, GA 31406	58-0630490		5,459.	0.			TO FUND YOUTH SHOOTING SPORTS
BOONE CO 4-H SHOOTING SPORTS 1413 WHITBURN DRIVE COLUMBIA, MO 65203	46-1326817		5,456.	0.			TO FUND YOUTH SHOOTING SPORTS
WILTON COMMUNITY SCHOOL DISTRICT 1002 CYPRESS STREET WILTON, IA 52778-9509	42-6022097		5,413.	0.			TO FUND YOUTH SHOOTING SPORTS
NORTH ALLEGHENY SCHOOL DISTRICT 350 CUMBERLAND ROAD PITTSBURGH, PA 15237	25-6002301		5,400.	0.			TO FUND YOUTH SHOOTING SPORTS
MATTAWAN SHOOTING TEAM 3745 CEDARIDGE RD KALAMAZOO, MI 49008	46-0627523		5,323.	0.			TO FUND YOUTH SHOOTING SPORTS
NORTH PLATTE TRAP TEAM 1220 S EMORY AVE NORTH PLATTE, NE 69101	45-3008946		5,317.	0.			TO FUND YOUTH SHOOTING SPORTS

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EDEN PRAIRIE CLAY TARGET ASSOCIATION - 10288 WINTER PLACE - EDEN PRAIRIE, MN 55347	47-3485022		5,259.	0.			TO FUND YOUTH SHOOTING SPORTS
FREEPORT HIGH SCHOOL NJROTC 701 W MOSELEY ST FREEPORT, IL 61032-4938	36-6005471		5,210.	0.			TO FUND YOUTH SHOOTING SPORTS
CALAMUS DUSTERS PO BOX 9 BURWELL, NE 68823	46-5731532		5,163.	0.			TO FUND YOUTH SHOOTING SPORTS
EVERETT AREA SCHOOL DISTRICT 2621 WEST MATTIE ROAD EVERETT, PA 15537	25-6079464		5,101.	0.			TO FUND YOUTH SHOOTING SPORTS
IND SCHOOL DISTRICT NO 2167 875 BARSTAD ROAD COTTONWOOD, MN 56229	41-1782782		5,097.	0.			TO FUND YOUTH SHOOTING SPORTS
4-H CLUBS & AFFILIATED 4-H ORGANIZATIONS - 817 15TH STREET - BURLINGTON, CO 80807	23-7434265		5,089.	0.			TO FUND YOUTH SHOOTING SPORTS
WINDOM INDEPENDENT SCHOOL DISTRICT 177 - 1400 17TH STREET - WINDOM, MN 56101-0177	41-6000680		1,143.	3,870.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TODD COUNTY 4-H CLUB PO BOX 97 ELKTON, KY 42220	62-1417158		5,008.	0.			TO FUND YOUTH SHOOTING SPORTS
WISCONSIN DEERHUNTERS INC 27455 FOXHAVEN DR WIND LAKE, WI 53185-1981	47-2235389	3	0.	5,508.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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SCHOLASTIC SHOOTING SPORTS FOUNDATION INC - 5931 ROFT RD - SAN ANTONIO, TX 78253-9261	20-8484121 3		218,409.	73,077.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PHEASANTS FOREVER INC 1783 BUERKLE CIR SAINT PAUL, MN 55110-5254	41-1429149 3		89,420.	145,581.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MICHIGAN SCHOLASTIC CLAY TARGET PROGRAM - 47664 BRENNAN DR - MACOMB, MI 48044-3074	20-2666400 3		101,069.	10,854.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UTAH YOUTH EDUCATION IN SHOOTING SPORTS - PO BOX 751 - PLEASANT GRV, UT 84062-0751	90-0886830 3		98,847.	11,014.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ALASKA SCTP INC PO BOX 871272 WASILLA, AK 99687-1272	90-0635354 3		106,192.	0.			TO FUND YOUTH SHOOTING SPORTS
SOUTH CAROLINA YOUTH SHOOTING FOUNDATION - PO BOX 11802 - ROCK HILL, SC 29731-1802	26-3594743 3		94,913.	8,430.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
THE MASS SHOOTERS FOUNDATION INC 61 NICHOLAS ROAD FRAMINGHAM, MA 01701-3498	04-3095757 3		99,160.	0.			TO FUND YOUTH SHOOTING SPORTS
X COUNT INC 5301 MERCHANDISE DR FORT WAYNE, IN 46825-5139	45-4791946 3		86,205.	12,647.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
THE FOUNDATION FOR NORTH AMERICA WILD SHEEP - PO BOX 2528 - CODY, WY 82414-3228	42-1109229 3		86,378.	5,197.	FMV	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		84,807.	2,549.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
YOUTH SHOOTING SPORTS ALLIANCE PO BOX 936 ELKHORN, NE 68022-0936	26-0551145 3		81,344.	0.			TO FUND YOUTH SHOOTING SPORTS
PALMYRA SPORTSMENS ASSN INC 410 SPORTSMAN RD ANNVILLE, PA 17003-9508	23-7429888 3		51,393.	20,645.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WYOMING STATE 4H FOUNDATION 1000 E UNIVERSITY DEPT 3354 LARAMIE, WY 82071-2000	83-6004106 3		60,409.	4,650.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
IOWA SCTP 812 S 15TH ST OSKALOOSA, IA 52577-3516	20-5520926 3		62,584.	0.			TO FUND YOUTH SHOOTING SPORTS
MISSOURI YOUTH SPORT SHOOTING ALLIANCE - 22850 COUNTY ROAD 657 - DOWNING, MO 63536-4278	87-0808275 3		61,317.	0.			TO FUND YOUTH SHOOTING SPORTS
INDIANA YOUTH SHOOTING SPORTS FOUNDATION INC - 13800 MARILYN RD - NOBLESVILLE, IN 46060-7501	20-1492428 3		59,556.	0.			TO FUND YOUTH SHOOTING SPORTS
GEORGIA YOUTH SHOOTING SPORTS FOUNDATION INC - 1059 MANLEY RD - GRIFFIN, GA 30223-6355	46-1456116 3		57,381.	0.			TO FUND YOUTH SHOOTING SPORTS
PARENT BOOSTER USA INC 5707 MORRISS RD FLOWER MOUND, TX 75028-3730	81-4123456 3		53,959.	0.			TO FUND YOUTH SHOOTING SPORTS

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AMATEUR TRAPSHOOTING ASSOCIATION OF AMERICA - PO BOX 519 - SPARTA, IL 62286-0519	20-2118440 3		52,975.	0.			TO FUND YOUTH SHOOTING SPORTS
HOUSTON SAFARI CLUB FOUNDATION 14811 SAINT MARYS LN STE 265 HOUSTON, TX 77079-2908	74-2177975 3		52,490.	0.			TO FUND YOUTH SHOOTING SPORTS
RIO SALADO TARGET TERMINATORS INC 226 E PALO VERDE ST GILBERT, AZ 85296-1027	84-4454663 3		44,631.	7,147.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
DALLAS ECOLOGICAL FOUNDATION 420 N CARROLL AVE STE 160 SOUTHLAKE, TX 76092-6454	75-1761481 3		46,640.	0.			TO FUND YOUTH SHOOTING SPORTS
TEXAS STATE RIFLE ASSOCIATION FOUNDATION INC - 5937 REPUBLIC OF TEXAS BLVD - AUSTIN, TX 78735-6399	26-4037053 3		45,269.	0.			TO FUND YOUTH SHOOTING SPORTS
CLAY FEATHERS INC 26321 HIGHWAY 141 COON RAPIDS, IA 50058-7020	27-1316195 3		44,488.	0.			TO FUND YOUTH SHOOTING SPORTS
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVENUE NE49-3142 - CAMBRIDGE, MA 02139-4307	04-2103594 3		44,487.	0.			TO FUND YOUTH SHOOTING SPORTS
PA YOUTH SHOOTING ASSOCIATION INC 326 VANYO RD BERLIN, PA 15530-8310	46-1072147 3		39,972.	4,140.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GASTON YOUNG GUNS SHOOTING SPORTS PO BOX 1314 DALLAS, NC 28034-4314	80-0253909 3		44,090.	0.			TO FUND YOUTH SHOOTING SPORTS

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OHIO STATE TRAPSHOOTING FOUNDATION INC - 315 E 2ND ST - WAVERLY, OH 45690-1324	31-1513510 3		43,354.	0.			TO FUND YOUTH SHOOTING SPORTS
USA YOUTH EDUCATION IN SHOOTING SPORTS - PO BOX 842 - PLEASANT GRV, UT 84062-0842	80-0833299 3		21,246.	20,965.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
BUCKEYE OUTDOORS YOUTH EDUCATION AND SHOOTING CENTER INC - 14885 CLINTON RD - DOYLESTOWN, OH 44230-9749	20-5960752 3		41,530.	0.			TO FUND YOUTH SHOOTING SPORTS
HILLSDALE COLLEGE 33 E COLLEGE ST HILLSDALE, MI 49242-1205	38-1374230 3		38,677.	2,389.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LINDENWOOD EDUCATION SYSTEM 209 S KINGSHIGHWAY ST SAINT CHARLES, MO 63301-1693	43-0652649 3		39,433.	300.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UNION GROVE BRONCOS SHOOTING CLUB INC - PO BOX 407 - UNION GROVE, WI 53182-0407	47-3550317 3		32,432.	4,857.	FMV	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		35,755.	750.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WALLA WALLA GUN CLUB INC PO BOX 133 WALLA WALLA, WA 99362-0003	91-6057755 7		34,647.	0.			TO FUND YOUTH SHOOTING SPORTS
NEW ENGLAND INTERNATIONAL JUNIOR SHOOTING SPORTS INC - 6 M STREET PLUM ISLAND - NEWBURYPORT, MA 01950-0000	45-0602316 3		34,582.	0.			TO FUND YOUTH SHOOTING SPORTS

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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RAVALLI COUNTY YOUTH CLAYS 1002 US HIGHWAY 93 N STE 1 VICTOR, MT 59875-9788	83-2951544 3		30,996.	2,430.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WATERFORD WOLVERINE SHOOTING TEAM INC - PO BOX 325 - WATERFORD, WI 53185-0325	47-2340836 3		33,359.	0.			TO FUND YOUTH SHOOTING SPORTS
TAUNTON RIFLE AND PISTOL CLUB INC 430 E BRITANNIA ST TAUNTON, MA 02780-1553	23-7083791 4		32,309.	760.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
U S A SHOOTING 1 OLYMPIC PLZ BLDG 3 COLORADO SPGS, CO 80909-5746	84-1263863 3		32,232.	0.			TO FUND YOUTH SHOOTING SPORTS
CENTERBURG YOUTH SHOOTING SPORTS INC - PO BOX 100 - CENTERBURG, OH 43011-0100	47-0953689 3		30,799.	0.			TO FUND YOUTH SHOOTING SPORTS
BETHEL UNIVERSITY 325 CHERRY AVE MC KENZIE, TN 38201-1769	62-0548913 3		30,355.	0.			TO FUND YOUTH SHOOTING SPORTS
ARIZONA OUTDOOR SPORTS INC PO BOX 40102 MESA, AZ 85274-0102	26-2103623 3		29,913.	0.			TO FUND YOUTH SHOOTING SPORTS
VIRGINIA TECH FOUNDATION INC 902 PRICES FORK RD STE 4000 BLACKSBURG, VA 24060-3261	54-0721690 3		29,663.	0.			TO FUND YOUTH SHOOTING SPORTS
TRISTARR-YESS 616 STRATFORD AVE SWEETWATER, TN 37874-2341	81-4215508 3		24,524.	4,355.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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PARENT BOOSTER USA INC 1500 W ESPERANZA AVE MCALLEN, TX 78501-3208	82-0779050 3		27,726.	0.			TO FUND YOUTH SHOOTING SPORTS
VIRGINIA YOUTH SPORTS ASSOCIATION 10 STIRRUP CT HAMPTON, VA 23664-1756	47-4268184 3		27,201.	0.			TO FUND YOUTH SHOOTING SPORTS
SPORTING CLAYS FOR CHARITY INC PO BOX 138 SADDLE RIVER, NJ 07458-0138	83-4090406 3		0.	26,924.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
NORTHWEST OHIO OUTDOOR YOUTH EDUCATION - PO BOX 2 - FINDLAY, OH 45839-0002	45-4605979 3		26,532.	0.			TO FUND YOUTH SHOOTING SPORTS
CENTRAL ILLINOIS PRECISION SHOOTING - 9151 POLARIS DR - BLOOMINGTON, IL 61705-9026	20-5293674 3		24,038.	1,830.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WILMOT TRAP TEAM 5837 352ND AVE BURLINGTON, WI 53105-8860	75-3229791 3		25,779.	0.			TO FUND YOUTH SHOOTING SPORTS
TEXAS A&M FOUNDATION 401 GEORGE BUSH DR COLLEGE STA, TX 77840-2811	74-2245072 3		25,503.	0.			TO FUND YOUTH SHOOTING SPORTS
COLVILLE SHOOTING STARS 596 GARVEY RD COLVILLE, WA 99114-9251	37-1732642 3		22,877.	2,049.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PARENT BOOSTER USA INC PO BOX 204 ALLEN, TX 75013-0004	46-3748275 3		24,920.	0.			TO FUND YOUTH SHOOTING SPORTS

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GRACE COUGARS SHOTGUN TEAM PO BOX 2623 LINDALE, TX 75771-8723	46-1355753 3		24,141.	649.	FMV	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		21,773.	2,500.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
EMMANUEL COLLEGE PO BOX 129 FRANKLIN SPGS, GA 30639-0129	58-0633977 3		23,495.	0.			TO FUND YOUTH SHOOTING SPORTS
MINNESOTA YOUTH SHOOTING SPORTS FOUNDATION MNYSSF - 11455 VIKING DRIVE - EDEN PRAIRIE, MN 55344-7251	46-3550642 3		23,388.	0.			TO FUND YOUTH SHOOTING SPORTS
NORTH CAROLINA YOUTH EDUCATION IN SHOOTING SPORTS - 4621 REEPSVILLE RD - VALE, NC 28168-9769	47-0983574 3		22,836.	0.			TO FUND YOUTH SHOOTING SPORTS
ASSOCIATION OF GRADUATES OF THE UNITED STATES MILITARY ACADEMY - 698 MILLS RD - WEST POINT, NY 10996-1611	14-1260763 3		22,209.	0.			TO FUND YOUTH SHOOTING SPORTS
PRESCOTT BIRD BUSTER BOOSTER CLUB PO BOX 25706 PRESCOTT VLY, AZ 86312-5706	82-2606939 3		13,889.	8,079.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SEATTLE GUN CLUB 26520 292ND AVE SE STE 3 RAVENSDALE, WA 98051-8633	91-0777611 3		21,530.	390.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CENTRAL FALCONS TRAP AND SKEET 1413 240TH AVE KANSASVILLE, WI 53139-9609	27-4978200 3		21,741.	0.			TO FUND YOUTH SHOOTING SPORTS

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RED RIVER YOUTH TRAP SHOOTING CLUB 2102 GREAT NORTHERN DR N FARGO, ND 58102-3249	47-4625230	3	21,472.	0.			TO FUND YOUTH SHOOTING SPORTS
JACKSONVILLE UNIVERSITY 2800 UNIVERSITY BLVD N JACKSONVILLE, FL 32211-3321	59-0624412	3	21,421.	0.			TO FUND YOUTH SHOOTING SPORTS
FIN FUR & FEATHER CLUB PO BOX 272 MILLIS, MA 02054-0272	22-2885172	7	19,143.	1,834.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WA YOUTH EDUCATION IN SHOOTING SPORTS - 19904 SE 300TH ST - KENT, WA 98042-5924	80-0683649	3	20,214.	649.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CULVER EDUCATIONAL FOUNDATION 1300 ACADEMY ROAD NO 159 CULVER, IN 46511-1291	35-0868071	3	20,734.	0.			TO FUND YOUTH SHOOTING SPORTS
MULBERRY GROVE ACES TRAP TEAM NFP PO BOX 85 MULBERRY GRV, IL 62262-0085	27-3731607	3	16,107.	4,592.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SOUTHLAKE CARROLL TARGET PROGRAM 2140 E SOUTHLAKE BLVD STE L 406 SOUTHLAKE, TX 76092-6516	47-4739303	3	14,061.	6,318.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MONTANA 4-H FOUNDATION INC 111 TAYLOR HALL BOZEMAN, MT 59715-0000	23-7051460	3	18,189.	2,049.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
NM EAGLES 47664 BRENNAN DR MACOMB, MI 48044-3074	61-1670953	3	18,466.	1,500.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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KINGS ACADEMY 1015 S EBENEZER RD FLORENCE, SC 29501-8008	57-0917737 3		19,910.	0.			TO FUND YOUTH SHOOTING SPORTS
WOODLAND YOUTH SPORTS 335 FREDRICKSON RD WOODLAND, WA 98674-9303	86-2049929 3		19,858.	0.			TO FUND YOUTH SHOOTING SPORTS
BEN AVERY CLAY CRUSHERS 17 E TANYA RD DESERT HILLS, AZ 85086-9217	45-5383343 3		19,747.	0.			TO FUND YOUTH SHOOTING SPORTS
STUDENT AIR RIFLE PROGRAM PO BOX 173 OAK RIDGE, MO 63769-0173	81-2120889 3		18,952.	0.			TO FUND YOUTH SHOOTING SPORTS
IDAHO SCTP ASSOCIATION INC PO BOX 1373 HAYDEN, ID 83835-1373	45-5159921 3		18,701.	0.			TO FUND YOUTH SHOOTING SPORTS
PIERRE JUNIOR SHOOTING CLUB 125 GROUSE RD PIERRE, SD 57501-6126	61-1593480 3		17,340.	1,169.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LAWRENCE COUNTY YOUNG GUNS 2403 WOODLAND HILLS DR NEW CASTLE, PA 16101-5557	46-1224989 3		17,755.	0.			TO FUND YOUTH SHOOTING SPORTS
TEXAS JUNIOR RIFLE TEAM 53 TIMBERCREEK CT LAKE JACKSON, TX 77566-4942	82-4797322 3		17,741.	0.			TO FUND YOUTH SHOOTING SPORTS
KCCL ORANGE CRUSHERS PO BOX 397 ADA, MI 49301-0397	46-2128996 3		17,728.	0.			TO FUND YOUTH SHOOTING SPORTS

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TRUSTEES OF PURDUE UNIVERSITY 2550 NORTHWESTERN AVE NO 1100 WEST LAFAYETTE, IN 47906-1332	35-6002041 3		17,645.	0.			TO FUND YOUTH SHOOTING SPORTS
ARLINGTON FAIRFAX CHAPTER INC OF THE IZAAK WALLTON LEAGUE OF AMERIC - PO BOX 366 - CENTREVILLE, VA 20122-0366	54-6052591 3		14,967.	2,549.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
OHIO STATE UNIVERSITY 111 JACKSON PIKE GALLIPOLIS, OH 45631-1568	82-1445749 3		17,500.	0.			TO FUND YOUTH SHOOTING SPORTS
MARQUETTE UNIVERSITY HIGH SCHOOL 3401 W WISCONSIN AVE MILWAUKEE, WI 53208-3842	39-0806826 3		17,401.	0.			TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF MAINE SYSTEM INC 65 TEXAS AVE BANGOR, ME 04401-4324	01-6000769 3		17,271.	0.			TO FUND YOUTH SHOOTING SPORTS
HUDSON RAIDER SHOOTING CLUB INC PO BOX 1349 HUDSON, WI 54016-5349	84-2703476 3		16,839.	0.			TO FUND YOUTH SHOOTING SPORTS
WSA YOUTH OUTDOOR FOUNDATION INC PO BOX 91 WALPOLE, MA 02081-0091	30-0753432 3		16,033.	750.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
NORTH SCOTT TRAP CLUB INC PO BOX 38 ELDRIDGE, IA 52748-0038	47-1789864 3		16,624.	0.			TO FUND YOUTH SHOOTING SPORTS
SIBLEY-OCHEYEDAN SHOOTING GENERALS 622 4TH ST SIBLEY, IA 51249-1324	81-0774932 3		16,088.	0.			TO FUND YOUTH SHOOTING SPORTS

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RHINELANDER HIGH SCHOOL TRAP TEAM 2253 MEMORIAL FOREST RD RHINELANDER, WI 54501-9492	81-4923676 3		12,627.	3,414.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
DRIPPING SPRINGS SHOOTING TEAM BOOSTERS INC - 24905 RANCH ROAD 12 - DRIPPING SPGS, TX 78620-5540	82-1880066 3		15,966.	0.			TO FUND YOUTH SHOOTING SPORTS
SHELBY COUNTY SHOOTING SPORTS ASSOCIATION - 574 ELVIRA RD - HELENA, AL 35080-7926	11-3746522 3		15,515.	450.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SCHREINER UNIVERSITY 2100 MEMORIAL BLVD KERRVILLE, TX 78028-5611	74-1193459 3		15,958.	0.			TO FUND YOUTH SHOOTING SPORTS
UNITED SOUTH CENTRAL SHOOTING SPORTS - 400 9TH AVE SW - WELLS, MN 56097-1232	82-4207397 3		15,100.	449.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
GATEWAY CLAYBUSTERS TWO WESTBURY DRIVE ST CHARLES, MO 63301-2558	20-8171985 3		15,320.	0.			TO FUND YOUTH SHOOTING SPORTS
OZAUKEE SCHOLASTIC SHOOTING SPORTS INC - 9130 EDGE O WOODS DR - CEDARBURG, WI 53012-9349	27-5317137 3		15,249.	0.			TO FUND YOUTH SHOOTING SPORTS
MASON-DIXON CLAY BUSTERS 37100 BLUE BILL DR SELBYVILLE, DE 19975-3218	26-4439244 3		15,216.	0.			TO FUND YOUTH SHOOTING SPORTS
ANKENY JAGUARS SHOOTING SPORTS FOUNDATION - 925 NW REINHART DR - ANKENY, IA 50023-7841	86-2241001 3		15,209.	0.			TO FUND YOUTH SHOOTING SPORTS

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ANKENY HAWKS SHOOTING SPORTS FOUNDATION - 3047 NW 74TH AVE - ANKENY, IA 50023-9757	86-1923378	3	15,114.	0.			TO FUND YOUTH SHOOTING SPORTS
OREGON SCHOLASTIC CLAY TARGET PROGRAM INC - 669 STARVEOUT CREEK RD - AZALEA, OR 97410-9729	45-2997634	3	12,988.	1,539.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MIDLAND UNIVERSITY 900 N CLARKSON ST FREMONT, NE 68025-4254	47-0376551	3	14,410.	0.			TO FUND YOUTH SHOOTING SPORTS
JEFFERSON SPORTMENS CLUB PO BOX 104 JEFFERSON, WI 53549-0104	39-6109532	3	14,397.	0.			TO FUND YOUTH SHOOTING SPORTS
WISCONSIN SCTP FOUNDATION INC 8904 352ND AVE BURLINGTON, WI 53105-8940	45-4972356	3	13,513.	709.	FMV	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	14,178.	0.			TO FUND YOUTH SHOOTING SPORTS
CORRY ROD & GUN CLUB PO BOX 298 COLUMBUS, PA 16405-0298	25-1139669	4	13,617.	512.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ELKHORN VALLEY SPORTSMEN CLUB INC 54540 HIGHWAY 275 BATTLE CREEK, NE 68715-5045	27-3204554	4	13,217.	864.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF WYOMING FOUNDATION 222 S 22ND ST LARAMIE, WY 82070-5204	83-0201971	3	14,051.	0.			TO FUND YOUTH SHOOTING SPORTS

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RABBIT CREEK SHOOTING PARK FOUNDATION - 3805B RICHARD EVELYN BYRD ST - ANCHORAGE, AK 99517-2346	82-4368236 3		13,244.	750.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CLAY BREAKERS CLUB PO BOX 343 AUSTIN, MN 55912-0343	47-5152024 3		13,925.	0.			TO FUND YOUTH SHOOTING SPORTS
GRACE SCHOOLS 1 LANCER WAY WINONA LAKE, IN 46590-0001	35-0868095 3		11,340.	2,498.	FMV	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		13,833.	0.			TO FUND YOUTH SHOOTING SPORTS
JUNIORS AIM 1584 D ST BLAINE, WA 98230-9778	46-2772348 3		13,829.	0.			TO FUND YOUTH SHOOTING SPORTS
ARROWHEAD GUN CLUB INC PO BOX 20 CHASE CITY, VA 23924-0000	54-0980145 7		13,632.	0.			TO FUND YOUTH SHOOTING SPORTS
TEAM HENGES PARENT CLUB 3791 IRON HILL RD UNION, MO 63084-4626	26-4794108 3		13,049.	0.			TO FUND YOUTH SHOOTING SPORTS
SQUARE1 OUTDOORS 660 MOUNT VERNON RD TUPELO, MS 38804-7184	46-1245833 3		11,439.	1,589.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SCHOLASTIC SHOOTERS OF SOUTHEAST FLORIDA INC - PO BOX 482 - SEBRING, FL 33871-0482	27-4019608 3		13,019.	0.			TO FUND YOUTH SHOOTING SPORTS

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AMERICAN SHOOTING SPORTS ALLIANCE 1007 SAINT ANDREWS DR MANSFIELD, TX 76063-2693	47-3620427 3		13,000.	0.			TO FUND YOUTH SHOOTING SPORTS
TEXAS TRAIL RINGNECKS SHOOTERS 1570 ROAD 161 PINE BLUFFS, WY 82082-9709	46-2130953 3		10,009.	2,890.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
KC CRUSHERS INC 7525 W 160TH ST OVERLAND PARK, KS 66085-8101	84-4556580 3		12,898.	0.			TO FUND YOUTH SHOOTING SPORTS
BOREALIS BULLSEYES SHOOTING CLUB INCORPORATED - 4010 WINCHESTER LOOP - ANCHORAGE, AK 99507-3992	81-4234523 3		11,899.	915.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
MISSISSIPPI YOUTH EDUCATION IN SHOOTING SPORTS - 29 COUNTY ROAD 1250 - BOONEVILLE, MS 38829-8661	47-2159176 3		11,928.	770.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SNOWSHOE GUN CLUB INC PO BOX 125 KENAI, AK 99611-0125	26-0612473 7		12,560.	0.			TO FUND YOUTH SHOOTING SPORTS
CUMBERLAND COUNTY YOUTH SHOOTING SPORTS - PO BOX 4022 - CROSSVILLE, TN 38557-4022	81-0774278 3		12,374.	0.			TO FUND YOUTH SHOOTING SPORTS
WESTERN OHIO YOUTH TARGET TEAM PO BOX 193 SAINT MARYS, OH 45885-0193	47-5040902 3		10,672.	1,540.	FMV	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		12,151.	0.			TO FUND YOUTH SHOOTING SPORTS

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CENTRAL CATHOLIC HIGH SCHOOL 1200 RUBY AVE GRAND ISLAND, NE 68803-3799	47-0425014 3		11,250.	760.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LEE SPORTSMEN ASSOCIATION PO BOX 175 LEE, MA 01238-0175	26-2691563 3		11,963.	0.			TO FUND YOUTH SHOOTING SPORTS
BADIN HIGH SCHOOL 571 HAMILTON NEW LONDON RD HAMILTON, OH 45013-3654	31-0537113 3		11,154.	626.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
CONNORS DEVELOPMENT FOUNDATION INC 700 COLLEGE RD WARNER, OK 74469-2204	73-1096349 3		11,499.	0.			TO FUND YOUTH SHOOTING SPORTS
BOISE BUCK SHOTS 12065 W PEAK VIEW CT BOISE, ID 83709-3766	90-0970843 3		11,355.	0.			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		10,986.	300.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PARTRIDGE CREEK YOUNG GUNS 4-H CLUB INC - 169 CONNELLY HAYNES RD - ST GEORGE, SC 29477-7622	81-1545038 3		11,264.	0.			TO FUND YOUTH SHOOTING SPORTS
YUMA YOUNG GUNS 6749 E MISSION ST YUMA, AZ 85365-8899	46-3083270 3		11,123.	0.			TO FUND YOUTH SHOOTING SPORTS
LAKES AREA YOUTH TRAP CLUB 1692 270TH AVE SPIRIT LAKE, IA 51360-6813	27-2361562 3		10,037.	1,072.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAUK COUNTY YOUTH SHOOTING PROGRAM INC - E11102 SAUK PRAIRIE RD - PR DU SAC, WI 53578-9726	47-2867564 3		11,077.	0.			TO FUND YOUTH SHOOTING SPORTS
TEWKSBURY ROD & GUN CLUB INC 79 CHANDLER ST TEWKSBURY, MA 01876-1901	23-7451444 4		10,989.	0.			TO FUND YOUTH SHOOTING SPORTS
AMES COLLEGIATE SHOOTING SPORTS 2720 NORTHRIDGE LN AMES, IA 50010-7164	46-1557360 3		10,783.	0.			TO FUND YOUTH SHOOTING SPORTS
FUDD DUSTERS SST 309 E MANSION ST MARSHALL, MI 49068-1152	85-4131380 3		10,612.	0.			TO FUND YOUTH SHOOTING SPORTS
BEAVER DAM CONSERVATIONISTS INC PO BOX 99 BEAVER DAM, WI 53916-0099	39-1222554 4		10,586.	0.			TO FUND YOUTH SHOOTING SPORTS
CEDAR VALLEY SHOTGUNNERS INC 715 RIVER FOREST RD EVANSDALE, IA 50707-1527	87-1986337 3		10,560.	0.			TO FUND YOUTH SHOOTING SPORTS
HAMILTON COUNTY YOUTH SPORTS FOUNDATION NONPROFIT CORPORATION - 12460 SILVER BAY CIR - INDIANAPOLIS, IN 46236-9285	82-2019946 3		10,558.	0.			TO FUND YOUTH SHOOTING SPORTS
MISSOURI 4-H FOUNDATION UM EXTENSTION 109 WHITTEN HALL COLUMBIA, MO 65211-0001	43-6044367 3		10,359.	0.			TO FUND YOUTH SHOOTING SPORTS
LOWELL HIGH SCHOOL SCTP TEAM 2020 PARNELL AVE SE ADA, MI 49301-8913	46-2922444 3		10,323.	0.			TO FUND YOUTH SHOOTING SPORTS

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BLACK HILLS HIGH SCHOOL BOOSTER CLUB - 7741 LITTLEROCK RD SW - TUMWATER, WA 98512-7427	91-1869853	3	8,158.	2,128.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
INDIANA STATE RIFLE & PISTOL ASSN INC - 5380 S US HIGHWAY 421 - SAN PIERRE, IN 46374-9661	35-6064169	4	7,544.	2,530.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
HERMANTOWN TRAP BOOSTERS INC 4335 HAWK CIRCLE DR HERMANTOWN, MN 55811-3648	88-0736893	3	10,000.	0.			TO FUND YOUTH SHOOTING SPORTS
PINCKNEYVILLE SHOOTING SPORTS NFP PO BOX 35 PINCKNEYVILLE, IL 62274-0035	47-4168186	3	9,981.	0.			TO FUND YOUTH SHOOTING SPORTS
RICHLAND CREEK TOP GUNS 151 WOODHALL RD BATESBURG, SC 29006-8112	81-4296473	3	9,860.	0.			TO FUND YOUTH SHOOTING SPORTS
PROJECT 2000 SHOOTING RANGE 2082 WILLOW GLEN DR EL CAJON, CA 92019-3903	95-6080647	4	9,821.	0.			TO FUND YOUTH SHOOTING SPORTS
TEXAS YOUTH EDUCATION IN SHOOTING SPORTS - 2112 CHAPARRAL RD - AZLE, TX 76020-1854	47-1551236	3	9,815.	0.			TO FUND YOUTH SHOOTING SPORTS
TRINITY UNIVERSITY 1 TRINITY PL SAN ANTONIO, TX 78212-4674	74-1109633	3	9,608.	0.			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	9,597.	0.			TO FUND YOUTH SHOOTING SPORTS

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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PELLA SHOOTERS CLUB 1243 180TH ST PELLA, IA 50219-8038	26-4583894 3		8,791.	760.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TUCSON TRAP AND SKEET CLUB 7800 W OLD AJO HWY TUCSON, AZ 85735-9479	86-6050639 3		9,427.	0.			TO FUND YOUTH SHOOTING SPORTS
CCMU FOUNDATION 5937 REPUBLIC OF TEXAS BLVD AUSTIN, TX 78735-6399	83-3132097 3		9,369.	0.			TO FUND YOUTH SHOOTING SPORTS
PARENT BOOSTER USA INC 301 MEADOWCREEK RD COPPELL, TX 75019-4024	81-5149011 3		9,364.	0.			TO FUND YOUTH SHOOTING SPORTS
WESTERN WAYNE COUNTY CONSERVATION ASSOCIATION INC - PO BOX 701009 - PLYMOUTH, MI 48170-0957	38-1967343 4		9,177.	0.			TO FUND YOUTH SHOOTING SPORTS
NORCAL LONGSHOTS 1296 EAST GIBSON ROAD WOODLAND, CA 95776-6378	27-0399691 3		9,121.	0.			TO FUND YOUTH SHOOTING SPORTS
PARENT BOOSTER USA INC PO BOX 270301 FLOWER MOUND, TX 75027-0301	81-4157546 3		6,668.	2,440.	FMV	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		9,053.	0.			TO FUND YOUTH SHOOTING SPORTS
HURON POINTE SPORTMENS ASSOCIATION PO BOX 480587 NEW HAVEN, MI 48048-0587	38-1796075 7		9,024.	0.			TO FUND YOUTH SHOOTING SPORTS

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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CLAYBUSTERS 417 W 35TH ST LORAIN, OH 44055-1143	46-2143905 3		8,869.	0.			TO FUND YOUTH SHOOTING SPORTS
PARENT BOOSTER USA INC 20630 STATE HIGHWAY 64 CANTON, TX 75103-6124	81-4317672 3		8,689.	0.			TO FUND YOUTH SHOOTING SPORTS
FLORIDA 4-H CLUB FOUNDATION INC 1604 MCCARTY DRIVE NO 1040 GAINESVILLE, FL 32611-2074	59-1000186 3		8,566.	0.			TO FUND YOUTH SHOOTING SPORTS
CRAWFORD COUNTY SHOOTING SPORTS ASSOCIATION INC - PO BOX 512 - DENISON, IA 51442-0512	45-5081196 3		4,883.	3,610.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
AMERICAN LEGION 1220 NEWTON ST JASPER, IN 47546-2811	35-0279235 19		7,671.	806.	FMV	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		8,463.	0.			TO FUND YOUTH SHOOTING SPORTS
CALIFORNIA JUNIOR CLAYBREAKERS 18565 SOLEDAD CANYON ROAD 291 CANYON COUNTRY, CA 91351-3700	20-5666832 3		8,460.	0.			TO FUND YOUTH SHOOTING SPORTS
BRANSON TRAP TEAM 125 JONATHON CT BRANSON, MO 65616-9848	81-0806947 3		8,432.	0.			TO FUND YOUTH SHOOTING SPORTS
NATIONAL ROTC CADETS PARENTS ASSOCIATION WHEELING NAVAL JUNIOR - 900 S ELMHURST RD - WHEELING, IL 60090-5507	36-4468958 3		4,703.	3,661.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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GATOR TRAP SKEET AND SPORTING TEAM 3105 SW 1ST AVE GAINESVILLE, FL 32607-3000	84-3755118	3	8,336.	0.			TO FUND YOUTH SHOOTING SPORTS
BURNSVILLE BLAZE TRAP SHOOTING TEAM BOOSTER CLUB - 600 HIGHWAY 13 E - BURNSVILLE, MN 55337-2939	46-2218083	3	8,277.	0.			TO FUND YOUTH SHOOTING SPORTS
HASTINGS COLLEGE 710 N TURNER AVE HASTINGS, NE 68901-7621	47-0376525	3	7,465.	770.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SIMPSON COLLEGE 701 NORTH C ST INDIANOLA, IA 50125-1201	42-0680389	3	8,218.	0.			TO FUND YOUTH SHOOTING SPORTS
THE OHIO STATE UNIVERSITY 1802 PRINCETON RD STE 400 FAIRFIELD TWP, OH 45011-4762	26-1414899	3	7,966.	240.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LUTHERAN HIGH NORTHEAST 2010 N 37TH ST NORFOLK, NE 68701-3108	47-0792617	3	7,930.	200.	FMV	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	8,128.	0.			TO FUND YOUTH SHOOTING SPORTS
HUMBOLDT HIGH SCHOOL WILDCAT TRAP CLUB - 1008 8TH AVE N - HUMBOLDT, IA 50548-1220	90-0421533	3	8,109.	0.			TO FUND YOUTH SHOOTING SPORTS
KANSAS STATE UNIVERSITY 105 ANDERSON HALL MANHATTAN, KS 66506-0100	48-0771751	3	7,796.	300.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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ARNOLD JUNIOR SHOOTERS INC 108 WILLOW BR HILLSBORO, MO 63050-3733	06-1680781 3		7,984.	0.			TO FUND YOUTH SHOOTING SPORTS
YOUTH SHOOTING SPORTS ASSOCIATION 12919 78TH AVE W TAYLOR RIDGE, IL 61284-9670	30-0774569 3		7,679.	300.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ARKANSAS GAME & FISH FOUNDATION 2 NATURAL RESOURCES DR LITTLE ROCK, AR 72205-1572	71-0562360 3		5,000.	2,959.	FMV	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		7,925.	0.			TO FUND YOUTH SHOOTING SPORTS
CARROLL ACTION SHOOTING SPORTS INC 23278 250TH ST CARROLL, IA 51401-8541	83-2409295 3		7,837.	0.			TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY SYSTEM OF NEW HAMPSHIRE 5 CHENELL DR STE 301 CONCORD, NH 03301-8522	02-6000937 3		7,704.	0.			TO FUND YOUTH SHOOTING SPORTS
UNIVERSITY OF DELAWARE 222 SOUTH CHAPEL STREET NEWARK, DE 19716-5699	51-6000297 3		7,701.	0.			TO FUND YOUTH SHOOTING SPORTS
NATION FORD HIGH SCHOOL MARINE CORP JROTC BOOSTER CLUB - 1400 A O JONES BLVD - FORT MILL, SC 29715-1625	45-1612768 3		7,698.	0.			TO FUND YOUTH SHOOTING SPORTS
FIRST HUNT FOUNDATION INC 2965 HIGHWAY 162 KAMIAH, ID 83536-6006	47-3946789 3		755.	6,920.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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XAVIER CHARTER SCHOOL INC 1218 N COLLEGE RD W TWIN FALLS, ID 83301-5651	20-5009576 3		7,669.	0.			TO FUND YOUTH SHOOTING SPORTS
RIO SALADO SPORTSMANS CLUB INC 3960 N USERY PASS RD MESA, AZ 85207-9702	23-7228745 4		6,295.	1,300.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
NORTHLAND SHOOTING SPORTS INC 22233 COUNTY ROAD 21 ROSEAU, MN 56751-8600	83-2149399 3		7,585.	0.			TO FUND YOUTH SHOOTING SPORTS
EMMETSBURG HOT SHOTS TRAPSHOOTING TEAM INC - 3949 470TH AVE - EMMETSBURG, IA 50536-8570	83-1985950 3		6,852.	709.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TEXAS 4-H 203 VETERANS MEMORIAL DR NAVASOTA, TX 77868-8774	38-3916154 3		5,279.	2,250.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SARASOTA MILITARY ACADEMY INC 801 N ORANGE AVE SARASOTA, FL 34236-4116	65-1149763 3		7,525.	0.			TO FUND YOUTH SHOOTING SPORTS
LAKE ISLAND RIFLE AND PISTOL CLUB INC - PO BOX 214 - CARTERET, NJ 07008-0214	22-2122956 4		7,512.	0.			TO FUND YOUTH SHOOTING SPORTS
ORANGEBURG PREPARATORY SCHOOLS INC 2651 NORTH RD ORANGEBURG, SC 29118-1824	57-0788617 3		7,502.	0.			TO FUND YOUTH SHOOTING SPORTS
SOUTH HARDIN TRAP TEAM INC 202 E CHESTNUT HUBBARD, IA 50122-7782	46-3904638 3		6,792.	709.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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MACCRAY TRAP SHOOTING TEAM 118 4TH ST NW CLARA CITY, MN 56222-1401	46-5501695 3		7,365.	0.			TO FUND YOUTH SHOOTING SPORTS
MAQUOKETA YOUTH TRAP CLUB INC 10575 50TH AVE BALDWIN, IA 52207-9604	47-4456978 3		7,329.	0.			TO FUND YOUTH SHOOTING SPORTS
N2DUST SHOTGUN SPORTS 4613 GRAY RD KNOXVILLE, TN 37938-2502	47-1862875 3		7,286.	0.			TO FUND YOUTH SHOOTING SPORTS
BULLOCH ACADEMY INC 873 WESTSIDE RD STATESBORO, GA 30458-8601	58-1119726 3		7,261.	0.			TO FUND YOUTH SHOOTING SPORTS
TWIN FALLS YOUTH SHOOTING PROGRAM 3509 N 2000 E FILER, ID 83328-5663	46-1525523 3		7,243.	0.			TO FUND YOUTH SHOOTING SPORTS
MOUNT MICHAEL BENEDICTINE SCHOOL 22520 MOUNT MICHAEL RD ELKHORN, NE 68022-3401	30-0299031 3		7,240.	0.			TO FUND YOUTH SHOOTING SPORTS
PALMETTO GUN CLUB PO BOX 2822 SUMMERVILLE, SC 29484-2822	57-0791290 4		6,645.	480.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
TRI-STATE SHOOTING PARK INC PO BOX 8353 FORT MOHAVE, AZ 86427-8353	45-2833372 4		7,077.	0.			TO FUND YOUTH SHOOTING SPORTS
HAINES HOT SHOTS PO BOX 795 HAINES, AK 99827-0795	82-5116344 3		7,057.	0.			TO FUND YOUTH SHOOTING SPORTS

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FUTURE FARMERS OF AMERICA AND ITS STATE ASSOCIATIONS & LOCAL CHAPTER - 562 S HWY 123 BYPASS ROOM 150 - SEGUIN, TX 78155-9752	20-3877150	3	7,040.	0.			TO FUND YOUTH SHOOTING SPORTS
OREGON 4-H FOUNDATION 1211 SE BAY BLVD NEWPORT, OR 97365-4227	93-6036649	3	7,004.	0.			TO FUND YOUTH SHOOTING SPORTS
WILLIAM BLOUNT SHOOTING TEAM 1904 ANGUS BLVD MARYVILLE, TN 37803-2252	27-1059687	3	6,992.	0.			TO FUND YOUTH SHOOTING SPORTS
BILLINGS TRAP CLUB PO BOX 50365 BILLINGS, MT 59105-0365	81-0303667	7	6,985.	0.			TO FUND YOUTH SHOOTING SPORTS
HILLSBORO TRAP & SKEET CLUB 33295 NW WREN RD HILLSBORO, OR 97124-8336	93-6026527	4	6,938.	0.			TO FUND YOUTH SHOOTING SPORTS
GATEWOOD SCHOOLS INC 139 PHILLIPS DR EATONTON, GA 31024-1349	58-1087497	3	6,908.	0.			TO FUND YOUTH SHOOTING SPORTS
GROTON SPORTSMENS CLUB INC 421 AL HARVEY RD STONINGTON, CT 06378-1701	06-6048922	7	6,791.	0.			TO FUND YOUTH SHOOTING SPORTS
ETOWAH MAMBAS INC 100 WILD TURKEY LN JASPER, GA 30143-5759	84-4152851	3	6,784.	0.			TO FUND YOUTH SHOOTING SPORTS
COLORADO 4-H FOUNDATION INC 1001 RAILROAD AVE RIFLE, CO 81650-3567	51-0544701	3	4,733.	2,049.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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SOUTH GEORGIA YOUTH SHOOTING CLUB PO BOX 242 HARTSFIELD, GA 31756-0242	20-1211832 3		6,759.	0.			TO FUND YOUTH SHOOTING SPORTS
UPPER PENINSULA YOUTH SHOTGUN SPORTS ORGANIZATION - PO BOX 417 - GLADSTONE, MI 49837-0417	27-5265141 3		6,727.	0.			TO FUND YOUTH SHOOTING SPORTS
THOMAS HEYWARD ACADEMY INC 1727 MALPHRUS RD RIDGELAND, SC 29936-5337	23-7075014 3		6,695.	0.			TO FUND YOUTH SHOOTING SPORTS
DEVILS THUMB SHOOTERS PO BOX 115 PETERSBURG, AK 99833-0115	83-2504162 3		6,395.	300.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
LYNDEN SHOTGUN CLUB PO BOX 837 LYNDEN, WA 98264-0837	42-1574069 3		6,630.	0.			TO FUND YOUTH SHOOTING SPORTS
NORTHERN KENTUCKY SCHOLASTIC TRAP SHOOTING CLUB INC - 331MADDOXRD - ALEXANDRIA, KY 41001-0000	20-5124230 3		6,621.	0.			TO FUND YOUTH SHOOTING SPORTS
TENNESSEE 4-H FOUNDATION INC 2621 MORGAN CIRCLE 205 KNOXVILLE, TN 37996-4510	62-6047753 3		6,571.	0.			TO FUND YOUTH SHOOTING SPORTS
DUGGER UNION COMMUNITY SCHOOLS 7356 E COUNTY ROAD 50 S DUGGER, IN 47848-8101	46-4351497 3		6,568.	0.			TO FUND YOUTH SHOOTING SPORTS
CANYON LAKE HIGH SCHOOL JROTC HAWK BN BOOSTER CLUB - 8555 FM 32 - FISCHER, TX 78623-2424	26-4588412 3		4,249.	2,299.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

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TSSC CHARTER ACADEMY 7664 W ONTARIO PL LITTLETON, CO 80128-4406	45-3759931 3		6,547.	0.			TO FUND YOUTH SHOOTING SPORTS
HARPER CREEK CLAY TARGET CLUB 10021 6 AND ONE HALF MILE ROAD CERESCO, MI 49033-0000	46-4040614 3		6,478.	0.			TO FUND YOUTH SHOOTING SPORTS
FORT WORTH YOUTH SHOOTING FOUNDATION - 2112 CHAPARRAL RD - AZLE, TX 76020-1854	47-2571366 3		6,475.	0.			TO FUND YOUTH SHOOTING SPORTS
MOHAVE SCTP INC 4446 KINGMAN, AZ 86402-0000	26-2844332 3		5,935.	449.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
PHANTOM SURE SHOTS SHOOTING CLUB PO BOX 754 WADDELL, AZ 85355-0754	46-4249181 3		6,304.	0.			TO FUND YOUTH SHOOTING SPORTS
UTAH MILITARY ACADEMY 5120 S 1050 W RIVERDALE, UT 84405-3733	46-5071480 3		6,273.	0.			TO FUND YOUTH SHOOTING SPORTS
STEPTOE VALLEY TRAP SKEET AND TARGET INC - 29 JUNIPER ST - RUTH, NV 89319-9113	81-3694361 3		6,179.	0.			TO FUND YOUTH SHOOTING SPORTS
BCLUW SHOOTING SPORTS INC 32180 G AVE CONRAD, IA 50621-8129	46-4054278 3		3,453.	2,639.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
FAIRFIELD SPORTSMENS ASSOCIATION 3943 TIMBERIDGE LN OKEANA, OH 45053-9332	31-0741929 7		6,090.	0.			TO FUND YOUTH SHOOTING SPORTS

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS 4-H 210 E LIVE OAK ST SEGUIN, TX 78155-6421	61-1766381 3		5,909.	150.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
QUAIL & UPLAND GAME ALLIANCE 508 81ST ST ALTAMONT, IL 62411-0000	47-1096921 3		4,584.	1,469.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
SOUTHERN SHOOTING SPORTS 1960-J MADISON ST STE 183 CLARKSVILLE, TN 37043-8038	46-4290605 3		6,028.	0.			TO FUND YOUTH SHOOTING SPORTS
ROCKFORD SPORTSMANS CLUB 11115 NORTHLAND DR NE ROCKFORD, MI 49341-8962	38-2682316 3		6,028.	0.			TO FUND YOUTH SHOOTING SPORTS
VETERANS OF FOREIGN WARS DEPARTMENT OF MINNESOTA - PO BOX 23 - REDWOOD FALLS, MN 56283-0023	41-0691102 19		368.	5,645.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ANDOVER TRAP & SKEET BOOSTER CLUB 14371 QUINCE ST NW ANDOVER, MN 55304-4139	46-4818930 3		4,181.	1,800.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
HUTCH TIGER TRAP INC 1250 HIGHWAY 7 E HUTCHINSON, MN 55350-5640	46-5195738 3		5,954.	0.			TO FUND YOUTH SHOOTING SPORTS
SPARTA HUNTING AND FISHING CLUB PO BOX 264 SPARTA, MI 49345-0264	26-0749495 7		5,951.	0.			TO FUND YOUTH SHOOTING SPORTS
FOX TOWNSHIP SPORTSMENS CLUB 203 RIDGE RD KERSEY, PA 15846-1411	25-1427215 3		5,945.	0.			TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NORTH GEORGIA FOUNDATION INC - PO BOX 1599 - DAHLONEGA, GA 30533-0027	23-7066297 3		5,937.	0.			TO FUND YOUTH SHOOTING SPORTS
BECKER COUNTY SPORTSMAN CLUB PO BOX 415 DETROIT LAKES, MN 56502-0415	41-6170041 4		5,909.	0.			TO FUND YOUTH SHOOTING SPORTS
FOUNDATION FOR LINCOLN PUBLIC SCHOOLS - PO BOX 82889 - LINCOLN, NE 68501-2889	36-3490560 3		5,829.	0.			TO FUND YOUTH SHOOTING SPORTS
IZAAK WALTON LEAGUE OF AMERICA INC PO BOX 123 ALGONA, IA 50511-0123	42-1213496 3		5,773.	0.			TO FUND YOUTH SHOOTING SPORTS
TEXAS 4-H PO BOX 669 ANAHUAC, TX 77514-0669	82-2159949 3		5,753.	0.			TO FUND YOUTH SHOOTING SPORTS
SPOKANE RIFLE CLUB PO BOX 18887 SPOKANE, WA 99228-0887	91-6058415 7		5,710.	0.			TO FUND YOUTH SHOOTING SPORTS
AMANA SPORTSMANS CLUB INC PO BOX 112 AMANA, IA 52203-0112	33-1171551 3		5,710.	0.			TO FUND YOUTH SHOOTING SPORTS
FLAT RIVER CONSERVATION CLUB PO BOX 424 GREENVILLE, MI 48838-0424	38-6091811 3		5,692.	0.			TO FUND YOUTH SHOOTING SPORTS
STR8 SHOOTERS CLAY TEAM 2929 YOUNG RD SODDY DAISY, TN 37379-8615	47-2113304 3		5,691.	0.			TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEATHWOOD HALL EPISCOPAL SCHOOL 3000 S BELTLINE BLVD COLUMBIA, SC 29201-5130	57-0358065 3		5,673.	0.			TO FUND YOUTH SHOOTING SPORTS
LATHROP AREA SHOOTING CLUB PO BOX 268 LATHROP, MO 64465-0268	37-1828796 3		5,605.	0.			TO FUND YOUTH SHOOTING SPORTS
SOUTHERN ARIZONA FIREARMS EDUCATORS INC - PO BOX 65854 - TUCSON, AZ 85728-5854	86-0730875 3		5,550.	0.			TO FUND YOUTH SHOOTING SPORTS
AMERICAN LEGION 345 LEGION DR WARRENTON, VA 20186-3536	54-6072333 19		5,528.	0.			TO FUND YOUTH SHOOTING SPORTS
RICHARD WINN ACADEMY PO BOX 390 WINNSBORO, SC 29180-0390	57-0479330 3		4,302.	1,213.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
WARREN COUNTY CLAYBUSTERS 1222 SCOTTS CROSSING RD CORRY, PA 16407-4124	47-5035426 3		5,236.	240.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
ELKHORN TRAP 305 SKYLINE DR ELKHORN, NE 68022-1791	46-2777543 3		5,437.	0.			TO FUND YOUTH SHOOTING SPORTS
NEBRASKA YOUTH SHOOTING SPORTS FOUNDATION INC - PO BOX 326 - BROKEN BOW, NE 68822-0326	47-2021880 3		5,429.	0.			TO FUND YOUTH SHOOTING SPORTS
NORRIS PUBLIC SCHOOLS TRAP CLUB 6200 SALTILLO RD LINCOLN, NE 68516-9212	81-2765269 3		5,356.	0.			TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON COLLEGE 300 WASHINGTON AVE CHESTERTOWN, MD 21620-1197	52-0591691 3		5,246.	0.			TO FUND YOUTH SHOOTING SPORTS
RICE LAKE WARRBIRDS SHOOTING ORGANIZATION - 2584 22ND ST - RICE LAKE, WI 54868-9774	81-5181668 3		5,225.	0.			TO FUND YOUTH SHOOTING SPORTS
TRI-COUNTY SPORTSMENS CLUB PO BOX 124 MONTEVIDEO, MN 56265-0124	47-3821438 3		5,221.	0.			TO FUND YOUTH SHOOTING SPORTS
PAY IT FORWARD NOW NONPROFIT CORPORATION - 26884 SCHUCK RD - WASHINGTON, IL 61571-9436	82-2320391 3		5,201.	0.			TO FUND YOUTH SHOOTING SPORTS
IOWA CITY WESTSIDE TRAP CLUB 1138 MELROSE AVE IOWA CITY, IA 52246-1927	46-2029089 3		5,173.	0.			TO FUND YOUTH SHOOTING SPORTS
SHOOTING STARS 820 S MACARTHUR BLVD STE 105 # 138 COPPELL, TX 75019-4220	26-3432476 3		5,140.	0.			TO FUND YOUTH SHOOTING SPORTS
ONTELAUNEE ROD & GUN CLUB INC PO BOX 147 NEFFS, PA 18065-0147	23-6278749 3		5,126.	0.			TO FUND YOUTH SHOOTING SPORTS
CAMERON COUNTY OUTDOOR YOUTH ACTIVITIES INC - 174 NICKLER RD - EMPORIUM, PA 15834-4724	45-3165602 3		5,118.	0.			TO FUND YOUTH SHOOTING SPORTS
PRINCE WILLIAM COUNTY 4-H ASSOCIATION - 8033 ASHTON AVE STE 105 - MANASSAS, VA 20109-2895	46-1054608 3		3,797.	1,290.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KOSKO DUST DEVILS LLC 2391 FOX FARM ROAD WARSAW, IN 46580-0000	38-3921466 3		4,781.	300.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
UTAH PRECISION MARKSMANSHIP SOCIETY - 1033 E 5290 S - SALT LAKE CTY, UT 84117-6633	87-0468067 3		5,063.	0.			TO FUND YOUTH SHOOTING SPORTS
LOESS HILLS YOUTH SHOOTING SPORTS INC - 901 SUNNYSIDE AVE - MISSOURI VLY, IA 51555-1848	47-2879789 3		5,048.	0.			TO FUND YOUTH SHOOTING SPORTS
WAVERLY-SHELL ROCK TRAPSHOOTING CLUB INC - 2140 BADGER AVE - WAVERLY, IA 50677-9694	83-0876507 3		2,652.	2,375.	FMV	SPORTING GOODS AND ELECTRONICS	TO FUND YOUTH SHOOTING SPORTS
NORTH LEOMINSTER ROD & GUN CLUB INC - PO BOX 657 - LUNENBURG, MA 01462-0657	04-6056906 7		5,022.	0.			TO FUND YOUTH SHOOTING SPORTS
RADFORD SCHOOL FOR GIRLS 2001 RADFORD ST EL PASO, TX 79903-1509	74-1180152 3		5,015.	0.			TO FUND YOUTH SHOOTING SPORTS
TBCA INC 4954 E I-20 SERVICE RD SOUTH WILLOW PARK, TX 76087-3651	75-2575760 3		5,012.	0.			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 J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

MIDWAY USA FOUNDATION, INC.

Employer identification number

26-1573088

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) G. SCOTT REYNOLDS EXECUTIVE DIRECTOR	(i)	195,780.	0.	0.	0.	5,839.	201,619.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Multiple horizontal lines for providing supplemental information.

SCHEDULE L
(Form 990)

Transactions With Interested Persons

OMB No. 1545-0047

2022

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 for instructions and the latest information.

Name of the organization MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
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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	27,329.	JANITORIAL/		X
SUBSTANTIAL CONTRIBUTOR	35% CONTROLLED ENTI	27,329.	JANITORIAL/		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: JANITORIAL/IT PERSONNEL

(A) NAME OF PERSON: SUBSTANTIAL CONTRIBUTOR

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

35% CONTROLLED ENTITY

(D) DESCRIPTION OF TRANSACTION: JANITORIAL/IT PERSONNEL

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

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				
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 (SPORTING GOODS)	X	13	331,266.	FAIR MARKET VALUE
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 V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 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)**

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 Form 990-EZ.

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

OMB No. 1545-0047

2022

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 MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
--	---

VERIFICATION OF DATA BY INDEPENDENT PEOPLE.

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

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

Type and Entity: PARTNERSHIP INCOME - S POST-2017 NO		DETAIL CARRYOVER SCHEDULE										
Section 382 Annual Limitation		Section 382 Carryover										
Year Originated	Original Carryover Amount	Total Amount Used	Amount Used for 12/31/20	Amount Used for 12/31/22	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A	2018	56,143.	56,143.	10,089.	46,054.							
B	2019	40,880.	40,880.		40,880.							
C	2019	40,880.	548.		548.							
D												
E												
F												
G												
H												
I												
J												
K												
L												
M												
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Q												
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V												
W												
Detail Type	E S B C	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A												
B												
C												
D												
E												
F												
G												
H												
I												
J												
K												
L												
M												
N												
O												
P												
Q												
R												
S												
T												
U												
V												
W												

**Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**

2023

(and on Investment Income for Private Foundations) FORM 990-T

► Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year	1	
2	Tax on the amount on line 1	2	
3	Alternative minimum tax for trusts	3	
4	Total. Add lines 2 and 3	4	
5	Estimated tax credits	5	
6	Subtract line 5 from line 4	6	
7	Other taxes	7	
8	Total. Add lines 6 and 7	8	
9	Credit for federal tax paid on fuels	9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization does not need to make estimated tax payments	10a	
b	Enter the tax shown on the 2022 return. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	4,383.
c	2023 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	ADJUSTED TO 4,400.

		(a)	(b)	(c)	(d)
11	Installment due dates	11			12/15/23
12	Installments. Enter 25% of line 10c in columns (a) through (d)	12			4,400.
13	2022 Overpayment	13			
14	Payment due (Subtract line 13 from line 12)	14			4,400.

Form **990-W**

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2022, or fiscal year beginning _____, 2022, and ending _____, 20____

2022

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

MIDWAY USA FOUNDATION, INC.

EIN or SSN

26-1573088

Name and title of officer or person subject to tax

**RICHARD LEEPER
PRESIDENT**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b**, 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.**

1a Form 990 check here	<input type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here ...	<input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ...	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b _____
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here	<input checked="" type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b <u>4,383.</u>
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2022 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 electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the 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 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 electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

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 tax year 2022 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 or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 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.

Signature of officer or person subject to tax

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.

43236726847

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return 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

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2022)

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

2022

Department of the Treasury
Internal Revenue Service

For calendar year 2022 or other tax year beginning _____, and ending _____

Go to 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).

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

A <input type="checkbox"/> Check box if address changed.	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) <input type="checkbox"/> 529A	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) MIDWAY USA FOUNDATION, INC. Number, street, and room or suite no. If a P.O. box, see instructions. 6001 W VAN HORN TAVERN RD, STE C City or town, state or province, country, and ZIP or foreign postal code COLUMBIA, MO 65203	D Employer identification number 26-1573088 E Group exemption number (see instructions) F <input type="checkbox"/> Check box if an amended return.
C Book value of all assets at end of year 273,074,552.				

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust State college/university

H Check if filing only to Claim credit from Form 8941 Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation

J Enter the number of attached Schedules A (Form 990-T) **1**

K 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.

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

Part I Total Unrelated Business Taxable Income

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	21,870.
2 Reserved	2	
3 Add lines 1 and 2	3	21,870.
4 Charitable contributions (see instructions for limitation rules)	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	21,870.
6 Deduction for net operating loss. See instructions	6	
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	21,870.
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000.
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000.
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	20,870.

Part II Tax Computation

1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	4,383.
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax (trusts only)	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	4,383.

LHA For Paperwork Reduction Act Notice, see instructions.

Part III Tax and Payments

1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b	Other credits (see instructions)	1b		
c	General business credit. Attach Form 3800 (see instructions)	1c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e	Total credits. Add lines 1a through 1d	1e		
2	Subtract line 1e from Part II, line 7	2		4,383.
3	Other amounts due. 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 statement)	3		
4	Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4		4,383.
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5		0.
6a	Payments: A 2021 overpayment credited to 2022	6a		
b	2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c	Tax deposited with Form 8868	6c	6,000.	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	6g		
7	Total payments. Add lines 6a through 6g	7		6,000.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8		207.
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		1,410.
11	Enter the amount of line 10 you want: Credited to 2023 estimated tax Refunded	11		1,410.

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

1	At any time during the 2022 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
			X
2	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.	Yes	No
			X
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$		
4	Enter available pre-2018 NOL carryovers here \$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
	523000	\$ 127,814.	
		\$	
6a	Did the organization change its method of accounting? (see instructions)	Yes	No
			X
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V	Yes	No

Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

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	PRESIDENT	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	NICK MESTRES			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
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

Go to 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).

1
OMB No. 1545-0047

2022

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

A Name of the organization MIDWAY USA FOUNDATION, INC.	B Employer identification number 26-1573088
C Unrelated business activity code (see instructions) 523000	D Sequence: 1 of 1

E Describe the unrelated trade or business **PARTNERSHIP INCOME - SEE ATTACHED**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales			
b Less returns and allowances c Balance	1c		
2 Cost of goods sold (Part III, line 8)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4 a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a		
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 1	5 110,130.		110,130.
6 Rent income (Part IV)	6		
7 Unrelated debt-financed income (Part V)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9		
10 Exploited exempt activity income (Part VIII)	10		
11 Advertising income (Part IX)	11		
12 Other income (see instructions; attach statement)	12		
13 Total. Combine lines 3 through 12	13 110,130.		110,130.

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

1 Compensation of officers, directors, and trustees (Part X)	1	
2 Salaries and wages	2	
3 Repairs and maintenance	3	
4 Bad debts	4	
5 Interest (attach statement). See instructions	5	
6 Taxes and licenses	6	778.
7 Depreciation (attach Form 4562). See instructions	7	
8 Less depreciation claimed in Part III and elsewhere on return	8a	8b
9 Depletion	9	
10 Contributions to deferred compensation plans	10	
11 Employee benefit programs	11	
12 Excess exempt expenses (Part VIII)	12	
13 Excess readership costs (Part IX)	13	
14 Other deductions (attach statement)	14	
15 Total deductions. Add lines 1 through 14	15	778.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16	109,352.
17 Deduction for net operating loss. See instructions STMT 2 STMT 4	17	87,482.
18 Unrelated business taxable income. Subtract line 17 from line 16	18	21,870.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

Part III Cost of Goods Sold Enter method of inventory valuation

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

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.
 A _____
 B _____
 C _____
 D _____

	A	B	C	D
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)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)	0.			
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)	0.			

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.
 A _____
 B _____
 C _____
 D _____

	A	B	C	D
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 statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	0.			
9 Allocable deductions. Multiply line 3c by line 6				
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	0.			
11 Total dividends-received deductions included in line 10	0.			

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

		Exempt Controlled Organizations			
1. Name of controlled organization	2. Employer identification number	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 Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)	
Totals			0.	0.	

Part VII 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 statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals		0.		0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4	
5	Gross income from activity that is not unrelated business income	5	
6	Expenses attributable to income entered on line 5	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7	

FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 1
DESCRIPTION		NET INCOME OR (LOSS)
UBI FROM LIMITED PARTNERSHIPS - ORDINARY BUSINESS INCOME (LOSS)		110,130.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5		110,130.

FORM 990-T (A)	POST 2017 NOL SCHEDULE	STATEMENT 2
PRIOR YEAR POST 2017 NOL	NOL DEDUCTION	CARRYFORWARD OF POST 2017 NOL
127,814.	87,482.	40,332.

990-T SCH A	POST-2017 NET OPERATING LOSS DEDUCTION			STATEMENT 3
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	56,143.	10,089.	46,054.	46,054.
12/31/19	40,880.	0.	40,880.	40,880.
12/31/19	40,880.	0.	40,880.	40,880.
NOL CARRYOVER AVAILABLE THIS YEAR			127,814.	127,814.

SCH A (990-T)	SCHEDULE A NOL DETAIL	STATEMENT 4
TAXABLE INCOME FROM ALL ENTITIES		109,352.
THIS ENTITIES PORTION OF TAXABLE INCOME		109,352.
THIS ENTITIES PERCENTAGE OF PRE-2018 NET OPERATING LOSS		100.00%
THIS ENTITIES ALLOWED PRE-2018 NET OPERATING LOSS		0.
TAXABLE INCOME AFTER PRE-2018 NET OPERATING LOSS		109,352.
80% INCOME LIMITATION		87,482.
POST-2017 AVAILABLE		127,814.
LESSER OF POST-2017 NET OPERATING LOSS OR 80% LIMITATION		87,482.

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return. **FORM 990-T**

2022

Go to www.irs.gov/Form2220 for instructions and the latest information.

Name MIDWAY USA FOUNDATION, INC.	Employer identification number 26-1573088
--	---

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1 Total tax (see instructions)		1	4,383.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b		
c Credit for federal tax paid on fuels (see instructions)	2c		
d Total. Add lines 2a through 2c		2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty		3	4,383.
4 Enter the tax shown on the corporation's 2021 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5		4	
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3		5	4,383.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 The corporation is using the adjusted seasonal installment method.
- 7 The corporation is using the annualized income installment method.
- 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	04/15/22	06/15/22	09/15/22	12/15/22
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	1,096.	1,096.	1,095.	1,096.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11				
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12	13				
14 Add amounts on lines 16 and 17 of the preceding column	14		1,096.	2,192.	3,287.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	0.	0.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		1,096.	2,192.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	1,096.	1,096.	1,095.	1,096.
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions 19				
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2022 and before 7/1/2022	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 4\% (0.04)}{365}$...	22 \$	\$	\$	\$
23 Number of days on line 20 after 6/30/2022 and before 10/1/2022	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$...	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2022 and before 1/1/2023	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 6\% (0.06)}{365}$...	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2022 and before 4/1/2023	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 7\% (0.07)}{365}$...	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2023 and before 7/1/2023	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2023 and before 10/1/2023	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2023 and before 1/1/2024	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2023 and before 3/16/2024	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{366}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38 \$			207.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Electronic Filing PDF Attachment

Midway USA Foundation, Inc.

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

Tax Year: 2022

EIN: 26-1573088

PTP Partnership	Federal EIN	Ordinary Gains - Per Form K-1	PAL OFFSET	Net UBI
Energy Transfer, LP	30-0108820	57,750	(57,750)	-
Enterprise Products Partners, LP	76-0568219	142,551	(142,551)	-
Magellan Midstream Partners, LP	73-1599053	56,546	(56,546)	-
MPLX, LP	27-0005456	58,340	(58,340)	-
Nustar Energy, LP	74-2956831	98,367	(54,444)	43,923
DCP Midsteam	03-0567133	16,081	(16,081)	-
Plains All American Pipeline, LP	76-0582150	104,923	(66,356)	38,567
Western Midstream Partners	46-0967367	14,062	(14,062)	-
Crestwood Equity Partners, LP	43-1918951	-	-	-
China-US Industrial Coop Partnership, LP	83-1021290	23,027	-	23,027
Broad Street Real Estate Credit	98-1360807	5,066	-	5,066
Vintage VII Aiv Offshore SCSP	98-1351727	-	-	-
Total UBI Income/(Loss) Per 990T		576,713	(466,130)	110,583

PTP Partnerships	Federal EIN	Prior Year Loss Carryforward	2022 Form K-1, Box 20V	PAL USED IN 2022	Carried Forward to 2023
Energy Transfer, LP	30-0108820	(68,783)	(59,426)	57,750	(70,459)
Enterprise Products Partners, LP	76-0568219	(131,731)	(26,563)	142,551	(15,743)
Magellan Midstream Partners, LP	73-1599053	(12,531)	(2,707)	56,546	41,308
MPLX, LP	27-0005456	(94,031)	(16,561)	58,340	(52,252)
Nustar Energy, LP	74-2956831	(53,852)	(592)	54,444	- Final
DCP Midsteam	03-0567133	(15,617)	(25,448)	16,081	(24,984)
Plains All American Pipeline, LP	76-0582150	(75,964)	9,608	66,356	-
Western Midstream Partners	46-0967367	(38,438)	(50,524)	14,062	(74,900)
Crestwood Equity Partners, LP	43-1918951	-	(1,334)	-	(1,334)
Non PTP Partnerships		-	-	-	-
China-US Industrial Coop Partnership, LP	83-1021290	-	-	-	-
Broad Street Real Estate Credit	98-1360807	-	-	-	-
Vintage VII Aiv Offshore SCSP	98-1351727	-	-	-	-
Ares Special Opportunities II Access Offshore LP	98-1635069	-	-	-	-
SLR Private Credit II (RDC) Access LP	88-1732389	-	-	-	-
Total Passive Activity Losses Carried Forward to 2023		(490,947)	(173,547)	466,130	(198,364)