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DLN: 93493320006396

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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

Return of Organization Exempt From Income Tax

▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u>

Δ F	or the 20	015 ca	llendar vear or tax vear heginn	ing 01-01-2015 , and ending 12-31-20	015			
	eck if appl		C Name of organization	, and chang 12 31 2	J13	D Emplo	yer ic	lentification number
_	ddress cha		MIDWAY USA FOUNDATION INC			26-1	5730	R R
_ N	lame chan	ge	Doing business as				3730	00
	nitial return	1						
F return	ınal ı/termınate	ed		mail is not delivered to street address) Room/	suite	E Teleph	one nu	ımber
Ar	mended ret	turn	6001 W VAN HORN TAVERN RD NO			(573	447	-5957
∏A‡	pplication p	ending	City or town, state or province, co COLUMBIA, MO 65203	untry, and ZIP or foreign postal code		C Cross	racount	s \$ 66,243,200
			C Name and address of princ	unal officer	1			
			F Name and address of princ RICHARD LEEPER	ipai officer		Is this a group		rn for ☐ Yes 🔽
			6001 W VAN HORN TAVERN	N RD NO STE C		subordinates? No		, ,
Ta	x-exempt	status	COLUMBIA, MO 65203			Are all subord included?	ınate	Yes No
			▼ 501(c)(3)				n a lis	t (see instructions)
	ebsite: I	► ww	/W MIDWAYUSAFOUNDATIO	NORG	H(c)	Group exemp	tion n	umber ▶
K For	m of organ	nızatıon	Corporation Trust Assoc	ciation Other ►	L Year	r of formation 2		M State of legal domicile MO
Da	rt I	Sum	mary					
- 6			•	on or most significant activities				
	WE	HELP	COMMUNITIES AND ORGAN	IZATIONS RAISE FUNDS TO SUPPO				
a)	I		SE COMMUNITIES AND ORGA) RELATED ACTIVITIES WE ALSO M ANIZATIONS	ANAGED	ONOR DESIG	INAII	ED ENDOWED FUNDS
Š								
Ē	-							
Governance	2 Ch	eck th	nis box 🕨 🥅 if the organization (discontinued its operations or disposed	d of more ti	han 25% of it	s net	assets
			1 -	· · ·				
Activities &	3 Nu	mber	of voting members of the govern	ning body (Part VI, line 1a)			3	11
Ĭ			of independent voting members	•		4	11	
Act				calendar year 2015 (Part V, line 2a)			5	12
			•	necessary)			6	0
				Part VIII, column (C), line 12 rom Form 990-T, line 34				0
	B itec	um cic	acca pasmess canasie meeme n	, , , , , , , , , , , , , , , , , , ,		Prior Year	1 75	Current Year
	8	Contri	ibutions and grants (Part VIII,	line 1h)		25,376	0 1,908,31	
Ē		9 Program service revenue (Part VIII, line 2g)					0	(
enuave	10	Inves	tment income (Part VIII, colun	9,834	,665	1,908,319		
ď	11	Other	revenue (Part VIII, column (A		3	,422	24,542	
		Total 12)	revenue—add lines 8 through 1	1 (must equal Part VIII, column (A), li	ne	35,214	,550	19,740,681
	+		s and similar amounts haid (Pai	rt IX, column (A), lines 1-3)		2,754	138	3,739,745
			its paid to or for members (Part		`. 	27, 31,	0	37, 337, 13
			es, other compensation, employ		750,598		898,066	
Expenses		5-10	•			730		0 3 0 ,0 0 0
9			ssional fundraising fees (Part II		•		0	(
₫			undraising expenses (Part IX, column (621	412	F0.6 F0.6
				, lines 11a-11d, 11f-24e) ust equal Part IX, column (A), line 25)	•	4,126		586,589 5,224,400
				e 18 from line 12		31,088	_	14,516,281
ج ج و ج	<u> </u>		,			ing of Current		End of Year
Net Assets or Fund Balances					beginn			
Ass. I Bal			assets (Part X, line 16)			78,919		90,358,327
ž Š			liabilities (Part X, line 26) .		•	79.911		82,384
			ssets or fund balances Subtrac l ature Block	t line 21 from line 20		78,811	,810	90,275,943
				xamined this return, including accompa	inying sch	edules and st	ateme	ents, and to the best of
	_		belief, it is true, correct, and co nowledge	mplete Declaration of preparer (other	than office	r) is based or	allın	formation of which
	41011105	any Ki						
		****				2016-10-11		
Sigi		-	ature of officer			Date		
Her	ا		HARD LEEPER PRESIDENT e or print name and title					
			Print/Type preparer's name	Preparer's signature	Date		PTIN	
Pai	d	DEBRA K MATHES DEBRA K MATHES				Check ıf self-employed		948945
	parer	⊢	Firm's name WILLIAMS-KEEPERS I			Fırm's EIN ▶ △		
	Only	F	Firm's address > 2005 WEST BROADW	AY SUITE 100		Phone no (57	3) 442	-6171
	y		COLUMBIA, MO 6520					

✓Yes No

orm	990 (2015)			Page 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 💆	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? ${\mathfrak B}$	2	Yes	
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>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-197$ If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III "	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🐿	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	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? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11 c	Yes	
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11 d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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>	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
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</i> "Yes," complete Schedule F, Parts III and IV	16		No
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)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	IV Checklist of Required Schedules (contil	nued,
21	Did the organization report more than \$5,000 of grants of	roth

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Pa	rt IV Checklist of Required Schedules (continued)	
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? If "Yes," complete Schedule I, Parts I and II	21
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part	

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? If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

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

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

member of any of these persons? If "Yes," complete Schedule L, Part III

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

Yes

Yes

23

24a

24b

24c

24d

25a

25b

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28a

28h

28c

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Yes

Form 990 (2015)

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Dart V	Statements	Pegarding	Other	TDS	Filings	and :	Tav	Compliance
	Julellellis	neuai uiiiu	Other	143	I IIIIIU3	anu	101	Combinance

Pai	t 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			
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 3		Yes	No
		the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did th	ne organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gamın	ng (gambling) winnings to prize winners?	1c	Yes	
2a		the number of employees reported on Form W-3, Transmittal of Wage and statements, filed for the calendar year ending with or within the year covered			
		s return			
b		east one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
32		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) ne organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
		s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		110
		y time during the calendar year, did the organization have an interest in, or a signature or other authority			
		a financial account in a foreign country (such as a bank account, securities account, or other financial int)?	4a		No
ь		es," enter the name of the foreign country			
		nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAF	· ·			
		he organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Ye	rs," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6 a		the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
h	_	ization solicit any contributions that were not tax deductible as charitable contributions?			
U		not tax deductible?	6b		
7	-	nizations that may receive deductible contributions under section 170(c).			
а		ne organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ces provided to the payor?	7a		No
		s," did the organization notify the donor of the value of the goods or services provided?	7b		
С		ne organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7 c		No
d	If"Ye	s," indicate the number of Forms 8282 filed during the year			
e	Dıd th	ne organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g		organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
h	requir	red?	7g		
"		1098-C?	7h		
8	Did a	soring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess business holdings at any time			
0-	_	g the year?	8 9a		
		ne sponsoring organization make any taxable distributions under section 4966?	9a 9b		
10		on 501(c)(7) organizations. Enter	70		
		tion fees and capital contributions included on Part VIII, line 12 10a			
b		receipts, included on Form 990, Part VIII, line 12, for public use of club			
11	facilit Section	on 501(c)(12) organizations. Enter	1		
		s income from members or shareholders			
b		income from other sources (Do not net amounts due or paid to other sources			
	_	st amounts due or received from them)........... <mark>11b</mark>			
		on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Ye year	s," enter the amount of tax-exempt interest received or accrued during the			
13	•	on 501(c)(29) qualified nonprofit health insurance issuers.			
а		e organization licensed to issue qualified health plans in more than one state? Note. See the instructions for onal information the organization must report on Schedule O	13a		
b		the amount of reserves the organization is required to maintain by the states			
		ch the organization is licensed to issue qualified health plans			
		the amount of reserves on hand	 		NI -
		ne organization receive any payments for indoor tanning services during the tax year?	14a 14b		No
	I. I.C	1. The is most a form 120 to report these payments in mo, provide an explanation in schedule 0.	_ 75		

orm	990 (2	2015)					Page (
Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No describe the circumstances, processes, or changes in Schedule O.			or 10)b belo	w,
<u> </u>	-4!	Check if Schedule O contains a response or note to any line in this Part VI				<u> </u>	<u></u> ▼
Se	ction	A. Governing Body and Management				Yes	No
1a	Enter year	the number of voting members of the governing body at the end of the tax	1a	11		165	NO
	If ther body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee illar committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are endent	1b	11			
2		ny officer, director, trustee, or key employee have a family relationship or a bu officer, director, trustee, or key employee?			2	Yes	
3		e organization delegate control over management duties customarily performivision of officers, directors or trustees, or key employees to a management co			3		No
4		e organization make any significant changes to its governing documents sinc	e the p	•	4		No
5		e organization become aware during the year of a significant diversion of the c		ation's assets?	5		No
6		e organization have members or stockholders?			6		No
	Dıd th	e organization have members, stockholders, or other persons who had the power members of the governing body?			7a		No
b	A re ar	ny governance decisions of the organization reserved to (or subject to approvious of the governing body?	al by) ı	members, stockholders,			No
8	Did th	e organization contemporaneously document the meetings held or written act by the following					
а		overning body?			8a	Yes	
	_	committee with authority to act on behalf of the governing body?			8b	Yes	
	Is the	re any officer, director, trustee, or key employee listed in Part VII, Section A ization's mailing address? If "Yes," provide the names and addresses in Schedul	, who c	annot be reached at the			No
Se		B. Policies (This Section B requests information about policies not				ue Cod	
				,		Yes	No
10a	Did th	e organization have local chapters, branches, or affiliates?			10a		No
b		s," did the organization have written policies and procedures governing the ac ies, and branches to ensure their operations are consistent with the organizat			10b		
11a	Has th	ne organization provided a complete copy of this Form 990 to all members of i	_	erning body before filing	11a	Yes	
b	Descr	ibe in Schedule O the process, if any, used by the organization to review this	Form 9	990			
12a	Did th	e organization have a written conflict of interest policy? If "No," go to line 13			12 a	Yes	
b		officers, directors, or trustees, and key employees required to disclose annua o conflicts?	,		12b	Yes	
c		e organization regularly and consistently monitor and enforce compliance with edule O how this was done			12 c	Yes	
13	Did th	e organization have a written whistleblower policy?			13	Yes	
14	Did th	e organization have a written document retention and destruction policy? $$.			14		No
15		e process for determining compensation of the following persons include a revendent persons, comparability data, and contemporaneous substantiation of t					
а	The or	rganization's CEO, Executive Director, or top management official			15a		No
b	Other	officers or key employees of the organization			15b		No
	If"Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a		e organization invest in, contribute assets to, or participate in a joint venture le entity during the year?	or sım	ılar arrangement with a	16 a		No
b	If "Ye:	s," did the organization follow a written policy or procedure requiring the organ ipation in joint venture arrangements under applicable federal tax law, and tak ization's exempt status with respect to such arrangements?	e step	s to safeguard the	16b		
Se	ction	C. Disclosure					<u> </u>
17		ne States with which a copy of this Form 990 is required to be filed AL , AK , IN , IA , NE , NV ,	KS , K` , NH , I	R , CA , CO , CT , DE , l Y , ME , MD , MA , MI , M NM , NJ , NC , ND , OH , X , UT , VT , VI , WA , V	1N , MS	S,MO, DR,PA	MT, ,RI,

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Describe in 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

State the name, address, and telephone number of the person who possesses the organization's books and records ►RANDY MOELLER 6001 WEST VAN HORN TAVERN ROAD COLUMBIA, MO 65203 (573) 447-5157

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

for related organizations below dotted line)	individi or direc	-5			x, unle n offic rustee	er	compensation from the organization	compensation from related organizations	(F) Estimated amount of other compensation
	ual trustee otor	Key employee Officer Institutional Trustee Individual trustee or director		Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
2 00	x		х				0	0	ı
1 00	×		×				0	0	
1 00	×		х				0	0	
1 00	х						0	0	1
1 00	x						0	0	
1 00	×						0	0	
1 00	×						0	0	
1 00	×						0	0	I
1 00	×						0	0	
1 00	×						0	0	
1 00	×						0	0	
40 00			х				66,902	0	
40 00			х				155,769	0	
	1 00 1 00 1 00 1 00 1 00 1 00 1 00 1 00	200 X 100 X	2 00 X 1 00 X	200 X X X 100 X X 100 X X 100 X	2 00	200 X X X X	200 X X X X	200	200 X X X 0 0 0

art VII	Section A. Officers,	Directors,	Trustees, Ke	y Employees,	and Highest	Compensated Employees	(continued)

	(A) Name and Title	(B) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee		2/1099-M13C)	2/1099-MI3C)	related organizations
1b	Sub-Total			٠.			•				·
c d	Total from continuation sheet Total (add lines 1b and 1c) .	·		· .	٠.	٠.	. •		222,671	0	0
2	Total number of individuals (in \$100,000 of reportable compa	icluding but not	limited 1				d abov	e) wl	ho received more th	an	

- 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee
 - on line 1a? If "Yes," complete Schedule J for such individual .
 - 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? If "Yes," complete Schedule J for such ındıvıdual .
- Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person . . .

3		No
4	Yes	
5		No

Yes

No

Section B. Independent Contractors

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	ensation 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							

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

Form 99								Page 9
Part V	1 1	Statement o						_
		Check if Schedu	ule O contains a respon	se or note to any III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s ts	1a	Federated camp	paigns 1a					
ons, Gifts, Grants Similar Amounts	ь	Membership du	es 1b					
ج آ	c	Fundraising eve	ents 1c					
ifts. ar ⊉	d	Related organiz	ations 1d					
 E	e	Government grants	s (contributions) 1e					
ons Sil	l f	All other contribution	ons, gifts, grants, and 1f	17,807,820				
Contributions, Gifts, and Other Similar A		sımılar amounts no						
	g	1a-1f \$	ons included in lines	2,623,154				
Cont and	h	Total. Add lines	s 1a-1f	· · · •	17,807,820			
<u> 1</u>				Business Code				
Program Service Revenue	2a							
å	b							
Š	C							
₹	d e							
ran	f	All other progra	ım service revenue					
y og								
	g 3		s 2a-2f ome (including dividend					
		and other simila	aramounts)		1,817,049			1,817,049
	4		tment of tax-exempt bond p	roceeds >				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	(i) iteu.	(11) 1 213 2114				
	ь	Less rental						
	_ ر	expenses Rental income						
	d	or (loss)	me or (loss)					
	"	Wee remainment	(i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	45,379,105	1,214,084				
	ь	Less cost or	45 226 240	1 275 670				
		other basis and sales expenses	45,226,249	1,275,670				
	c d	Gain or (loss)	152,856 s)	-61,586	91,270			91,270
Other Revenue		Gross income fi events (not incl \$	rom fundraising luding reported on line 1c)					·
ē			a	24,900				
€			penses b	600	24 200			24 200
	9a		I	events •	24,300			24,300
	ь	less directevi	a penses b					
	l		loss) from gaming activ	rities				
	10a	Gross sales of	inventory less	•				
		returns and allo	owances . a					
	b c	Less cost of go	oods sold . . b [loss) from sales of inve	ntory -				
	٣	Miscellaneous	<u> </u>	Business Code				
	11a		G ALLOWANCES	900099	242			242
	ь							
	c							
	d	All other revenu	L					
	е	Total. Add lines		· · · •	242			
	12	Total revenue.	See Instructions		19,740,681	0	0	1,932,861

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)

	Γ				
	ot include amounts reported on lines 6b, o, 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	3,739,745	3,739,745		
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	215,417	145,320	21,542	48,555
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	555,796	250,108	250,108	55,580
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	18,528	9,449	6,485	2,594
9	Other employee benefits	53,139	27,101	18,599	7,439
10	Payroll taxes				
		55,186	28,145	19,315	7,726
11	Fees for services (non-employees)				
а	Management				
b	Legal	4,440		4,440	
С	Accounting	23,923		23,923	_
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				_
f	Investment management fees	225,867	225,867		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	6,368	1,863	4,184	321
13	Office expenses	43,420	32,125	10,510	785
14	Information technology	24,768	12,632	8,669	3,467
15	Royalties				
16	Occupancy	163,941	73,373	58,522	32,046
17	Travel	25,917	15,378	830	9,709
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,887	4,023	2,760	1,104
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	41,297	21,061	14,454	5,782
23	Insurance	8,584	4,378	3,004	1,202
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	STATE RENEWAL FEES	6,295		3,147	3,148
b	CREDIT CARD FEES	3,315	3,315		
C	EMPLOYMENT EXPENSES	543	277	190	76
d	BANK CHARGES	24		24	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	5,224,400	4,594,160	450,706	179,534
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Dart Y	Ralance	Shoot

orm 9	990 (2	2015)			Page 11
Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	<u> </u>		
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	124,316	1	189,752
	2	Savings and temporary cash investments	2,397,632	2	5,793,908
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	8,503
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
				5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
-	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	564,922	9	694,129
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 27,73	,		001,120
	ь	Less accumulated depreciation 10b 18,06	7 87,233	10 c	9,672
	11	Investments—publicly traded securities	6,116,767	11	6,523,109
	12	Investments—other securities—See Part IV, line 11	686,956	12	763,266
	13	Investments—program-related See Part IV, line 11	68,941,861	13	76,375,988
	14	Intangible assets	00,011,001	14	10,010,000
	15	Other assets See Part IV, line 11		15	
	16	Total assets.Add lines 1 through 15 (must equal line 34)	78,919,687	16	90,358,327
	17	Accounts payable and accrued expenses	107,877	17	82,384
	18	Grants payable	101,011	18	02,001
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		21	
<u></u>		persons Complete Part II of Schedule L		22	
Liabilit	23	Secured mortgages and notes payable to unrelated third parties		23	
_	24	Unsecured notes and loans payable to unrelated third parties		24	
	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			
				25	20.55
	26	Total liabilities. Add lines 17 through 25	107,877	26	82,384
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶			
<u>a</u>	27	Unrestricted net assets	78,811,810	27	90,275,943
ထိ	28	Temporarily restricted net assets		28	
2	29	Permanently restricted net assets		29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ts .	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	78,811,810	33	90,275,943
_	34	Total liabilities and net assets/fund balances	78,919,687	34	90,358,327
	L		1 . 3,5 15,501	- 1	25,555,527

19,740,681

5,224,400

14,516,281

78,811,810

-3,052,148

90,275,943

No

Νo

Νo

Nο

Form 990 (2015)

Reconcilliation of Net Assets

			Che	eck	ıf S	3ch	ed	ule	0	C	on	tā	11	าร	a	re	s p	С
_	_									_			_					

Total revenue (must equal Part VIII, column (A), line 12)

Total expenses (must equal Part IX, column (A), line 25) . . .

Revenue less expenses Subtract line 2 from line 1 . . . Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

Net unrealized gains (losses) on investments . . . Donated services and use of facilities .

Other changes in net assets or fund balances (explain in Schedule O) .

Part XIII Financial Statements and Reporting

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, 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 COther If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Both consolidated and separate basis

Separate basis Consolidated basis **b** Were the organization's financial statements audited by an independent accountant?

Schedule O

Investment expenses

column (B))

Prior period adjustments .

basis, consolidated basis, or both 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?

Single Audit Act and OMB Circular A-133?

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

Consolidated basis

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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 in Schedule O and describe any steps taken to undergo such audits

Both consolidated and separate basis

1

2

3

4

5

6

7

8

9

10

2b

2c

3a

3b

2a

Yes

Yes

hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

described in section 170(b)(1)(A)(vi). (Complete Part II)

Employer identification number

26-1573088

SCHEDULE A (Form 990 or 990EZ)

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization that normally receives a substantial part of its support from a governmental unit or from the general public

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**. A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

2015
Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization

Part I

2 3

MIDWAY USA FOUNDATION INC

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at <u>www.irs.gov/form990</u>.

8	Г	A community trust des	scribed in sect	tion 170(b)(1)(A)(vi)	(Complete Par	rt II)							
9	▽	An organization that normally receives (1) more than 331/3% 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 331/3% 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 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4).											
11	<u> </u>	An organization organione or more publicly s	ized and opera upported orga	ated exclusively for the nizations described in	e benefit of, to p section 509(a	perform the fu)(1) or sectio	inctions of, or to carry on 509(a)(2) See sectio ed complete lines 11e, 1	n 509(a)(3). Check					
а	Г	supported organization organization You mus	n(s) the power t complete Pa	to regularly appoint o	r elect a majóri B.	ty of the dire	organization(s), typical ctors or trustees of the	supporting					
b		management of the su must complete Part IV	pporting organ	nization vested in the sand C.	same persons t	hat control o	ported organization(s), but manage the supported	organization(s) You					
С							th, and functionally integ	grated with, its					
d e	Г	supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally											
_		integrated, or Type III		, , , , , , , , , , , , , , , , , , , ,									
f	Enter	the number of support	9										
g		Provide the following i	nformation ab	out the supported orga	inization(s)								
Nan	(i) Name of supported organization		(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the orga Iisted in your docume	nızatıon governıng	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)					
					Yes	No							
Tota													
For P	aperw	ork Reduction Act Noti	ice, see the In	structions for Form 99	00 or 990EZ.	Cat No 11		990 or 990-EZ) 2015					

	edule A (Form 990 of 990-EZ) 2013						Page Z		
Pā	Support Schedule fo								
	(Complete only if you of Part III. If the organization								
S	ection A. Public Support	acion falls to qu	iamy under the	tests listed bei	ow, piedse con	ipiete Fait III.)		
	Calendar year						1		
(or	fiscal year beginning in)	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f) Total		
•	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								
5	ection B. Total Support		Τ	Т	ı	T			
/or	Calendar year fiscal year beginning in) ▶	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f) ⊤otal		
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)								
L1	Total support. Add lines 7								
12	through 10 [Gross receipts from related activiti	es etc (see inst	ructions)			12			
13	First five years.If the Form 990 is		•	thurd fourth or t	fifth tay year ac a		3) organization		
	check this box and stop here	3	•		•	``	5) organización,		
S	ection C. Computation of Pul	olic Support F	Percentage						
14	Public support percentage for 2015			11, column (f))		14			
15	Public support percentage for 2014	1 Schedule A , Pa	rt II, line 14			15			
L6a	33 1/3% support test—2015. If the	organization did	not check the box	on line 13, and l	line 14 is 33 1/3%		this box		
	and stop here. The organization qua	-		•	•	•	▶□		
b	33 1/3% support test—2014. If the				, and line 15 is 3	3 1/3% or more, o	heck this		
	box and stop here. The organizatio						▶┌		
L7a	10%-facts-and-circumstances test	_				•			
	is 10% or more, and if the organiza								
	In Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported								
h	organization 10%-facts-and-circumstances test		anization did nat	shock a how on lin	0 12 16 3 16 4	or 17a and line	▶		
U	15 is 10% or more, and if the organ								
	Explain in Part VI how the organiza				,	•	clv		
	supported organization						▶ [
18	Private foundation. If the organizat	ion did not check	a box on line 13	, 16a, 16b, 17a, c	or 17b, check thi	s box and see			
	instructions				•		▶┌		
							'		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part

	II. If the organizatio	n fails to qualify	y under the test	s listed below,	please comple	te Part II.)	ander rune
Se	ction A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e)2015	(f) Total
	iscal year beginning in)	(4)2011	(5)2012	(0)2013	(4)2011	(0)2013	(1)10ta1
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	7,053,330	17,908,990	25,290,703	25,376,463	17,807,820	93,437,30
_	grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in any activity that is related to						
	the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
7	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	7,053,330	17,908,990	25,290,703	25,376,463	17,807,820	93,437,30
	Amounts included on lines 1, 2,	4,062,340	11,949,223	11,568,000	7,996,196	7,736,715	43,312,47
	and 3 received from disqualified persons	4,002,340	11,545,223	11,368,000	7,990,190	7,730,713	43,312,47
b	Amounts included on lines 2 and						
	3 received from other than disqualified persons that exceed						
	the greater of \$5,000 or 1% of						1
	the amount on line 13 for the						
	year	4 050 040	11.010.000	14 550 000	7.005.405	7 706 745	10.010.17
	Add lines 7a and 7b Public support. (Subtract line 7c	4,062,340	11,949,223	11,568,000	7,996,196	7,736,715	43,312,47
8	from line 6)						50,124,83
Se	ction B. Total Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) ⊤otal
ог і 9	iscal year beginning in) ► A mounts from line 6	7,053,330	17,908,990	25,290,703	25,376,463	17,807,820	93,437,30
э 0а	Gross income from interest,	7,055,550	17,500,550	23,230,703	25,570,405	17,007,020	75,457,50
Va	dividends, payments received						
	on securities loans, rents,	44,008	253,653	872,446	1,700,258	1,817,049	4,687,41
	royalties and income from						
b	sımılar sources Unrelated busıness taxable						
ט	income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b	44,008	253,653	872,446	1,700,258	1,817,049	4,687,41
.1	Net income from unrelated business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
.2	Other income Do not include						
	gain or loss from the sale of			220	22	242	484
	capital assets (Explain in Part VI)						
.3	Total support. (Add lines 9,	7,097,338	18,162,643	26,163,369	27,076,743	19,625,111	98,125,20
.4	10c, 11, and 12) First five years.If the Form 990 is	for the organization	l on's first, second,	thırd, fourth, or fı		section 501(c)(3) organization,
	check this box and stop here						▶ □
Se	ction C. Computation of Pul						
.5	Public support percentage for 201	5 (line 8, column	(f) divided by line	13, column (f))		15	51 080 %
.6	Public support percentage from 20		·			16	50 820 %
Se	ction D. Computation of Inv	estment Inco	me Percentag	je			

	section by compatition of investment income referringe		
17	Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	4 780 %
18	Investment income percentage from 2014 Schedule A, Part III, line 17	18	3 660 %

19a 33 1/3% support tests—2015.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

33 1/3% support tests—2014. 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

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 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and complete Part V.)

	I, complete Sections A and D, and complete Part V)			
Se	ction A. All Supporting Organizations			
	Averally of the community of community of community of community of the community of community o		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section	2		
	509(a)(1) or (2)			<u> </u>
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	3 c		
4a	If "Yes," explain in Part VI what controls the organization put in place to ensure such use Was any supported organization not organized in the United States ("foreign supported organization")?			l
	If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?	4b		
	If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations			
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4c		
	organization was used exclusively for section 170(c)(2)(B) purposes			l
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in	5b		
c	the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	J.		
	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9 c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10 b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11 a		
	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		

Part IV	Supporting	Organizations	(continued

I GIC IV		аррог	9	Oi guilleu	LIOIIS	(continue	ч,
Section	n R	Tyne	T Si	innorting	Orga	nization	_

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

Section C. Type II Supporting Organization	Section	C.	Type	II	Supporting	Organization	s
--	---------	----	------	----	------------	--------------	---

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

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

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satis	fy the Integral Part Test during the year (see instructions)

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

С		i ne orga instructi	nization supported a governmental entity. Describe in Part VI now you supported a government entity (see ons)	эe
2	<u>A ctivit</u>	ies Test	_Answer (a) and (b) below.	Y
а			all of the organization's activities during the tax year directly further the exempt purposes of the	

	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a	
	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	
3	Parent of Supported Organizations Answer (a) and (b) below.		

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of 3a each of the supported organizations? Provide details in Part VI
- **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
i	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		
,	Other expenses (see instructions)	7		
;	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)
	Aggregate fair market value of all non-exempt-use assets (see	1		
_	instructions for short tax year or assets held for part of year)	—		
a L	A verage monthly value of securities	1a 1b		
b	A verage monthly cash balances			
C	Fair market value of other non-exempt-use assets	1c 1d		+
d	Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors	La		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)			
Section D - Distributions			Current Year			
1 Amounts paid to supported organizations to accom	plish exempt purposes					
2 A mounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	ported organizations, in				
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons				
4 Amounts paid to acquire exempt-use assets	Amounts paid to acquire exempt-use assets					
5 Qualified set-aside amounts (prior IRS approval rec	quired)					
6 Other distributions (describe in Part VI) See instru	ictions					
·	20010115					
7 Total annual distributions. Add lines 1 through 6						
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide				
9 Distributable amount for 2015 from Section C, line	6					
10 Line 8 amount divided by Line 9 amount						
		T	T			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015			
1 Distributable amount for 2015 from Section C, line 6						
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)						
3 Excess distributions carryover, if any, to 2015						
a						
b						
<u>c</u>						
d From 2013						
e From 2014						
f Total of lines 3a through e g Applied to underdistributions of prior years						
h Applied to 2015 distributable amount						
i Carryover from 2010 not applied (see instructions)						
j Remainder Subtract lines 3g, 3h, and 3i from 3f						
4 Distributions for 2015 from Section D, line 7 \$						
Applied to underdistributions of prior years						
b Applied to 2015 distributable amount						
c Remainder Subtract lines 4a and 4b from 4						
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)						
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)						
7 Excess distributions carryover to 2016. Add lines 31 and 4c						
8 Breakdown of line 7						
a						
b						
c Excess from 2013						
d From 2014						
e From 2015						
			(F 000 000 F7) /2.01 F			

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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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2015

DLN: 93493320006396

Open to Public Inspection

Department of the Treasury
Internal Revenue Ser
Name of the org

SCHEDULE D

(Form 990)

ernal Reve	enue Service	(1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		.,, ,		ізресцоп
	the organization 5A FOUNDATION INC			Emplo	oyer identification	n number
IDWAI O.	SA FOUNDATION INC			26-1	573088	
art I	Organizations Maintaining Donor Complete of the organization answer	Advised Funds or Other Sed "Yes" on Form 990, Part IV	Similar Fu , line 6.			
		(a) Donor advised funds	•	(b)	unds and other a	ccounts
To	otal number at end of year					
-	ggregate value of contributions to (during ear)					
Αg	ggregate value of grants from (during year)					
Ag	ggregate value at end of year					
	the organization inform all donors and donor s are the organization's property, subject to			radvıs		_ Yes
used	the organization inform all grantees, donors, only for charitable purposes and not for the erring impermissible private benefit?				· · · · <u> </u>	_ Yes
art II	Conservation Easements. Comple	ete if the organization answere	ed "Yes" or	Form	n 990, Part IV, l	ine 7.
Purp	ose(s) of conservation easements held by th	e organization (check all that appl	ly)			
	Preservation of land for public use (e g , recr ation)		rvation of an	hıstorı	cally important la	nd area
	Protection of natural habitat	Preser	rvation of a c	ertified	d historic structur	e
	Preservation of open space					
	plete lines 2a through 2d if the organization ment on the last day of the tax year	held a qualified conservation conti	rıbutıon ın th	e form	of a conservation	
					Held at the En	d of the Year
-	I number of conservation easements			2a		
	l acreage restricted by conservation easeme			2b		
=	ber of conservation easements on a certified	` ,		2c		
	ber of conservation easements included in (oric structure listed in the National Register	c) acquired after 8/17/06, and not	on a	2d		
Num	ber of conservation easements modified, tra	nsferred, released, extinguished, o	r terminated	l by the	e organızatıon dur	ng the
tax y	⁄ear ▶					
Num	ber of states where property subject to cons	ervation easement is located 🛌		_		
	the organization have a written policy regain tions, and enforcement of the conservation (ection, handl	ıng of	☐ Yes	∏ No
Staff year	and volunteer hours devoted to monitoring,	inspecting, handling of violations,	and enforcin	g cons	ervation easemer	its during the
▶						
A mo ► \$	unt of expenses incurred in monitoring, insp	ecting, handling of violations , and ϵ	enforcing co	nserva	tion easements d	uring the year
	s each conservation easement reported on li) and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirem	ents of sect	ion 17	0(h)(4) Yes	□ No
	art XIII, describe how the organization repor				se statement, and	

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

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
 - If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

the organization's accounting for conservation easements

- (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a Revenue included on Form 990, Part VIII, line 1
 - ► \$
- For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Par	t III	Organizations Maintaining (continued)	Collections of A	rt, His	torio	al Tr	reas	ures, or (Othe	r Similar A	sset	:s	
3		the organization's acquisition, accetion items (check all that apply)	ession, and other rec	ords,ch	neck a	ny of t	he fo	llowing that	are a	sıgnıficant us	e of i	ts	
а		Public exhibition		d		Loan	or ex	change pro	grams	5			
b		Scholarly research		e	Г	O the	ır.						
c		Preservation for future generations											
4	Provi Part >	de a description of the organization's	s collections and exp	laın hov	w they	furthe	er the	organizatio	n's ex	empt purpose	ın		
5		g the year, did the organization solic s to be sold to raise funds rather the								nılar Ye s	5	_ No	
Pa	rt IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990,	Part I	V, lı	ne 9, or re	porte	ed an amoun	ıt on	Form	n 990,
1 a		e organization an agent, trustee, cus led on Form 990 , Part X?	todian or other interr	mediary	for co	ntribu	itions	or other as:	sets i	not Tye s	5	┌ No	
b	If"	Yes," explain the arrangement in Pa	art XIII and complete	e the fol	lowing	table				Am	ount		
c		ginning balance	•		_			10	.				
d		ditions during the year						1d					
e		tributions during the year						1e	:				
f		ding balance						1f					
2 a		ne organization include an amount of	n Form 990, Part X, I	ıne 21,	for es	crow o	rcus	todial accou	ınt lıa	ability? Ye s	5	□ No	
b	If"Ye	s," explain the arrangement in Part	XIII Check here if t	he e v nl:	anatio	n has	heen	provided in	Part '	XIII			П
Pa	rt V	Endowment Funds. Comple										<u> </u>	
		'	(a)Current year		or year			vo years back	 	hree years back		our yea	ars back
1a	Begir	nning of year balance											
b	Cont •	ributions · · · · · · · ·											
c	Netı losse	nvestment earnings, gains, and is											
d	Gran	ts or scholarships											
е		r expenditures for facilities irograms											
f	A dmı	nistrative expenses											
g		of year balance											
2	Provi	de the estimated percentage of the (current year end bala	nce (lın	e 1q,	colum	n (a)) held as		•			
а		designated or quasi-endowment >	,	,	٥.		. ,	•					
b		anent endowment											
С		orarily restricted endowment ► ercentages on lines 2a, 2b, and 2c	should equal 100%										
За		nere endowment funds not in the pos ization by	session of the organ	ızatıon	that a	re held	d and	administere	d for	the		Yes	No
		related organizations					•	•			(i)		
		lated organizations									(ii)		
ь 4		s" on 3a(II), are the related organization or Sartial Sartia Sartial Sartial Sartial Sartial Sartial Sartial S					•				3b		
	rt VI	Land, Buildings, and Equip		endowin	ent iu	iius							
		Complete if the organization a		orm 9	90, P	art IV	, lin	e 11a.See	Form	n 990, Part X	i, line	e 10.	
		Description of property		(a)		r other estmer		(b) Cost or other b (other)	asıs	Accumulated (c)depreciation		(d) Boo	k value
1a	Land							, ,	\dashv		\neg		
		gs							\dashv		\dashv		
		oold improvements		.					\neg				
		nent		.				25,	506	16,2	206		9,300
e	Other			⊢				2	233	1.5	861		372

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Part VII Investments—Other Securities. C See Form 990, Part X, line 12.	complete if the org	anization answered 'Yes'	on Form 990, Part IV, line 11b
(a) Description of security or catego (including name of security)	гу	(b) Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives			·
(2)Closely-held equity interests (3)Other			
•			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related.	•		
Complete if the organization answer	ed 'Yes' on Form 9	90, 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)AGENCY & TEAM INVESTMENTS-PUBLICLY TRA	DED SECURITIES	68,375,411	F
(2) AGENCY & TEAM INVESTMENTS-OTHER SECURITI	ES HEDGE FUNDS	8,000,577	F
Total. (Column (b) must equal Form 990, Part X, col (B) lin			•
Part X Other Liabilities. Complete if the o See Form 990, Part X, line 25.	rganızatıon answer	ed 'Yes' on Form 990, Pa	art IV, line 11e or 11f.
1. (a) Description of liability	(b) Book valu	ie	
Federal income taxes			
T-1-1 (Colonia (b.)	•		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, pro		otnote to the organization's	financial statements that reports th
2. Liability for uncertain tax positions. In Part XIII, pro organization's liability for uncertain tax positions under XIII			

Return Reference

Schedule D (Form 990) 2015

1

2

16,462,666

а	Net unrealized gains (losses) on investments 2a -3,052,148		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	-3,052,148
3	Subtract line 2e from line 1	3	19,514,814
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 225,867		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	225,867
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	19,740,681
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return.
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	_	Т
1	Total expenses and losses per audited financial statements	1	4,998,533
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments]	
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	4,998,533
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 225,867		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4c	225,867
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	5,224,400
		•	
Par	Supplemental Information		
Part	ride the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2 V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part t mation		de any additional

Explanation

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

Total revenue, gains, and other support per audited financial statements .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Schedule D (Form 990) 2015		Page !						
Part XIII Supplemental Information (continued)								
Return Reference	Explanation							

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

ame of the organization IDWAY USA FOUNDATION	INC	·					ntification number
						26-1573088	
Part I Fundraising Ad Form 990-EZ file	·		_	ation answered "Yes' his part.	' on Form	n 990, Part I\	/, line 17.
Indicate whether the orga	nızatıon raısed fur	nds throug	h any of th	ne following activities (heck all t	hat apply	
a Mail solicitations				e Solicitation of r	on-goverr	nment grants	
b Internet and email so	licitations			f Solicitation of g	jovernmen	nt grants	
c Phone solicitations				g	sıng event	S	
d In-person solicitation	าร						
Did the organization have or key employees listed is services? b If "Yes," list the ten high	n Form 990, Part V	II) or ent	ity in conf	nection with professiona	al fundrais	ıng Y	es No
to be compensated at lea				isers) parsuant to agre	errierres un	ider willen tile i	andraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) A ctivity	fundrai cust cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or re fundra	nount paid to etained by) iser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No				
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
otal			•				
3 List all states in which the registration or licensing	organization is reg	istered or	licensed t	co solicit contributions	or has bee	n notified it is	exempt from

	receipts greater than \$5,000	_	·		•
	fundraising event contribution		, ,	, ,	, ,
	Complete if the organization	n answered "Yes" on F	form 990, Part IV, line	e 18. or reported mor	e than \$15,000 of
Part II	Fundraising Events.				
	6 (Form 990 or 990-EZ) 2015				

	receipts greater than \$5,000).			
		(a)Event #1	(b) Event #2	(c)O ther events	(d) Total events (add col (a) through
		SPORTING SHOTGUN RAFFLE (event type)	(event type)	(total number)	col (c))
mie					
Revenue	1 Gross receipts	24,900			24,900
	2 Less Contributions				
	Gross income (line 1 minus	24,900			24,900
	4 Cash prizes				
	5 Noncash prizes	5,300			5,300
Se	6 Rent/facility costs				
Expenses	7 Food and beverages				
ă	8 Entertainment				
Direct	9 Other direct expenses	4 *	<u> </u>		5 200
	·	,	•		5,300
Par	11 Net income summary Subtract line 1 t III Gaming.	. o from line 3, column (c		<u>.</u>	19,600
	Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on F	Form 990, Part IV, line	19, or reported mo	re than \$15,000 on
Revenue		(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c)O ther gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1 Gross revenue				
ses	2 Cash prizes				
Expenses	3 Noncash prizes				
ಕ	4 Rent/facility costs				
ŌĽě	5 Other direct expenses				
	5 Other direct expenses				
	6 Volunteer labor	⊢ No	No No	No No	
	7 Direct expense summary Add lines	2 through 5 in column (c	1)		
	8 Net gaming income summary Subtra	act line 7 from line 1. col	umn (d)		
					1
9 a	Enter the state(s) in which the organiza Is the organization licensed to conduct				Yes No
b	If "No," explain	-			
10a	Were any of the organization's gaming l				
b	If "Yes," explain				

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493320006396 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number MIDWAY USA FOUNDATION INC 26-1573088 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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 Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (d) A mount of cash (a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table

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

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

169

Return Reference Explanation

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

Additional Data

BIG STONE COUNTY 4H

ORTONVILLE, MN 56278

SHOOTERS FOUNDATION

4010 WINCHESTER LOOP ANCHORAGE, AK 99507

THE MASSACHUSETTS

SHOOTING CLUB

11 SE 2ND ST

INC
PO BOX 777
UPTON,MA 01568
BORFALIS BUCKEYES

01-0888982

04-3095757

05-0542148

Software ID: Software Version:

EIN: 26-1573088

Name: MIDWAY USA FOUNDATION INC

0

62,150

8,701 COST

4,058 COST

11,203 COST

(h) Purpose of grant

AMMO/TRAVEL/RANGE

& COMPETITION FEES

AMMO/TRAVEL/RANGE

& COMPETITION FEES

AMMO/TRAVEL/RANGE

& COMPETITION FEES

or assistance

PROMOTIONAL ITEMS

PROMOTIONAL ITEMS

PROMOTIONAL ITEMS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)					

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) DUCKS UNLIMITED INC. 13-5643799 15.888 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE ONE WATERFOWL WAY & COMPETITION FEES MEMPHIS,TN 38120 8,572 UNIVERSITY OF MAINE 01-6000769 AMMO/TRAVEL/RANGE & COMPETITION FEES

AMMO/TRAVEL/RANGE

& COMPETITION FEES

23,579

SYSTEM ACTING THROUGH				&
THE UNIVERSITY OF MAINE				
OFFICE OF RESEARCH AND				
SPONSORED				
PROGRAMS				
ORONO.ME 046695717				

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

INDIANA YOUTH

SHOOTING SPORTS

13800 MARILYN RD NOBLESVILLE, IN 46060 20-1492428

(a) Name and address of (b) EIN (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance 20-4957336 5.138 MCKENZIE TRAP TEAM INC IAMMO/TRAVEL/RANGE 160 DEERWOOD CIRCLE & COMPETITION FEES MCKENZIE, TN 38201 20-5124230 5,498 NORTHERN KENTUCKY IAMMO/TRAVEL/RANGE SCHOLASTIC & COMPETITION FEES

TRAPSHOOTING TEAM 331 MADDOX ROAD ALEXANDRIA, KY 41001

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

20-5520926 31,012

TOWA SCHOLASTIC CLAY

TARGET ASSOCIATION

AMMO/TRAVEL/RANGE & COMPETITION FEES

220 NORTH PARK BLVD HUXLEY, IA 50124

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) CALIFORNIA JUNIOR 20-5666832 6,209 AMMO/TRAVEL/RANGE & COMPETITION FEES CLAYBREAKERS 21080 CENTRE POINT PARKWAY 101 SANTA CLARITA, CA 20-5960752 10,650 AMMO/TRAVEL/RANGE

9,764

& COMPETITION FEES

AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

91350
BUCKEYE OUTDOOR
YOUTH EDUCATION &
SHOOTING CENTER INC

DOYLESTOWN, OH 44230
GATEWAY CLAYBUSTERS

CHESTERFIELD, MO 63006

20-8171985

PO BOX 61

PO BOX 629

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance 20-8484121 59.480 1.755 COST PROMOTIONAL ITEMS SCHOLASTIC SHOOTING AMMO/TRAVEL/RANGE SPORTS FOUNDATION & COMPETITION FEES 5931 ROFT ROAD /TRAVEL/RANGE PETITION FEES

3,510 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

SAN ANTONIO,TX 78253					
FIN FUR AND FEATHER CLUB INC PO BOX 272	22-2885172	8,000	0		AMMO/T & COMPI

10,000

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

MILLIS, MA 02054

MONTANA 4-H

FOUNDATION INC.

111 TAYLOR HALL BOZEMAN, MT 59717 23-7051460

(a) Name and address of (b) EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) TAUNTON RIFLE AND 23-7083791 4.283 11,456 COST PROMOTIONAL ITEMS IAMMO/TRAVEL/RANGE & COMPETITION FEES PISTOL CLUB INC. 430 E BRITANNIA ST TAUNTON, MA 02780 PROMOTIONAL ITEMS SLIPPERY ROCK 23-7093388 2,772 4,058 COST AMMO/TRAVEL/RANGE UNIVERSITY FOUNDATION & COMPETITION FEES INC PO BOX 233

SLIPPERY ROCK, PA 16057

6,300

3,993 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

23-7228745 RIO SALADO SPORTSMAN'S CLUB INC

3960 N USERY PASS ROAD

MESA, AZ 85207

(a) Name and address of **(b)** EIN (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (d) A mount of cash (g) Description of organization ıf applıcable cash (book, FMV, appraisal non-cash assistance orassistance grant or government assistance other) 23-7429888 12.659 13.379 COST PROMOTIONAL ITEMS PALMYRA SPORTSMEN'S AMMO/TRAVEL/RANGE ASSOCIATION INC. & COMPETITION FEES PO BOX 142 DALMANDA DA 47070 TRAVEL/RANGE

PALMYRA,PA 1/0/8					
YOUTH SHOOTING SPORTS	26-0551145	58,685	0		AMMO/TRAVEL/RANGE
ALLIANCE					& COMPETITION FEES
11265 SUFFOLK DR					

5.146

AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

HAGGERSTOWN, MD 21742

324 G HASELWOOD ROAD

SUMMERSVILLE, KY 42782

SMOKIN DRAGONS

(a) Name and address of **(b)** EIN (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or aovernment other) assistance SCHS SHOOTING SPORTS 26-0838186 5.509 3.107 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE CLUB PARENTS GROUP & COMPETITION FEES 244 TICKLISH ROCK RD HUGHESVILLE, PA 17737 IPROMOTIONAL ITEMS ARIZONA OUTDOOR 26-2103623 9.145 4,561 COST AMMO/TRAVEL/RANGE SPORTS INC. & COMPETITION FEES 3627 S COTTONWOOD DR TEMPE, AZ 85282

PROMOTIONAL ITEMS WALLA WALLA GUN CLUB 26-3123618 6.686 9,248 COST AMMO/TRAVEL/RANGE

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

COMMUNITY SERVICE PRO JECT

PO BOX 133

WALLA WALLA, WA 99362

(a) Name and address of **(b)** EIN (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 26-3280207 15.031 UNIVERSITY OF KENTUCKY AMMO/TRAVEL/RANGE TRAP AND SKEET TEAM & COMPETITION FEES 213 FLORAL PARK LEVINGTON KY 40503 TRAVEL/RANGE

LEXINGTON, KT 40303					
CLEMSON SHOTGUN CLUB 272-C LEHOTSKY HALL CLEMSON,SC 29634	26-3390613	14,233	0	l .	AMMO/TF & COMPE

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

SHOOTING FOUNDATION

PO BOX 11802 ROCK HILL, SC 29731

ETITION FEES 7,508 COST PROMOTIONAL ITEMS SOUTH CAROLINA YOUTH 26-3594743 AMMO/TRAVEL/RANGE

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) TEXAS STATE RIFLE 26-4037053 21.454 220 COST PROMOTIONAL ITEMS IAMMO/TRAVEL/RANGE ASSOCIATION & COMPETITION FEES FOUNDATION 8411 N IH 35 AUSTIN, TX 78753 PROMOTIONAL ITEMS 26-4439244 8.393 999 COST IAMMO/TRAVEL/RANGE & COMPETITION FEES

MASON-DIXON CLAY BUSTERS INC 213 PINE STREET GLEN ROCK, PA 17327

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

26-4794108 5,902 292 COST PROMOTIONAL ITEMS TEAM HENGES PARENT

AMMO/TRAVEL/RANGE CLUB & COMPETITION FEES

2107 CASTLEBROOK DR

IMPERIAL, MO 63052

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance 27-1274741 6.008 COST PROMOTIONAL ITEMS SAN ANTONIO POLICE IAMMO/TRAVEL/RANGE & COMPETITION FEES OFFICER MARKSMANSHIP

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

UNION GROVE HIGH

SCHOOL TRAP TEAM

2630 SHEARD RD BURLINGTON, WI 53105 27-1897821

UNIT 572 MAGAZINE NEW BRAUNFELS,TX 78130					
CLAY FEATHERS 26321 HWY 141 COON RAPIDS,IA 50058	27-1316195	26,517	1,998	COST	AMMO/TRAVEL/RANGE & COMPETITION FEES

9,024

1,998 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

(b) EIN (h) Purpose of grant (g) Description of organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 27-2023084 9,488 RILEY CONSERVATION AMMO/TRAVEL/RANGE & COMPETITION FEES CLUBINC

(e) Amount of non- (f) Method of valuation

AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

(d) A mount of cash

(c) IRC section

PO BOX 101 RILEY,IN 47871					
LAKES AREA YOUTH TRAP CLUB	27-2361562	5,224	0		AMMO/TRAVEL/RANGE & COMPETITION FEES

8,763

1692 2/01H AVE SPIRIT LAKE, IA 51360

TUCSON, AZ 85712

SONORAN SHOTGUN CLUB

4425 E KLEINDALE ROAD

27-3339664

(a) Name and address of

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance PINCKNEYVILLE SHOOTING 27-3620283 5,360 IAMMO/TRAVEL/RANGE & COMPETITION FEES SPORTS 1104 S MAIN ST PINCKNEYVILLE, IL 62274 TRAVEL/RANGE PETITION FEES

GATEWAY GUN CLUB	27-4693540	5,812	2,218	COST	PROMOTIONAL ITEMS	AMMO/TI
YOUTH SHOOTERS INC		,	,			& СОМРЕ
412 CLAYMONT DR						
BALLWIN, MO 63011						

7,799

AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

CENTRAL FALCONS TRAP &

1043 N PRAIRIE DR SILVER LAKE, WI 53170

SKEET

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) OZAUKEE SCHOLASTIC 27-5317137 5.991 AMMO/TRAVEL/RANGE SHOOTING SPORTS & COMPETITION FEES 306 N MAPLE LANE SAUKVILLE.WI 53080 NGE FES

2,583 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

SKOKVILLE, MI 33000					
UNIVERSITY OF VERMONT AND STATE AGRICULTURAL	03-0179440	9,235	0		AMMO/TRAVEL/RAN & COMPETITION FE
COLLEGE 85 SOUTH PROSPECT					
STREET BURLINGTON,VT 05405					

4,690

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

STEPHEN T BADIN HIGH

571 NEW LONDON ROAD HAMILTON, OH 45013

SCHOOL

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) YOUTH TARGET 33-1206460 68,606 63.135 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE & COMPETITION FEES FOUNDATION 130 TIMBERLEAF CT DOUBLE OAK, TX 75077 TRAVEL/RANGE PETITION FEES

AMMO/TRAVEL/RANGE

& COMPETITION FEES

WILLIAMS COUNTY	34-1861426	7,711	0		AMMO/TI
SPORTSMAN'S EDUCATION					& COMPE
ASSOCIATION					
01521 NEY-WILLIAMS					
CENTER RD					
BRYAN,OH 43506					

10,512

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

CULVER EDUCATIONAL

FOUNDATION

1300 ACADEMY RD CULVER, IN 46511

(a) Name and address of (b) EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) ATTICA CONSOLIDATED 35-1071685 3,928 2.901 COST PROMOTIONAL ITEMS IAMMO/TRAVEL/RANGE SCHOOL CORPORATION & COMPETITION FEES 205 E SYCAMORE ST ATTICA, IN 47918 PROMOTIONAL ITEMS BISHOP DWENGER HIGH 35-1090327 12,615 999 COST AMMO/TRAVEL/RANGE SCHOOL & COMPETITION FEES 1300 F WASHINGTON CTR RD FORT WAYNE, IN 46825 PROMOTIONAL ITEMS

310

6,959 COST

AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

35-1914821

INDIANAPOLIS CHURCH OF

INDIANAPOLIS, IN 46254

CHRIST

6001 W 52ND ST

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) PURDUE UNIVERSITY 35-6002041 11,857 AMMO/TRAVEL/RANGE **401 S GRANT STREET** & COMPETITION FEES WEST LAFAYETTE, IN 479072024 AVEL/RANGE TITION FEES

AMMO/TRAVEL/RANGE

& COMPETITION FEES

NEBRASKA ONE BOX HABITAT ASSOCIATION	36-3388566	8,940	0		A MMO/TRA' & COMPETI
INC					
PO BOX 326					1
BROKEN BOW, NE 68822					

15,673

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

SOUTHERN ILLINOIS

3575 COLLEGE ROAD HARRISBURG, IL 62946

COLLEGE

(a) Name and address of **(b)** EIN (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance 37-1732642 7.356 1.291 COST PROMOTIONAL ITEMS COLVILLE SHOOTING AMMO/TRAVEL/RANGE & COMPETITION FEES STARS 2140 MARBLE VALLEY BASIN RD ADDY, WA 99101 PROMOTIONAL ITEMS SCHOOL DISTRICT #172 37-6002416 4.488 1.109 COST AMMO/TRAVEL/RANGE ADAMS COUNTY ILLINOIS & COMPETITION FEES 1416 MAINE

AMMO/TRAVEL/RANGE

& COMPETITION FEES

QUINCY,IL 62301

17,279

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

HILLSDALE COLLEGE

HILLSDALE, MI 49242

33 EAST COLLEGE STREET

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 38-1967343 5,368 WESTERN WAYNE COUNTY IAMMO/TRAVEL/RANGE & COMPETITION FEES CONSERVATION ASSOCIATION 6700 NAPIER ROAD PLYMOUTH, MI 48170 PROMOTIONAL ITEMS IAMMO/TRAVEL/RANGE

GEORGIA COMPETITIVE 38-3696125 6.948 45 COST SHOOTERS INC. & COMPETITION FEES

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

2500 W ELLIS RD GRIFFIN, GA 30223

MALAGA, WA 98828

WENATCHEE VALLEY SCTP 38-3908330 7,497 9,115 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE 3020 CONARTY ROAD & COMPETITION FEES

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) GRIMES COUNTY 4H 38-3916154 6,993 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE 203 VETERANS MEMORIAL & COMPETITION FEES DRIVE NAVASOTA,TX 77868 RAVEL/RANGE ETITION FEES

MARQUETTE UNIVERSITY HIGH SCHOOL 3401 WEST WISCONSIN AVENUE MILWAUKEE,WI 53208	39-0806826	12,649	999	COST		AMMO/TRAVEL/RANGE & COMPETITION FEES
HARTFORD	39-1054479	5,075	1,291	COST	PROMOTIONAL ITEMS	AMMO/TRAVEL/RANGE

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

CONSERVATION & GUN CLUBINC

6000 HWY 60 EAST HARTFORD, WI 53027

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) NORTHLAND PINES 39-1173350 3.683 2,335 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE SCHOOL DISTRICT & COMPETITION FEES 1800 PLEASURE ISLAND ROAD EAGLE RIVER, WI 54521 RAVEL/RANGE TITION FEES

BEAVER DAM CONSERVATIONISTS INC PO BOX 99 BEAVER DAM, WI 53916	39-1222554	8,317	2,997	COST		AMMO/TRA & COMPET
OSHKOSH AREA SCHOOL	39-1414354	3,393	4,041	соѕт	PROMOTIONAL ITEMS	AMMO/TRA

AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

DISTRICT

215 S EAGLE ST OSHKOSH, WI 54903

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (d) A mount of cash (a) Description of organization ıf applıcable cash (book, FMV, appraisal non-cash assistance or assistance grant or government assistance other) 4,909 513 COST PROMOTIONAL ITEMS SCHOOL DISTRICT OF 39-6002665 IAMMO/TRAVEL/RANGE & COMPETITION FEES HURON 644 BRAKKE DRIVE HUDSON, WI 540167909 PROMOTIONAL ITEMS JEFFERSON SPORTSMEN'S 39-6109532 8,318 292 COST AMMO/TRAVEL/RANGE & COMPETITION FEES CLUB

87.010 COST

PROMOTIONAL ITEMS

IAMMO/TRAVEL/RANGE & COMPETITION FEES

PO BOX 104 JEFFERSON, WI 53549

13.109

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

PHEASANTS FOREVER INC.

1783 BUERKLE CIRCLE ST PAUL, MN 55110

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) INDEPENDENT SCHOOL 41-6001661 4.148 1.109 COST PROMOTIONAL ITEMS IAMMO/TRAVEL/RANGE DISTRICT 332 & COMPETITION FEES 400 MAPLE AVENUE E MORA, MN 55051 INDEPENDENT SCHOOL 41-6008519 5,828 AMMO/TRAVEL/RANGE DISTRICT #834 & COMPETITION FEES 1875 GREELEY STREET SOUTH STILLWATER, MN 55082

41-6045110 606 6,216 COST PROMOTIONAL ITEMS ST THOMAS ACADEMY AMMO/TRAVEL/RANGE

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

949 MENDOTA HEIGHTS RD

MENDOTA HEIGHTS, MN

551201426

(a) Name and address of (b) EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) MU SHOOTING CLUB 42-1680662 24.054 IAMMO/TRAVEL/RANGE 213 ROTHWELL & COMPETITION FEES GYMNASIUM COLUMBIA, MO 65211 PROMOTIONAL ITEMS NORTHWOOD-KENSETT 42-6002974 3,109 1,950 COST AMMO/TRAVEL/RANGE COMMUNITY SCHOOL & COMPETITION FEES DISTRICT 1200 1ST AVE N NORTHWOOD, IA 50459 MONROF COUNTY 42-6004185 10,818

AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

CONSERVATION

10 BENTON AVE FAST ALBIA, IA 52531

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) OTTUMWA COMMUNITY 42-6037985 6,166 COST PROMOTIONAL ITEMS IAMMO/TRAVEL/RANGE & COMPETITION FEES SCHOOL DISTRICT 1112 N VAN BUREN OTTUMWA,IA 52501 FORT MADISON 42-6038970 8,352 AMMO/TRAVEL/RANGE COMMUNITY SCHOOL & COMPETITION FEES DISTRICT PO BOX 1423 FORT MADISON, IA 52627 WALPOLE SPORTSMAN'S 04-2936022 9,000 AMMO/TRAVEL/RANGE

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

ASSOCIATION

499 LINCOLN RD WALPOLE, MA 02081

(a) Name and address of (b) EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) LINDENWOOD FEMALE 43-0652649 21.879 AMMO/TRAVEL/RANGE COLLEGE & COMPETITION FEES 209 SOUTH KINGSHIGHWAY ST CHARLES, MO 63301 COLUMBIA FFA ALUMNI 43-1685130 7.800 AMMO/TRAVEL/RANGE ASSOCIATION & COMPETITION FEES 9325 LOGAN RD COLUMBIA, MO 65201 43-6003859 10,996 CURATORS OF THE AMMO/TRAVEL/RANGE

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

UNIVERSITY OF MISSOURI

1000 W NIFONG COLUMBIA, MO 65211

(a) Name and address of (b) EIN (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance 44-6001427 4.208 1.950 COST PROMOTIONAL ITEMS MARSHALL PUBLIC IAMMO/TRAVEL/RANGE & COMPETITION FEES SCHOOLS 860 WEST RAVEL/RANGE TITION FEES

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

MARSHALL,MO 65340						
BRANSON REORGANIZED SCHOOL DISTRICT R-IV	44-6004953		6,158	0		AMMO/TRA & COMPET
1756 BEE CREEK ROAD						
BDANSON MO 65616		1	1	1	1	l

6,086

2,290 COST

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

BRANSON, MO 65616

SCHOOL DISTRICT

100 E FRONT STREET ROGERSVILLE, MO 65742

LOGAN ROGERSVILLE R-8

(a) Name and address of (b) EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) NEW ENGLAND 45-0602316 13,265 AMMO/TRAVEL/RANGE INTERNATIONAL JUNIOR & COMPETITION FEES SHOOTING SPORTS INC 6 M STREET NEWBURRYPORT, MA 01950 DES MOINES AREA CLAY 45-3622626 5,118 AMMO/TRAVEL/RANGE CRUSHERS & COMPETITION FEES 125 SE KELLERMAN LANE WAUKEE, IA 50263 FLORIDA GATORS TRAP 45-3623552 6,326 AMMO/TRAVEL/RANGE

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

SKEET AND SPORTING

5202 NE 46TH AVE GAINESVILLE, FL 32069

TFAM

(a) Name and address of (b) EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (a) Description of organization if applicable cash (book, FMV, appraisal non-cash assistance or assistance grant or government assistance other) 10.602 20,603 COST PROMOTIONAL ITEMS THE X COUNT 45-4791946 IAMMO/TRAVEL/RANGE 5741 F 700 S & COMPETITION FEES COLUMBIA CITY, IN 46725 PROMOTIONAL ITEMS NEVADA SCHOLASTIC 14,466 10,994 COST 45-4986365 IAMMO/TRAVEL/RANGE CLAY TARGET PROGRAM & COMPETITION FEES 394 FLORA DR SPRING CREEK, NV 89815 BEN AVERY CLAY 45-5383343 11,934 AMMO/TRAVEL/RANGE CRUSHERS & COMPETITION FEES

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

17 E TANYA RD

DESERT HILLS, AZ 85086

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) WOODLAND TRAP CLUB 46-0766197 8.009 1.462 COST PROMOTIONAL ITEMS IAMMO/TRAVEL/RANGE 164 SUMMIT BUTTE RD & COMPETITION FEES WOODLAND, WA 98674 46-0788472 6.000 ARIZONA STATE IAMMO/TRAVEL/RANGE UNIVERSITY SHOOTING & COMPETITION FEES SPORTS PROMOTIONAL ITEMS 46-1014846 35,362 10,404 COST AMMO/TRAVEL/RANGE

1404 F DEL RIO DR TEMPE, AZ 85282 MONTANA SCHOLASTIC & COMPETITION FEES CLAY TARGET PROGRAM

1645 PARK HILL DR SUITE

BILLINGS, MT 59102

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance MASSACHUSETTS JUNIOR 46-1295070 3,375 2.335 COST PROMOTIONAL ITEMS IAMMO/TRAVEL/RANGE PISTOL TEAM & COMPETITION FEES 1651 MAIN ST CONCORD, MA 01742

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

GRACE COUGARS SHOTGUN TEAM	46-1355753	5,000	5,166	COST	AMMO/TRAVEL/RANGE & COMPETITION FEES
530 HIDEAWAY LANE EAST					
HIDEAWAY,TX 75771					

9,795

999 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

HASTINGS HIGH SCHOOL

TRAP TEAM

17810 POLK AVE HASTINGS, MN 55033

(a) Name and address of **(b)** EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 46-1478145 8.859 HOOSIER DADDYS AMMO/TRAVEL/RANGE SHOOTING TEAM & COMPETITION FEES 239 MAIN ST WHITELAND, IN 46184 PROMOTIONAL ITEMS 46-1566109 5.738 292 COST AMMO/TRAVEL/RANGE & COMPETITION FEES

2.997 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

MOUNT MICHAEL TRAP TFAM 1629 F MILITARY FREEMONT, NE 69025

6.470

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

46-1661470

CLAY CRASHERS INC.

18520 TWILIGHT TRAIL

EDEN PRAIRIE, MN 55346

(a) Name and address of (b) EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (a) Description of organization if applicable cash (book, FMV, appraisal non-cash assistance or assistance arant or government assistance other) 5.609 TAMPA BAY CLAYS YOUTH 46-1763779 IAMMO/TRAVEL/RANGE & COMPETITION FEES PROGRAM INC. 15615 SHOAL CREEK PLACE 46-2028706 10,000 IAMMO/TRAVEL/RANGE & COMPETITION FEES

4.411 COST

PROMOTIONAL ITEMS

IAMMO/TRAVEL/RANGE & COMPETITION FEES

ODESSA, FL 33556 KANSAS CITY CRUSHERS 731 MASSACHUSETTS

6.881

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

LAWRENCE, KS 66044

46-2128996

KCCL ORANGE CRUSHERS

914 BOULDER BLUFF LANE LOWELL, MI 49331

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) LAKE OCONEE SHOTGUN 46-2446801 5.696 AMMO/TRAVEL/RANGE TFAM & COMPETITION FEES PO BOX 280 AVEL/RANGE

999 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

RUILEDGE,GA 30663					
MID CAROLINA 4-H	46-2572303	5,617	1,998	COST	AMMO/TRAVEL/RANGE
1746 KENNERLY RD					& COMPETITION FEES
ORANGEBURG, SC 29115					

4,463

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

46-3083270

YUMA YOUNG GUNS INC.

6749 E MISSION ST

YUMA, AZ 85365

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) ALLEN EAGLES 46-3748275 9,078 IAMMO/TRAVEL/RANGE COMPETITIVE SHOOTING & COMPETITION FEES TEAM BOOSTERS CLUB INC 601 F MAIN ST ALLEN, TX 75002 PROMOTIONAL ITEMS SOUTH HARDIN TRAP TEAM 46-3904638 4,900 513 COST IAMMO/TRAVEL/RANGE & COMPETITION FEES

AMMO/TRAVEL/RANGE

& COMPETITION FEES

6,701

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

INC 28787 H AVE HUBBARD, IA 50122 MUSTANG SHOOTING

SPORTS

301 F 10 MAX RD PHOENIX, AZ 85085

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance PROMOTIONAL ITEMS 46-4046924 32.824 999 COST BHS DEMONS SHOOTING AMMO/TRAVEL/RANGE & COMPETITION FEES TFAM 4004 LAKE STREET BURLINGTON, WI 53105 AVEL/RANGE TITION FEES

WAYZATA YOUTH CLAY TARGET CLUB 821 MEANDER COURT MEDINA,MN 55340	46-4225267	5,185	0			AMMO/TRAVEL/RANGE & COMPETITION FEES
CUMBERLAND COUNTY	46-4249473	5,398	7,666	соѕт	PROMOTIONAL ITEMS	AMMO/TRAVEL/RANGE

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

CLAY CRUSHERS

497 BURGESS ROAD CROSSVILLE, TN 38572

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) OSKALOOSA SHOOTING 46-4260367 25.725 AMMO/TRAVEL/RANGE TFAM & COMPETITION FEES 812 SOUTH 15TH OSKALOOSA,IA 52577 MIDIAND UNIVERSITY 47-0376551 5.073 AMMO/TRAVEL/RANGE 900 N CLARKSON STREET & COMPETITION FEES FREMONT, NE 68025

PROMOTIONAL ITEMS GRAND ISLAND CENTRAL 47-0425014 3,009 3,948 COST AMMO/TRAVEL/RANGE CATHOLIC MIDDLEHIGH & COMPETITION FEES

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

SCHOOL 1200 RUBY AVE GRAND ISLAND, NE

688033764

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 47-0438012 15,246 16.085 COST PROMOTIONAL ITEMS CREIGHTON PREPARATORY IAMMO/TRAVEL/RANGE SCHOOL & COMPETITION FEES 7400 WESTERN AVE OMAHA, NE 68114 PROMOTIONAL ITEMS CENTERBURG YOUTH 47-0953689 18,980 12,098 COST AMMO/TRAVEL/RANGE SHOOTING SORTS INC. & COMPETITION FEES PO BOX 100 CENTERBURG, OH 43011 TURKEY VALLEY TRAP 47-2072458 6,611 AMMO/TRAVEL/RANGE SHOOTING TEAM INC. & COMPETITION FEES 3219 ST HWY 24

JACKSON JUNCTION, IA

52171

(a) Name and address of **(b)** EIN (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance WATERFORD WOLVERINE 47-2340836 6,325 5.057 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE SHOOTING TEAM & COMPETITION FEES PO BOX 325 WATERFORD, WI /TRAVEL/RANGE

531050000					
CONNORS STATE COLLEGE 700 COLLEGE RD WARNER,OK 74469	47-3436732	4,434	1,044	COST	АММО/Л & СОМР

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

COLLEGE

348 NE STATE ROAD 61 PRATT, KS 67124

PETITION FEES 2,994 COST PROMOTIONAL ITEMS PRATT COMMUNITY 48-0699112 3,665 AMMO/TRAVEL/RANGE

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 48-1127750 5.600 AMMO/TRAVEL/RANGE KINSLEY GUN CLUB INC. & COMPETITION FEES 1401 BRIGGS AVE KINSLEY, KS 67547

FORT HAYS STATE	48-1210777	20,205	0		AMMO/TRAVEL/RANGE
UNIVERSITY					& COMPETITION FEES
600 PARK STREET					
HAYS,KS 67601					

11,196 4,022 COST PROMOTIONAL ITEMS VIRGINIA TECH 54-0721690

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

BALCKSBURG, VA 24061

AMMO/TRAVEL/RANGE & COMPETITION FEES

FOUNDATION INC

902 PRICES FORK ROAD

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (d) A mount of cash (a) Description of organization if applicable cash (book, FMV, appraisal non-cash assistance or assistance arant or government assistance other) 54-2074129 5,787 MSU TRAP & SKEET TEAM IAMMO/TRAVEL/RANGE 901 S NATIONAL & COMPETITION FEES SPRINGFIELD, MO 65810 PROMOTIONAL ITEMS 4,278 1.044 COST R-S CENTRAL HIGH 56-1706752 IAMMO/TRAVEL/RANGE

SCHOOL & COMPETITION FEES 641 US HWY 221 NORTH RUTHERFORDTON, NC 28139

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

NEWBERRY, SC 29108

PROMOTIONAL ITEMS 1,958 3.107 COST NEWBERRY ACADEMY 57-0479013

IAMMO/TRAVEL/RANGE & COMPETITION FEES 2055 SMITH RD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) ORANGEBURG 57-0788617 4.365 1.538 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE PREPARATORY SCHOOL & COMPETITION FEES INC 2651 NORTH ROAD ORANGEBURG, SC 29118 THE KINGS'S ACADEMY 57-0917737 13.576 AMMO/TRAVEL/RANGE 1015 S EBENZER RD & COMPETITION FEES FLORENCE, SC 29501 VIRGINIA RIFLE AND 57-1234351 10.599 AMMO/TRAVEL/RANGE PISTOL CLUB & COMPETITION FEES PO BOX 400510

CHARLOTTESVILLE, VA

229044510

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance THE CITADEL 57-6000217 5,313 IAMMO/TRAVEL/RANGE 171 MOULTRIE ST & COMPETITION FEES CHARLESTON, SC 29409 RAVEL/RANGE ETITION FEES

CLEMSON UNIVERSITY	57-6000254	12,309	45	COST	PROMOTIONAL ITEMS	AMMO/TRA
108 ADMINISTRATIVE						& COMPET
SERVICES						
BUILDING						
CLEMSON.SC 29634						

6,805

AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

HARRIS COUNTY SCHOOL

SYSTEM

8281 GA HWY 16 HAMILTON, GA 31811

(a) Name and address of (b) EIN (c) IRC section (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (d) A mount of cash organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance 58-6000338 584 6,283 COST PROMOTIONAL ITEMS WALKER COUNTY BOARD IAMMO/TRAVEL/RANGE & COMPETITION FEES OFEDUCATION 100 RAMBLER DRIVE LAFAYETTE, GA 30728 RAVEL/RANGE FTITION FEES

AMMO/TRAVEL/RANGE

& COMPETITION FEES

JACKSONVILLE UNIVERSITY 2800 UNIVERSITY BLVD N JACKSONVILLE,FL 32211	59-0624412	14,495	0		AMMO/TRA & COMPET
FLORIDA 4-H CLUB	59-1000186	7,000	0		AMMO/TRA

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

FOUNDATION INC.

2142 SHEALY DR GAINESVILLE, FL 32611

(a) Name and address of **(b)** EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 37.076 18.925 COST PROMOTIONAL ITEMS MURRAY STATE 61-1005783 AMMO/TRAVEL/RANGE UNIVERSITY & COMPETITION FEES 200 SPARKS HALL MURRAY, KY 42071 61-1670953 8,380 AMMO/TRAVEL/RANGE & COMPETITION FEES 1342 INWOOD RD ROCHESTER, MI 48306

AMMO/TRAVEL/RANGE

& COMPETITION FEES

5,274

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

NM FAGIES ARNOLD JUNIOR

SHOOTERS INC

1025 BROWNELL ST LOUIS, MO 63122

(a) Name and address of **(b)** EIN (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance other) or aovernment assistance 62-0548913 18.913 1.998 COST PROMOTIONAL ITEMS BETHEL UNIVERSITY AMMO/TRAVEL/RANGE & COMPETITION FEES 325 CHERRY AVE MCKENZIE.TN 38201 PROMOTIONAL ITEMS 62-6001636 13.512 45 COST THE UNIVERSITY OF AMMO/TRAVEL/RANGE TENNESSEE & COMPETITION FEES 301 ANDY HOLT TOWER KNOXVILLE, TN 37996 PROMOTIONAL ITEMS DALEVILLE CITY BOARD OF 63-0499090 3,018 11,924 COST AMMO/TRAVEL/RANGE

& COMPETITION FEES EDUCATION

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

626 NORTH DALEVILLE

DALEVILLE, AL 36322

AVENUE

(a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (d) A mount of cash organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) OSU SPORT CLUB COUNCIL 73-1610917 17.046 5,325 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE 104 COLVIN CENTER & COMPETITION FEES ОК VEL/RANGE TION FEES

1,584 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

TILLWATER, OK 74078						
KLAHOMA STATE	73-6017987	2,702	5,534	соѕт		AMMO/TRAV
NIVERSITY					!	& COMPETIT
224 NORTH BOOMER RD						

3,500

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

UN STILLWATER, OK 74078

TRINITY UNIVERSITY

SAN ANTONIO, TX 78212

1 TRINITY PL

(a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) SCHREINER UNIVERSITY 74-1193459 9.138 2.024 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE 2100 MEMORIAL BLVD & COMPETITION FEES KERRVILLE, TX 78028 TEXAS A&M FOUNDATION 74-2245072 18,347 AMMO/TRAVEL/RANGE 401 GEORGE BUSH DRIVE & COMPETITION FEES COLLEGE STATION, TX 77840

PROMOTIONAL ITEMS DRIPPING SPRINGS 74-2508859 8,680 45 COST VOCATIONAL AG **BOOSTERS ASSOCIATION** INC

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

AMMO/TRAVEL/RANGE & COMPETITION FEES PO BOX 1008 DRIPPING SPRINGS, TX 78620

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (d) A mount of cash (g) Description of organization ıf applıcable cash (book, FMV, appraisal non-cash assistance or assistance grant or government assistance other) 5,085 THE UNIVERSITY OF TEXAS 74-6000203 AMMO/TRAVEL/RANGE & COMPETITION FEES AT AUSTIN 110 THINED CAMPILS DRIVE RAVEL/RANGE

PROMOTIONAL ITEMS

IAMMO/TRAVEL/RANGE & COMPETITION FEES

AUSTIN,TX 78712					
NEEDVILLE INDEPENDENT SCHOOL DISTRICT	74-6001773	1,936	6,660	COST	AMMO/TRAVEL/RANGE & COMPETITION FEES

9,507

877 COST

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

PO BOX 412

75-3229791

NEEDVILLE, TX 77461

WILMOT TRAP TEAM

2401 GRACE STREET TWIN LAKES, WI 53181

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal non-cash assistance or assistance or government assistance other) 76-0258468 5.943 COST PROMOTIONAL ITEMS MAGNOLIA 4-H CLUB IAMMO/TRAVEL/RANGE & COMPETITION FEES 9020 AIRPORT ROAD CONROE, TX 77303 RAVEL/RANGE ETITION FEES

AMMO/TRAVEL/RANGE

& COMPETITION FEES

GASTON YOUNG GUNS	80-0253909	20,775	2,024	COST	PROMOTIONAL ITEMS	AMMO/TR
SHOOTING SPORTS						& COMPET
215 TENNESSEE TRAIL						
LINCOLNTON,NC 28092						

28,126

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

CITADEL PISTOL CLUB

CIRCLE

9643 SOUTH CAROUSEL

SUMMERVILLE, SC 29485

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 80-0849535 19.567 1.998 COST PROMOTIONAL ITEMS UTAH SCHOLASTIC CLAY AMMO/TRAVEL/RANGE & COMPETITION FEES TARGET PROGRAM 550 S 1500 E SPANISH FORK, UT 84660 BILLINGS TRAP CLUB INC. 81-0303667 5,799 AMMO/TRAVEL/RANGE PO BOX 415 & COMPETITION FEES BILLINGS, MT 591030415 COEUR D'ALENE SCHOOL 82-6000811 7,024 AMMO/TRAVEL/RANGE & COMPETITION FEES

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

DISTRICT #271 1400 N NORTHWOOD

COEUR DALENE, ID 83814

CENTER COURT

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) NORTHWEST COMMUNITY 83-0211067 6,169 AMMO/TRAVEL/RANGE COLLEGE FOUNDATION & COMPETITION FEES 231 W 6TH ST POWELL, WY 82435 20.062 DROMOTIONAL ITEMS 02 6004406 AMMO/TRAVEL/RANGE ETITION FEES RAVEL/RANGE

WYOMING STATE 4-H FOUNDATION 1000 EAST UNIVERSITY AVENUE LARAMIE, WY 82071	83-6004106	28,063	8,921	COST	& COMPETITION FEES
PIEDRA VISTA HIGH SCHOOL JROTC A PART OF	85-6000130	3,285	6,506	соѕт	AMMO/TRAVEL/RANGE & COMPETITION FEES

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

FARMINGTON MUNICIPAL

5700 COLLEGE BLVD FARMINGTON, NM 87402

SCHOOL

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) PRESCOTT TRAP AND 86-6053839 5,000 292 COST PROMOTIONAL ITEMS IAMMO/TRAVEL/RANGE SKEET CLUB & COMPETITION FEES PO BOX 25706 PRESCOTT VALLEY, AZ 86312 MISSOURI YOUTH SPORT 23,068 87-0808275 IAMMO/TRAVEL/RANGE & COMPETITION FEES SHOOTING ALLIANCE 2107 CASTLEBROOK DR IMPERIAL, MO 630523815 90-0421533 6,000 292 COST PROMOTIONAL ITEMS HUMBOLDT HIGH SCHOOL AMMO/TRAVEL/RANGE

& COMPETITION FEES

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

WILDCAT TRAP CLUB

1008 8TH AVE N HUMBOLDT, IA 50548

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) ALASKA SCTP 90-0635354 70.811 4.778 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE 2321 PALMER-WASILLA & COMPETITION FEES HWY WASILLA, AK 99654 /TRAVEL/RANGE PETITION FEES

& COMPETITION FEES

TEAM GOTTA 6558 THOMAS CREEK DRIVE SEDROWOOLLEY, WA 98284	90-0938500	7,599	1,998	COST		AMMO/TRAVEL/RANGE & COMPETITION FEES
SEATTLE SKEET & TRAP	91-0777611	5,323	310	COST	PROMOTIONAL ITEMS	AMMO/TRAVEL/RANGE

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

SEATILE SKEET & TRAP CLUB

26520 292ND AVE RAVENSDALE, WA 980518633

(a) Name and address of **(b)** EIN (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) SAN DIEGO ACADEMY OF 91-2133311 6.009 2.170 COST PROMOTIONAL ITEMS AMMO/TRAVEL/RANGE FIREARMS EDUCATION & COMPETITION FEES (SAFE) 2082 WILLOW GLEN DR ELCAJON, CA 92019 PROMOTIONAL ITEMS 93-1175526 3.315 3.039 COST LEBANON COMMUNITY AMMO/TRAVEL/RANGE & COMPETITION FEES SCHOOLS 485 S 5TH STREET LEBANON, OR 97355

1,291 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

3,800

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

93-6000537

JEFFERSON COUNTY

445 SE BUFF STREET MADRAS, OR 97741

SCHOOL DISTRICT 509-J

(a) Name and address of **(b)** EIN (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash if applicable cash (book, FMV, appraisal, non-cash assistance or assistance organization arant or government assistance other) 4.104 999 COST PROMOTIONAL ITEMS HENLEY HIGH SCHOOL 93-6000543 AMMO/TRAVEL/RANGE 8245 HIGHWAY 39 & COMPETITION FEES KLAMATH FALLS, OR 97603 PROMOTIONAL ITEMS 94-1641654 9,429 999 COST AMMO/TRAVEL/RANGE & COMPETITION FEES

8,316 COST

PROMOTIONAL ITEMS

AMMO/TRAVEL/RANGE

& COMPETITION FEES

LINCOLN RIFLE CLUB AND JUNIOR DIVISION PO BOX 582 LINCOLN, CA 95649

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

WILTON BIBLE CHURCH

9697 DILLARD ROAD

WILTON, CA 95693

(a) Name and address of (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of **(b)** EIN (c) IRC section (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) AMMO/TRAVEL/RANGE

6.293 PIONEER SPORTSMEN'S 94-3442656 & COMPETITION FEES CLUB

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

CHEM DEPT

PLATTEVILLE, WI 53818

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Schedule J (Form 990)

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.

DLN: 93493320006396 OMB No 1545-0047

reas	· ·	F Information about Schedule 3 (1)	onii 330) and its instructions is at www.iis.gov/101m330.	Insp	ectio	n
	nal Revenue Service me of the organiz	<u>l</u> zation	Employer identifi	cation nur	nber	
MIC	WAY USA FOUNDATI	ION INC				
Рa	rt I Questi	ons Regarding Compensation	26-1573088			
	Questi	ons regarding compensation	·		Yes	No
1a	• • • • • • • • • • • • • • • • • • • •		vided any of the following to or for a person listed on Form		103	140
	_ `	•	to provide any relevant information regarding these items			
	<u>`</u>	s or charter travel	Housing allowance or residence for personal use		 	
	•	companions	Payments for business use of personal residence		 	
	·	nification and gross-up payments	Health or social club dues or initiation fees		 	
	Discretion	nary spending account	Personal services (e.g., maid, chauffeur, chef)	l I	 	
b			ganization follow a written policy regarding payment or scribed above? If "No," complete Part III to explain	1b		
2			eimbursing or allowing expenses incurred by all			
	directors, trust	ees, officers, including the CEO/Exec	utive Director, regarding the items checked in line 1a?	2		
3	organization's (CEO/Executive Director Check all th	nization used to establish the compensation of the at apply Do not check any boxes for methods ation of the CEO/Executive Director, but explain in Part III			
	Compensa	ation committee	Written employment contract			
	Independe	ent compensation consultant	Compensation survey or study			
	Form 990	of other organizations	✓ Approval by the board or compensation committee			ļ
4	During the year or a related org		Part VII, Section A, line 1a with respect to the filing organiza	tion		
а	Receive a seve	rance payment or change-of-control p	payment?	4a		Νo
b	Participate in, o	or receive payment from, a supplemen	ital nonqualified retirement plan?	4b		Νo
c	Participate in, o	or receive payment from, an equity-ba	sed compensation arrangement?	4c		Νo
	If "Yes" to any	of lines 4a-c, list the persons and pro	ovide the applicable amounts for each item in Part III			
	Only 501(c)(3)	, 501(c)(4), and 501(c)(29) organizat	ions must complete lines 5-9			
5	For persons list		, line 1a, did the organization pay or accrue any			
а	The organizatio	on?		5a		Νo
b	Any related org	ganization?		5b		Νo
	If "Yes," on line	e 5a or 5b, describe in Part III				
6		ted on Form 990, Part VII, Section A contingent on the net earnings of	, line 1a, did the organization pay or accrue any			
а	The organizatio	on?		6 a		Νo
b	Any related org	ganization?		6 b		Νo
	If "Yes," on line	e 6a or 6b, describe in Part III				
7		ted on Form 990, Part VII, Section A described in lines 5 and 67 If "Yes," d	, line 1a, did the organization provide any non-fixed escribe in Part III	7		No
В	,		oald or accured pursuant to a contract that was Regulations section 53 4958-4(a)(3)? If "Yes," describe	8		No
9	If "Yes" on line	8, dıd the organızatıon also follow the	e rebuttable presumption procedure described in Regulations			140

section 53 4958-6(c)?

Page 2

Schedule J (Form 990) 2015

155.769

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	
	Base (1) compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990

1 RICHARD LEEPER

EXECUTIVE DIRECTOR

155.769

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015	Page 3
Part III Supplemental Inform	nation
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
Return Reference	Explanation

Schedule J (Form 990) 2015

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DLN: 93493320006396

2015

OMB No 1545-0047

Noncash Contributions

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

► Attach to Form 990.

Open to Public

Department of the Treasury

(Form 990)

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Inspection

	ne of the organization				Employer identificat	ion nur	mber	
МΙΟΛ	VAY USA FOUNDATION INC				26-1573088			
Pā	rt I Types of Property				20 1373000			
		(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 de noncash contrib	etermır	_	ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
_	goods				<u> </u>			
	Cars and other vehicles				 			
7	•							
	Intellectual property Securities—Publicly traded .		8	1 242 574	IDEADILY DETERMI	TNIADI	E EMV	
9	Securities—Publicity traded . Securities—Closely held stock .	X	0	1,342,374	READILY DETERMI	.NA DLI	□ FI*I V	
	Securities—Partnership, LLC,							
12	or trust interests				1			
	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other	X	1	1,214,084	APPRAISAL			
	Collectibles							
	Food inventory							
	Drugs and medical supplies .				<u> </u>			
	Taxidermy							
	Historical artifacts Scientific specimens				+			
	Archeological artifacts				+			
	Other • ()				+			
	Other ▶ ()				-			
	Other ▶ ()							
	Other • (
	Number of Forms 8283 received for which the organization comple				29			
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1 through 28, that		Yes	No
	it must hold for at least three ye	ars from th	e date of the initial contribu	ition, and which is not requ	ired to be used			
	for exempt purposes for the enti					_	\	, .
						30a	\dashv	No
	If "Yes," describe the arrangem							l
31	Does the organization have a gif	t acceptan	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32 a	Does the organization hire or us	e third part	ies or related organizations	to solicit, process, or sell	noncash			

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

contributions?

b If "Yes," describe in Part II

describe in Part II

32a

Yes

Return Reference Explanation

THE ORGANIZATION HAS PERIODICALLY HITLIZED LICENSED REAL ESTATE AGENTS TO

PART I, LINE 32B

THE ORGANIZATION HAS PERIODICALLY UTILIZED LICENSED REAL ESTATE AGENTS TO MARKET AND SELL REAL ESTATE THAT HAD BEEN GIFTED BY DONORS

Schedule M (Form 990) (2015)

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Complete to Form 99	ntal Information to Form 990 or 990 provide information for responses to specific questions 0 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Bout Schedule O (Form 990 or 990-EZ) and its instruction www.irs.gov/form990.	2015 Open to Public Inspection			
Name of the organizati MIDWAY USA FOUNDATION	Employer identifi 26-1573088	cation number				
990 Schedule O, S	Supplemental Inform	ation				
Return	Reference	Explanation				
FORM 990, PART VI, S	SECTION A, LINE 2	SEVERAL MEMBERS OF THE BOARD OF DIRECTORS ARE FAMILY MEMBERS				

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

DLN: 93493320006396

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FORM 990, PART VI, SECTION B, LINE 11

Return Reference Explanation FORM 990, PART VI. THE FOUNDATION ANNUALLY REQUIRES BOARD MEMBERS TO SIGN AN AFFIRMATIVE STATEMENT REGARDING

SECTION B, LINE 12C	EACH YEAR.
FORM 990, PART VI.	THE ORGANIZATION DOES MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINAN

SECTION C. LINE 19 CIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AS PROVIDED BY LAW

990 Schedule O, Supplemental Information