Form **990** 

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047 2017 Open to Public

mer	nai Reven	■ Go to www irs.gov/Form990 for instructions a	and the latest	information. [ 7 ]	A HISPECTON
A	For the	e 2017 calendar year, or tax year beginning , and ending			
В	Check if ap	pplicable C Name of organization		D Emp	loyer identification number
	Address ch	HIGHER CALLING WRESTLING CLU	B, INC.		
$\exists$		Doing hisiness as C/O DEWAYNE MORROW	<u> </u>	38-	-3756708
$\vdash$	Name cha	Number and street (or P O box it mail is not delivered to street address)		Room/suite E Teler	phone number
	Initial retur	· - · · · · · · · · · · · · · · · · · ·			
	Final return terminated				
$\equiv$		CLEVELAND TN 37312		G Gross	receipts \$ 73,334
$\Box$	Amended r	F Name and address of principal officer		111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	for subordinates? Yes X No
	Application	pending DEWAYNE MORROW		H(a) Is this a group return	for subordinates? Yes No
		255 JAMESON DRIVE		H(b) Are all subordinates	included? Yes No
		GEORGETOWN TN 37336	2	If "No," attach a	list (see instructions)
$\overline{}$	Tax-exem	(T)	[ (e <sub>7</sub> )	7	
÷	Website	THE COURT OF THE COURT THE COURT OF THE COUR	·	H(c) Group exemption nu	ımher 🕨
<u></u>	_		1 7	ear of formation 2013	M State of legal domicile TN
	Form of or		1 12 1	ear or formation 2020	in State of legal definence == 1
	art I	Summary			
	1 8	Briefly describe the organization's mission or most significant activities	WALLER 1		
မွ		TO FOSTER A LOVE FOR THE SPORT OF WRESTLING IN	YOUTH A	THLETES.	
an					
& Governance					
Š	2 0	Check this box ▶ ☐ if the organization discontinued its operations or disposed of	more than 25	6% of its net assets	
ڻ مع		lumber of voting members of the governing body (Part VI, line 1a)			3   4
Ş		lumber of independent voting members of the governing body (Part VI, line 1b)		4	1 4
Activities		otal number of individuals employed in calendar year 2017 (Part V, line 2a)		<del></del>	5 0
흦				<del></del>	s 0
¥		otal number of volunteers (estimate if necessary)		<del></del>	
		otal unrelated business revenue from Part VIII, column (C), line 12		<del>-</del>	
	bN	let unrelated business taxable income from Folm 990-中国会社IVED	<del> </del>	Prior Year	Current Year
		0	F	45,03	***************************************
흑	1	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	·		
en	9 P	Program service revenue (Part VIII, line 2g)	-	14,27	<del></del>
Revenue	10 Ir	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	-		0
Œ	11 C	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c 10c mente) UT	<b>l</b>	1,00	
	12 T	otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	• <u> </u>	60,30	
	13 G	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	Ĺ	1,84	8,331
	14 B	enefits paid to or for members (Part IX, column (A), line 4)			0
ı,		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	Γ		0
penses	1	Professional fundraising fees (Part IX, column (A), line 11e)	F	·	0
e	1	otal fundraising expenses (Part IX, column (D), line 25) ▶	0		
X	1	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	, t	54,97	8 66,210
	1	·	-	56,82	
	1	otal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	F	3,48	
	19 K	tevenue less expenses Subtract line 18 from line 12	<u> </u>	Beginning of Current Yea	
tso	20 +	Catal assets (Dart V. June 16)		8,55	
Net Assets or Fund Balances	20 1	otal assets (Part X, line 16)	-		0 7,349
달	21 T	otal liabilities (Part X, line 26)	-	8,55	
		let assets or fund balances Subtract line 21 from line 20		6,55	1,349
	art II	Signature Block			
U	nder pen	alties of perjury, I declare that I have exemined this return, including accompanying schedul	es and stateme	ents, and to the best of my	y knowledge and belief, it is
		ct, and complete Declaration of preparer (Piper than officer) is based on all information of w	hich preparer n	as any knowledge	
$\gtrsim$		Me warm Dille			1/2/19
ე გე	ın İ	Signature of officer		C	Pate /
Щe	re	DEWAYNE MORROW `	TREAS	URER	
		Type or print name and title	/		
50 Vai		Print/Type preparer's name Preparer's name Preparer's name	6 00	Date Ch	eck If PTIN
Pai	d		E CH	06/27/19 sel	<b>□</b>
	parer	WILLIAM B. KIRKSEY, CPA  Firm's name  ARNETT, KIRKSEY, KIMSEY, SULLIVA	N TAV U		60 AHAAFF4
	Only		M, LIMI, F	IALL Firm's EIN	, UL 0130334
		4395 N OCOEE ST			400 47C EE01
3	<del></del>	Firm's address CLEVELAND, TN 37312-4832		Phone no	423-476-5581
<u>Ma</u> ý	the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No
		ork Reduction Act Notice, see the separate instructions.	- <del>-</del>	$\sim$	Form <b>990</b> (2017)
DAA	1)			(1/1/	<b>ン</b>

Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III  1 Briefly describe the organization's mission TO FOSTER A LOVE FOR THE SPORT OF WRESTLING IN YOUTH ATHLETES.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O  4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	Yes X No
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4a (Code ) (Expenses \$ 74,541 including grants of \$ 8,331 ) (Revenue \$	<b>17,670</b> )
HIGHER CALLING WRESTLING CLUB GIVES YOUNG WRESTLERS OF ALL SKILL LEV	
CHANCE TO LEARN ABOUT, PRACTICE, AND COMPETE IN WRESTLING. THE WREST	
DEVELOP A STRONG WORK ETHIC, MORAL CHARACTER, AND GOOD SPORTSMANSHIE	?.
4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$	)
1	
·	
4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$	
7,	
4d Other program services (Describe in Schedule O )	

foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

for any foreign organization? If "Yes," complete Schedule F, Parts II and IV

Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

If "Yes," complete Schedule G, Part III

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Forn	1 990 (2017) HIGHER CALLING WRESTLING CLUB, INC. 38-3756708	HULL	P	age 🤅
Pi	art 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	_4_		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	ŀ		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			ĺ
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			į
	VII, VIII, IX, or X as applicable			ĺ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	<u></u> .	_X
С	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	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	<u> </u>	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13_	L	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			

X 17

X

X

X

X

14b

15

16

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## Form 990 (2017) HIGHER CALLING WRESTLING CLUB, INC. 38-3756708

## Part IV Checklist of Required Schedules (continued)

	Oncombro Required Contained (commuce)		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			l
	through 24d and complete Schedule K If "No," go to line 25a	24a_		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			ĺ
	current or former officers, directors, trustees, key employees, highest compensated employees, or			1
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			1
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	_28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	.		37
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			v
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			х
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	1 24		v
25-	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	256		
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
30	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20	[	x
37	related organization? If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
J1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	"		
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
		1 44 1	- 1	

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Form 990 (2017)

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X 4a account)? If "Yes." enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c) a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 9 Did the sponsoring organization make any taxable distributions under section 4966? 9a 9b b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter 11 11a a Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers 13a a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c c Enter the amount of reserves on hand X 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 4 1b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 X 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X 8a The governing body? X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes." did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No." go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) 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 255 JAMESON DRIVE DEWAYNE MORROW TN 37336 GEORGETOWN

DAA

Form 990 (201	(7) HIGHER CALLING WREST	LING CLUB,	INC.	38-3 <u>756708</u>	Page '
Part VII	Compensation of Officers, Direc	tors, Trustees, k	(ey Empl	oyees, Highest Compe	ensated Employees, and
•	Independent Contractors				
	Check if Schedule O contains a res	sponse or note to	any line i	n this Part VII	

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

🗶 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (F) (A) Estimated Reportable Reportable Average Position Name and Title compensation from amount of (do not check more than one compensation hours per box, unless person is both an from related other week organizations compensation officer and a director/trustee) (list any organization (W-2/1099-MISC) from the hours for related ndıvıdual nstitutional trustee key employee (W-2/1099-MISC) organization lighest compensated mployee and related organizations organizations below dotted trustee line) (1) CHAD LAXTON 2.00 0 0 0 PRESIDENT 0.00 X X (2) JIM MEAGHER 2.00 X X 0 0 0.00 VICE PRESIDENT (3) TODD BREZNA 2.00 0 0 0.00 X X SECRETARY (4) DEWAYNE MORROW 2.00 X X 0 0 0 0.00 TREASURER (5) (6) (7) (8)(9) (10)(11)

Form **990** (2017)

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Part VII

(A) Name and title		(B) (C) Average hours per week box, unless person is both (list any officer and a director/truste hours for				s both	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the			
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(11-2 1000-11100)	orgar and a	nization related izations	
			i										
											:		
1b c d	Sub-total  Total from continuation she  Total (add lines 1b and 1c)	ets to Part VII, §	Secti	on A	4			<b>&gt; &gt; &gt;</b>					
2	Total number of individuals (in reportable compensation from				thos	e lis	ted a	bov	ve) who received more than	\$100,000 of		Yes	No
3	Did the organization list any for employee on line 1a? If "Yes, For any individual listed on lin organization and related organization."	" complete Sched e 1a, is the sum	<i>dule</i> of re	J for	suc. able	<i>h ind</i> com	<i>pens</i>	<i>ial</i> satio	on and other compensation	from the	3		x
5	individual  Did any person listed on line for services rendered to the o	rganization? If "Y								r ındıvıdual	5		х
Sect 1	complete this table for your fi compensation from the organ	ve highest comp	ensa	ted i	nder	oend	ent o	cont	ractors that received more	than \$100,000 of			
	Name and	(A) 5 business address	Jilipe	-113a	LIOII	101 11	16 06		Descrip	(B) tition of services		(C) Compensa	ation
												_	
2	Total number of independent received more than \$100,000	contractors (inclu	ıdıng ı fron	but the	not e org	lımıte anız	ed to	tho	se listed above) who	0			<u></u>
DAA											F	orm <b>99</b>	0 (2017)

Pa	ırt V	Statement of Reverse Check if Schedule 9		s a response o	or note to any line	in this Part VIII		
_					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from lax under sections 512-514
ıts	1a	Federated campaigns	1a				·····	
irar	b	Membership dues	1b					
S, E	С	Fundraising events	1c					
ar/ar/	d	Related organizations	1d					
s, C mil	е	Government grants (contributions)	1e					
ion r Si	f	All other contributions, gifts, grants,						
but		and similar amounts not included above	1f	54,514				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a	-1f \$					
Sur	h	Total. Add lines 1a-1f		<b>•</b>	54,514			
Program Service Revenue				Busn Code				
ver	2a	TOURNAMENT INCOME			16,240	16,240		
e Re	b	CLUB DUES			800	800		
ζį	С	EQUIPMENT & UNIFORM	FEES		450	450		
Sei	d	CAMP INCOME			180	180		-
ram	е							
rog		All other program service reve	nue	<u> </u>	4 = 4 = 4			
_		Total. Add lines 2a–2f		<u> </u>	17,670			T
	3	Investment income (including	dividends, i	nterest,				,
		and other similar amounts)						
	4	Income from investment of tax	c-exempt bo	na proceeas				
	5	Royalties		(v) Personal				
		(i) Real		(II) Personal				
	6a	Gross rents						
	b	Less rental exps						
	c d	Rental inc or (loss)  Net rental income or (loss)						
		Gross amount from (i) Securities		(II) Other				
		sales of assets		(4) 5				
	b	other than inventory  Less cost or other						
	~	basis & sales exps						
'	С	Gain or (loss)						
		Net gain or (loss)		<b>•</b>				
4.		Gross income from fundraising eve	ents					
Other Revenue		(not including \$						
eve		of contributions reported on line 1c	)					
ď		See Part IV, line 18	a					
the	b	Less direct expenses	b					
0	С	Net income or (loss) from fund	draisin <u>g eve</u>	nts 🕨				···
	9a	Gross income from gaming activities	es					
		See Part IV, line 19	a					
	b	Less direct expenses	b					
	С	Net income or (loss) from gam	ning activitie	s 🕨			······	
	10a	Gross sales of inventory, less						
		returns and allowances	a					
	b	Less cost of goods sold	b					
	С	Net income or (loss) from sale	s of invento		•			
		Miscellaneous Revenue		Busn Code				
	11a	REDEPOSIT OF CHANGE I	FOR TOURN		800	800	<u> </u>	
	b	REFUNDS			350	350		
	C						•	
	d	All other revenue			1 150			
		Total. Add lines 11a-11d			1,150 73,334	18,820	0	0
	12	Total revenue. See instruction	115		13,334	10,020		

Form 990 (2017) HIGHER CALLING WRESTLING CLUB, INC. 38-3756708

	art IX Statement of Functional Ex				· · ·
Sect	ion 501(c)(3) and 501(c)(4) organizations must			nplete column (A)	
	Check if Schedule O contains a res	·			<del></del>
Do n	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8	Bb, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	8,331	8,331		
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	-	<u> </u>		
6	Compensation not included above, to disqualified	,	1		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits			· · · · · · · · · · · · · · · · · · ·	
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal (		<del></del>		
С	Accounting				
d	Lobbying	<u> </u>			
е	Professional fundraising services See Part IV, line 17	/		<del> </del>	
f	Investment management fees				
g	Other, (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	<del></del>	<del></del> .		
12	Advertising and promotion				
13	Office expenses			<u> </u>	
14	Information technology				
15	Royalties				
16	Occupancy	6 102	6,102		
17	Travel	6,102	0,102	-	
18	Payments of travel or entertainment expenses	5			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			· · · · · · · · · · · · · · · · · · ·	·
20	Interest Payments to office to			<u> </u>	· · · · · · · · · · · · · · · · · · ·
21	Payments to affiliates		·	<u> </u>	
22	Depreciation, depletion, and amortization		- <del></del>	<del></del>	
23	Insurance			<del></del>	
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.)  CONTRACTED COACHES	35,602	35,602		
a b	EQUIPMENT & UNIFORMS	10,337	10,337		
	TOURNAMENT EXPENSE	4,748	4,748		
c d	TOURNAMENT FEES	3,674	3,674		
-	All other expenses	5,747	5,747		
e 25	Total functional expenses. Add lines 1 through 24e	74,541	74,541	0	Ō
25 26	Joint costs. Complete this line only if the	1,311			
_0	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)		,		
DAA	10.10.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	<u></u>		,	Form <b>990</b> (2017)

<u>P</u>	art )	C - Balance Sheet		<u> </u>		
		Check if Schedule O contains a response or not	e to any line in this Part X		, <u>, , , , , , , , , , , , , , , , , , </u>	
				(A)		(B)
				Beginning of year	L.	End of year
	1	Cash—non-interest bearing		8,556	1	7,349
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and former of	fficers, directors,			
		trustees, key employees, and highest compensated er	nployees			
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified pe	rsons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B)				
ς		sponsoring organizations of section 501(c)(9) voluntary	employees' beneficiary			
		organizations (see instructions) Complete Part II of Sc			6	
Assets	7	Notes and loans receivable, net			7	
As	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D	10a			
	Ь	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11	-	13		
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)	8,556	16	7,349
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV		21		
ý	22	Loans and other payables to current and former officer	Page			
Liabilities		trustees, key employees, highest compensated employees				
abil		disqualified persons Complete Part II of Schedule L			22	
ت	23	Secured mortgages and notes payable to unrelated thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelated third			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			
	l	of Schedule D			25	
	26	Total liabilities Add lines 17 through 25		0	26	0
		Organizations that follow SFAS 117 (ASC 958), che	ck here ▶ 🔲 and			
es		complete lines 27 through 29, and lines 33 and 34.				
and	27	Unrestricted net assets			27	
Balances	28	Temporarily restricted net assets			28	
2	29	Permanently restricted net assets			29	
Fund		Organizations that do not follow SFAS 117 (ASC 95	i8), check here ▶ 🛱 and			
ō		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds			30	
ASS	31	Paid-in or capital surplus, or land, building, or equipme	nt fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income,		8,556	32	7,349
Z	33	Total net assets or fund balances		8,556		7,349
	34	Total liabilities and net assets/fund balances		8,556	34	7,349
_~						000

orm	1 990 (2017) HIGHER CALLING WRESTLING CLUB, INC. 38-3756708				Pa	ge 12		
Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1			73,			
2	Total expenses (must equal Part IX, column (A), line 25)	2			74,			
3	Revenue less expenses Subtract line 2 from line 1	3			-1,:			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		8,556				
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities 6							
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9						
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line							
	33, column (B))	10_			7,	<u> 349</u>		
Pa	rt XII Financial Statements and Reporting					<del></del>		
	Check if Schedule O contains a response or note to any line in this Part XII					Ш.		
			_		Yes	No		
1	Accounting method used to prepare the Form 990 X Cash Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in							
	Schedule O							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		<u>X</u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or							
	reviewed on a separate basis, consolidated basis, or both							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		_	2b		<u>X</u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a							
	separate basis, consolidated basis, or both							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight							
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		Ļ	2c				
	If the organization changed either its oversight process or selection process during the tax year, explain in							
	Schedule O							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in							
	the Single Audit Act and OMB Circular A-133?		L	3a		<u> </u>		
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			3b				
				For	m <b>99</b> 0	(2017)		

## SCHEDULE A . (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Internal Revenue Service

Name of the organization

Part I

Department of the Treasury

HIGHER CALLING WRESTLING CLUB, INC.

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

Employer identification number 38-3756708

1		A church, cor	nvention of churches, or ass	ociation of churches described	ın sectioi	170(b)(	1)(A)(i).				
2	$\Box$	A school des	cribed in section 170(b)(1)(	A)(ii) (Attach Schedule E (Forn	n 990 or 9	990-EZ))	/ M				
3	П	A hospital or	a cooperative hospital servi-	ce organization described in sei	ction 170	(b)(1)(A)(	iii).				
4	П	A medical res	search organization operated	d in conjunction with a hospital o	described	ın sectio	on 170(b)(1)(A)(iii). Enter the h	ospital's name,			
	_	city, and state	e								
5	$\Box$	An organizati	on operated for the benefit of	of a college or university owned	or operat	ed by a g	overnmental unit described in				
			b)(1)(A)(iv). (Complete Part								
6				overnmental unit described in s	ection 17	'0(b)(1)(A	s)(v).				
7	M			substantial part of its support fro				2			
		_	section 170(b)(1)(A)(vi). (C								
8		A community	trust described in section 1	I <mark>70(b)(1)(A)(vi).</mark> (Complete Part	: II )						
9	П	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college									
		or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university.									
10	X	receipts from support from	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)								
11		An organizati	on organized and operated	exclusively to test for public safe	ety See s	ection 5	09(a)(4).				
12		An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3).  Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.									
	а	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.									
	b	_ ``		pervised or controlled in connec		ıts suppo	rted organization(s), by having				
	-	control or	management of the suppor	ting organization vested in the s Part IV, Sections A and C.							
	С			upporting organization operated tructions) You must complete				rith,			
	d	that is no	t functionally integrated. The	I A supporting organization ope e organization generally must sa nust complete Part IV, Section	atisfy a dis	stribution	requirement and an attentiven				
	е	Check the	is box if the organization rec	eived a written determination front- n-functionally integrated support	om the IR	S that it is					
	f		nber of supported organizati								
	g	Provide the fo	ollowing information about th	e supported organization(s)							
(1)	Nam	e of supported	(II) EIN	(iii) Type of organization	(IV) Is the o	organization	(v) Amount of monetary	(vi) Amount of			
	org	ganization		(described on lines 1–10	1 '	ur governing	support (see	other support (see			
				above (see instructions))		ment?	instructions)	instructions)			
				···	Yes	No _					
(A)											
(B)											
(C)											
(D)											
(E)											
					ļ	ļ <u>.</u>					
Total			A A N A A A A A A A A A A A A A A A A A		L	ł	Cabadula	(Form 990 or 990-E7) 2017			

,56708 06/27/2019 3 10 PM Pg 17 HIGHER CALLING WRESTLING CLUB, INC. 38-3756708 Schedule A (Form 990 or 990-EZ) 2017 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 201/ (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total, Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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) Total support. Add lines 7 through 10 11 12 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2016 Schedule A, Part II, line 14 15 15 33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI/how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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instructions

Schedule A (Form 990 or 990-EZ) 2017

HIGHER CALLING WRESTLING CLUB, INC. 38-3756708

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

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

Sec	tion A. Public Support	quality arraor a	THE LEGICO HELECU	ocion, picaco c	omproto : a.t.	<i></i>	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")				45,038	54,514	99,552
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			_	15,270	18,820	34,090
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5-	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5				60,308	73,334	133,642
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year				30,545	35,383	65,928
С	Add lines 7a and 7b				30,545	35,383	65,928
8	Public support (Subtract line 7c from line 6)					_	67,714
Sec	tion B. Total Support				-		
Caler	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6				60,308	73,334	133,642
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,				60, 200	73,334	133,642
4.4	and 12) First five years. If the Form 990 is for the	organization's firs	t second third fo	urth or fifth tay ve	60,308		13,042
14	organization, check this box and stop her	_	st, second, tillia, ic	fulli, of filli tax yes	ar as a section sort	(0)(0)	▶ □
Sec	tion C. Computation of Public Su		tage				
15	Public support percentage for 2017 (line 8			nn (f))		15	50.67%
16	Public support percentage from 2016 Scho		-	<b>、</b> ,,		16	49.35 %
-	tion D. Computation of Investme						
17	Investment income percentage for 2017 (i	ine 10c, column (f	) divided by line 13	3, column (f))		17	%
18	Investment income percentage from 2016					18	%
19a	33 1/3% support tests—2017. If the orga	nization did not ch	eck the box on lin				( <del>G</del> F)
	17 is not more than 33 1/3%, check this be						► X
b	33 1/3% support tests—2016. If the orga						. [
	line 18 is not more than 33 1/3%, check th						<b>▶</b> ∐
20	Private foundation. If the organization did	d not check a box	on line 14, 19a, or	19b, check this bo	x and see instruction	ons	▶ ∐

Page 3

Page 4

Schedule A (Form 990 or 990-EZ) 2017 **Supporting Organizations** 

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

Section A	۱. Ali Support	ting Organiz <u>at</u>	ions

supporting organizations)? If "Yes," answer 10b below

determine whether the organization had excess business holdings )

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

Yes No 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 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2) Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a (b) and (c) below 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 3b organization made the determination Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) 3с purposes? 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")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations 4b Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) 4c nurnoses 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 Type I or Type II only. Was any added or substituted supported organization part of a class already 5b designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c С Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? 8 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 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 Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which 9b the supporting organization had an interest? If "Yes," provide detail in Part VI. Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated 10a

Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

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

trustees of each of the supported organizations? Provide details in Part VI.

3a

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

3

4

5

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule	A	(Form	990	or	990	-EZ)	2017

3

4

Enter greater of line 2 or line 3

instructions)

Income tax imposed in prior year

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2017

e Excess from 2017

Schedule A (Form 990 or 990-EZ) 2017

HIGHER CALLING WRESTLING CLUB, INC. 38-3756708

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Part VI

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

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No 1545-0047

▶ Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990.

Open to Public inspection

Employer identification number

e X (h) Purpose of grant Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form or assistance Yes 38-3756708 noncash assistance (g) Description of 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 8,331 the selection criteria used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table INC (c) IRC section (if applicable) HIGHER CALLING WRESTLING CLUB, General Information on Grants and Assistance (p) EIN (a) Name and address of organization or government (1) MISC. DONATIONS Part Part 7 6 4 <u>(2)</u> 9 6 8 6 ල

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2017)

Schedule | (Form 990) (2017) HIGHER CALLING WRESTLING CLUB, INC. 38-3756708

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1 recipients (c) Amount of recipients cash grant 4 cash grant 5	Part III	Grants and Other Assistance to Domestic Individu Part III can be duplicated if additional space is needed	Domestic Individua onal space is needed	ils. Complete if the o	organization answere	<b>luals.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 22	IV, line 22
		(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, (f) Description of noncash assistance FMV, appraisal, other)
3 5 6					:		
3 5 6 6							
5 6							
5 6	en						
6 6 7	-						
6 7							
9	2						
7	မွှ						
	2						
Part IV Supplemental Information. Provide the information required in Part I, lin	Part IV	Supplemental Information. Prov	vide the information re	quired in Part I, line	2, Part III, column (b	required in Part I, line 2, Part III, column (b), and any other additional information	Information

, SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

HIGHER CALLING WRESTLING CLUB, INC.

Employer identification number 38-3756708

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 REVIEWED BY THE TREASURER BEFORE IT WAS FILED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.